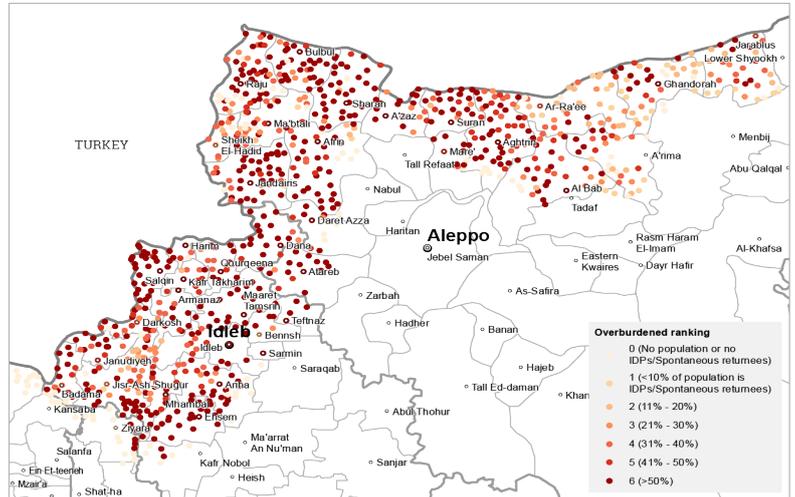


HIGHLIGHTS

- 138 people have tested positive for COVID-19 in northwest Syria as of 8 September. Response efforts focus on contact tracing, containing the spread of the virus and raising awareness about COVID-19 risks and precautions.
- Increasing hostilities continue to be reported in the Idlib area and northern Aleppo, especially in locations south of the M4 highway. Explosive hazards and tensions between non-state armed groups further imperil the lives of civilians.
- COVID-19 and economic deterioration compound existing humanitarian needs across all sectors in all parts of northwest Syria.

Proportion of IDPs and Spontaneous returnees out of total population



Source: Population Taskforce, April 2020

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

4.1 M

Living in northwest Syria

2.8 M

People in need of humanitarian assistance

2.7 M

Internally displaced people in northwest Syria

76%

Of the overall population are women and children

SITUATION OVERVIEW

The humanitarian situation remains dire as the additional strains related to the COVID-19 pandemic and the economic downturn in Syria continue to impact the 4.1 million people living in northwest Syria. Nearly a decade of conflict marked by multiple displacements, economic shocks, military operations and violence is continuously eroding the resilience of the population. An estimated 2.8 million people rely on humanitarian assistance to meet their basic needs such as shelter, food, water and health.

Of the 6,652 tests carried as of 8 September, 138 people have tested positive for COVID-19 in northwest Syria. Since the confirmation of the first positive case on 9 July, two deaths associated with COVID-19 were reported while 81 patients have reportedly recovered. Of the 55 active cases, 32 cases are in Aleppo governorate's Afrin, Al Bab, Jarablus and Jebel Saman districts, while 23 cases are in Idlib governorate's Idlib, Ariha and Harim districts.

Most of those identified presented mild symptoms, and others were asymptomatic. As of 8 September, seven isolation hospitals and 11 isolation treatment centres for primary care level management (called COVID-19 Community Treatment Centres, or CCTCs) were active in northwest Syria. Two PCR machines were delivered this week, one to a laboratory in Afrin city in northern Aleppo governorate, and another to the existing laboratory in Idlib city to complement the existing testing capacity. Efforts remain concentrated on contact tracing, interrupting virus transmissions and reducing secondary infections. Health partners continue to raise awareness about COVID-19 precautions among local communities and other

stakeholders, emphasizing practices to prevent transmissions including hygiene practices, self-isolation and physical distancing. Further transmission risk mitigation measures implemented include limits on movements, markets, gatherings and commercial activities. In terms of humanitarian assistance, precautions enacted by humanitarian actors prior to the identification of COVID-19 cases in northwest Syria continue to be implemented and strengthened, to safeguard both staff and local communities. Work is ongoing to intensify interventions to strengthen infection prevention and control at health facilities as a means to protect healthcare workers and prevent transmission from healthcare service delivery points, which is of high priority. At the end of August, 16 million pieces of personal protective equipment (PPE) including masks, face shields, gloves and aprons were provided for the use of humanitarian staff working on the ground.

The recent economic downturn, marked by the instability of the Syrian Pound (SYP), has eroded the purchasing power of people in northwest Syria. One study indicates that the minimum amount of money that people need to buy items essential to their survival has increased by 67% from May to June 2020 when the value of the SYP plummeted, largely due to the increase of prices for food items. According to a comparative review, 71% of households in northwest Syria in assessed communities reported to have insufficient income to meet their basic needs, marking a 25% increase between January and June 2020. According to a study conducted by a UN partner, 74% of assessed households in northwest Syria indicated that food is one of their priority needs while livelihoods followed with 60%. Moreover, the Turkish Lira (TRY) has been increasingly used as a transactional currency in northwest Syria, with basic commodities such as fuel, bread, transport and telecommunications services now reportedly priced in TRY. People without adequate access to currencies in use risk being excluded from markets or facing higher prices for the same goods and services because of exchange rate disparities – further marginalising the more vulnerable members of society. The devaluation of the SYP intensifies the precarious economic situation and is worsened by the impacts of COVID-19. According to a survey by a UN partner, income loss, price increases, loss of humanitarian assistance and forced business closures were communities' main concerns about the economic impact of COVID-19 in northwest Syria.

These developments further compound the humanitarian needs driven by hostilities and displacement, with northwest Syria still hosting some 2.7 million displaced people. Most recently, 220,000 people were recorded to have returned to their homes or previous places of displacement to areas, mostly along the M4 and west of the M5 highways– areas in proximity to the frontlines that have witnessed increased levels of hostilities since early July. Findings from an assessment by an NGO found that in 72 percent of communities assessed, prevalence of destroyed shelters were reported, compared to 27 percent across northwest Syria, driving overcrowding in available shelters and illustrating the difficult conditions facing returnees. Families in 75 percent of assessed communities reportedly cannot afford essential food items, and half have insufficient access to water. In the context of the COVID-19 outbreak, these conditions increase the risk of transmission among this highly vulnerable population. The dire conditions in these areas parallel the extreme needs prevalent across other parts of the northwest, where deteriorating conditions continue to increase reliance on humanitarian assistance and diminish positive coping strategies. Concerns about weather conditions remain prominent with a heatwave in early September. Several cases of sun stroke were reported in IDP settlements in the Idleb area as well as fire incidents affecting tents in northern Aleppo governorate and the Idleb area. In one such instance, a fire reportedly resulted in the death of three children in Kafnouran camp in Barisha community in Idleb governorate on 6 September. At the same time, the preparations for the approaching winter season are expected to put a further strain people's finances, especially in light of rising costs.

Increased levels of military hostilities have been reported in northwest Syria, particularly in the vicinity of frontlines in the Idleb area and in areas south of the M4 highway, with more frequent shelling reported since early July 2020. Moreover, the prevalence of attacks using improvised explosive devices and incidents involving explosive remnants of war such as landmines continue to endanger the lives of civilians. Reports continued of tensions between non-state armed groups escalating into armed confrontations and skirmishes, creating increased risks for civilians as well as for the conduct of humanitarian activities.

FUNDING

In August, the Syria Cross-border Humanitarian Fund (SCHF) allocated US\$1.5 million under its emergency reserve allocation modality to improve physical access for transportation of humanitarian assistance between the Bab Al Hawa border crossing and northern Aleppo governorate through road rehabilitation. This project is focusing on the most urgent needs due to seasonality and funding constraints. Support to infrastructure rehabilitation to maintain humanitarian access remains a key funding priority. Currently, the Fund's balance is US\$14 million. Consultations to agree on the SCHF's allocation strategy for the remainder of the year are ongoing and will be finalized at the next Advisory Board meeting at the end of the month.

Further funding is needed to meet humanitarian needs, which are increasingly complex and wide ranging. It is important to organize a second standard allocation which plays a strategic role in supporting the continuation of services at the end of

the year and across the winter season when a large part of donor contributions have already taken place. This is further augmented by the importance of ensuring reserve funding to support potential emergency allocations early in the year, should additional humanitarian needs arise. Though a record amount of US\$127 million dollars has been generously contributed by 15 donors since the beginning of the year, resource mobilization efforts must continue. Thanks to the generous contributions of these donors, the SCHF was able to support 2.9 million people with life-saving and basic assistance across ten clusters and for the critical COVID-19 preparedness, prevention and response in northwest Syria.

- Further information on the SCHF activities and contributing donors are available here: <https://pfbf.unocha.org/>
- SCHF recent dashboards (Second Reserve Allocation – COVID – 19 Response, First Standard Allocation (SA1) 2020, and Cumulative 2020 Allocations Dashboard) can be accessed through below link: <https://www.humanitarianresponse.info/en/operations/stima/hpf>

As of 20 August, the 2020 Syria Humanitarian Response Plan remains underfunded with only 38.6 per cent of the total requirement received halfway through the year, similar to the level reported earlier in August. Further funding is urgently needed.

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management

Needs:

- Over-populated sites and lack of camp management continue to be prevalent concerns, especially in the context of the COVID-19 pandemic where the application of preventive, response and mitigation guidance is essential.
- Severe currency fluctuation of the Syrian pound further compounds vulnerabilities as access to basic needs and services is increasingly challenging. This also makes efforts, as part of the COVID-19 response, to limit movements in and out of IDP sites challenging.
- CCCM's monthly displacement update indicated that the top needs and concerns reported by people newly displaced in July were Safety and Security (22%), Shelter (21%), Health (17%), and Cash/Voucher is the preferred modality to receive assistance (17%).
- Most of the IDP families hosted in five functioning Reception Centers (RCs) have been there for several months already, with no resettlement possibilities mainly due to lack of adequate shelter options and linkages with economic reasons. Facilitating the relocation of IDPs from overcrowded RCs to sites where physical distancing and hygiene practices are more feasible is therefore a main priority.

Response:

- CCCM continues to engage with other clusters, particularly the Health Cluster, on COVID-19 response measures in northwest Syria. During a recent ICCG meeting that explored establishing quarantine centers, CCCM highlighted the potential role of the Land Identification and Verification Taskforce to support the identification of lands for the quarantine centers and to make sure the selected locations are strategically distributed to support IDPs living in camps and camp-like settings. CCCM also acknowledged contextual factors to consider, like the majority of sites being self-settled and an absence of camp management systems. In addition to these points, CCCM encourages a multi-sectoral approach and incorporating a protection lens when devising response plans.
- CCCM continued to monitor and report on multiple incidents in IDP sites as part of its coordination response. Notably, many fire incidents continue to be reported. Urgent needs ranged from tents and NFI kits, to food parcels and fire extinguishers.
- As of 30 August, five functioning RCs have responded by hosting 3,732 IDPs, including the provision of food, shelter and WASH services.
- The July update of CCCM's IDP site monitoring database was shared with Cluster members, with details of the database available via [the dashboard](#). CCCM closely monitors 1,116 IDP sites hosting 1,479,251 IDPs (285,862 families). Of these, 80% are women and children, and 22,719 IDPs are reported to be persons with specific needs.
- CCCM also circulated the July update of its monthly displacement update. During the period from 1 July to 31 July 2020, more than 47,158 displacements took place in northwest Syria, with departures principally occurring from Idlib, and other notable departures from Jarablus, as well as Afrin. The main locations where displaced people arrived to, included Afrin, Jarablus and Ariha sub-districts.

Gaps & Constraints:

- Continuous displacement has led to a decrease in areas available to accommodate the newly displaced population.
- Although IDP sites are usually a last resort option, there are currently 1,116 IDP sites listed in the CCCM database, the majority of which are self-settled (1,030 sites).
- Contextual factors, such as the majority of sites being self-settled and the subsequent absence of camp management systems; makes the application of COVID-19 response measures more challenging.
- CCCM Information Management is engaged in a massive data cleaning and verification process, due to delays and/or contradictions in the information provided by multiple members across borders.
- Housing Land and Property (HLP) conditions remain one of the major challenges in the humanitarian response in northwest Syria, where many citizens have lost official papers and some property sales have been documented in handwriting which is difficult to verify. The varying condition and scale of self-settled sites, together with potential HLP restrictions, means that targeted settlements may have varying degrees of need, service provision and programming costs.

Early Recovery

Needs:

- According to the most recent Socio Economic Overview Report (HNAP, Summer 2020 Report Series, depending on a nationwide demographic household survey conducted in June 2020), 1 in 3 Syrian households in northwest Syria report daily labour (36%) as their primary livelihood activity, followed by private sector employment (19%) and agricultural employment (9%) as the third most common livelihood activity.
- Households who primarily depend on daily wage work – who account for 23% of total households and 36% of those in northwest Syria - report an average monthly income of 120,927 SYP (55 USD), which is lower than the national average of 138,964 SYP (63 USD).
- The most important household barrier to employment or diversifying income was a lack of employment opportunities, as reported by 79% of households, followed by a lack of financing (66%), and lack of skills (48%). COVID-19 is not a significant barrier for 3% of households while security situation is a barrier to employment for 20% of the households.
- A staggering 71% of northwest Syrian households reported that their income was insufficient to meet their needs - a rate which has increased by 10 percentage points compared to January 2020.
- 76% of households reported borrowing money or buying on credit and spending on savings (46%) which can negatively impact the ability to deal with future shocks due to the reduction of resources. 34% of households reported selling productive assets/means of transport which directly reduce the future productivity of households, including that of human capital formation. 2% of the households reported children in the household working also affecting future productivity and are more severe or extreme in nature for the household.
- 81% of males between the ages of 17 and 64 have worked over the March-May 2020 period while only 6% of females have worked in the same period in northwest Syria, which is the lowest in work rates for females in nationwide (22%).
- 35% of individuals aged between 17 and 64 who are not working reported that they were unable to work due to pregnancy or childcare responsibilities. Following a highly gendered pattern, this reason was selected for 43% of women but only 2% of men. Men were most frequently not in work on account of being a student (31%), even though this only applied to men between the ages of 17 and 24. Women had a much higher rate of reporting that they had no skills (19% compared to 6%) and that they were not allowed to work (8% compared to 1%).
- Moreover, according to the most recent Market Network Analysis Report (REACH, May 2020 Report, conducted with 818 interviews with Key Informants (KIs) in accessible locations throughout Idleb and Aleppo governorates, in 17-21 May 2020) 24% of KIs reported fuel markets were unavailable within their communities, followed by hygiene (17% of KIs), fresh food (16% of KIs), and bulk food markets (7% of KIs). The importance of markets varied from markets where only one community reported to buy commodities from, to regional hubs such as Raju, Jandairis, Jarablus and Bulbul, which all supported over 20 communities across all four commodity types. The most commonly reported reason for traveling outside of a community to access a market was lower price (fuel: 62%, hygiene items: 68%, fresh food: 73%, bulk food: 78%). This is underscored by the fact that that over 70% of KIs reported lack of cash or low purchasing power as market access challenges among members of their communities. Other commonly reported reasons for going to markets in other communities included better quality or better selection of goods.
- Market centers have been classified as “important” for a commodity if it supports at least ten surrounding communities. The most important market centers for different kinds of commodities like fresh food, hygiene items, bulk food and fuel in Idleb are reported to be Ariha, Jisr Ash Shugur, Mhambal and Idleb City. The most important market centres in Aleppo are reported to be Afrin, Jandairis, Sheikh El Hadid, Raju, Bulbul, Suran, Ar-Ra’ee and Aghtrin for all types of commodities like fresh food, hygiene items, bulk food and fuel.

- Over 70% of the KIs reported community members' lack of cash or low purchasing power as a challenge in accessing markets - whether inside or outside of their own communities mostly in Afrin, Daret Azza, Atareb in Aleppo governorate and Kafr Takharim, Darkosh, Teftnaz, Bennsh and Sarmin in Idleb governorate. The other most commonly reported access issues were lack of transport (34%), long distance (24%), lack of access for persons with restricted mobility (21%) and avoidance of markets due to the fear of COVID-19 (12%).

Response:

- 27 Early Recovery and Livelihoods members responded during July 2020. 17 ERL members operated in 11 Aleppo sub-districts reaching 22,106 direct beneficiaries (DBs), and 17 ERL members operated in 11 Idleb sub-districts reaching 67,154 direct beneficiaries
- Rehabilitation of access to basic utilities (electricity, gas, water, sewage) interventions reached 14,681 households mostly in Idleb, Dana, Maaret Tamsrin, Armanaz in Idleb governorate and Al Bab in Aleppo governorate.
- 155 m3 of debris and waste removed mostly in Dana, Idleb and Maaret Tamsrin in Idleb governorate.
- 1,711 persons were employed through the creation of short-term work opportunities, in light rehabilitation works of agricultural roads, or in mask manufacturing for personal protective equipment due to COVID-19 mostly in A'zaz and Suran in Aleppo governorate and Dana and Armanaz in Idleb governorate.
- 683 households provided basic housing repair support by construction of semi-permanent shelter structures or rehabilitation of damaged houses mostly in Armanaz and Harim in Idleb governorate and Aghtrin in Aleppo governorate.
- Entrepreneurial activities supported 24 entrepreneurs to start a business or services with micro-loans mostly Al Bab in Aleppo governorate and in Idleb.
- 2,146 people benefited from vocational and skill trainings mostly supporting youth and women, entrepreneurial skills, mask sewing, food processing, language, computer and industrial skills.
- 482 people with disabilities benefitted from activities such as short-term work opportunities (411 people) and cash-for-work activities like anti-COVID-19 personal protective equipment like masks and anti-leishmaniasis spray manufacturing. Vocational trainings (57 people) and entrepreneurship supported (14 people).
- Rehabilitation work of 10.5 km of agricultural roads serving 1,190 farmers in Salqin in Idleb and rehabilitation of 3 km agricultural roads in Dana in Idleb is still ongoing.
- Consultations with partners and key access actors about the conditions of roads that are/will be used for humanitarian shipments from Bab al Hawa and rehabilitation needs are ongoing.
- Consultations with partners regarding the possibility to scale-up local production of personal protective equipment to prevent COVID-19 transmissions, such as fabric masks, are ongoing.

Gaps & Constraints:

- ERL members in northwest Syria are funded at approximately 4% of total requirement vis-à-vis 2020 HRP requirements (estimation based on June 2020, FTS data)
- In order to reduce the negative impact on the affected population (IDPs, returnees, host communities) and on markets caused by the combination of pre-existing challenges, the COVID-19 crisis and the ongoing economic crisis, increased funding is required on the following:
 - Support to businesses both in urban and rural environments
 - Start-up support through grants or micro-credit assistance
 - Support micro-businesses/businesses to contain the impact of the COVID-19 and the ongoing economic crisis on their activities
 - Creation of short-term work opportunities, particularly through scaling-up Cash for Work modality, possibly, but not exclusively, linked to rehabilitation works improving access to services.
 - Rehabilitation of critical roads and access ways that assure timely and continuous humanitarian supplies to most vulnerable and enhance local economic activity and related access to livelihoods opportunities.
 - Restore, rehabilitate and adapt key socioeconomic services and related infrastructure, including electricity and water networks, sanitation systems, markets, health facilities, educational facilities and essential administrative services, including through cash-for-work (C4W) schemes, business grant schemes supporting entrepreneurial activities, and targeted vocational training linked to C4W/entrepreneurial activities.
 - Continue scaling-up/expanding the local production of personal protective equipment such as fabric masks that would contribute preventing COVID-19 transmissions.
 - Restoration of essential services and basic infrastructure to prioritize activities that would support the preventive and curative health response to COVID-19 in close coordination with other sectors and local governance structure.

- Collecting daily solid waste in urban areas and inside camps, providing cleaning machines or garbage collection cars, removal of demolitions from roads and sidewalks, cleaning of main and secondary roads and social infrastructures by removing rubble and garbage.
- Market-based modalities assistance to vulnerable households including assisting vulnerable households with transportation to/from markets and health facilities.
- ERL members in northwest Syria, acknowledging the need to face the extraordinary challenges caused by the devaluation of the SYP, continue to express the view/indicate the use of USD as the preferred way to reduce the risk/extent of losses due to exchange rate fluctuations and calls for such liquidity to be made available. According to ERL members, this would help them to continue to support beneficiaries and affected people during this critical moment, while also trying to minimize additional negative effects that might further harm the people in need.

Education

Needs:

- An estimated 398,000 school-age children (5 to 17 years old) have been displaced in northwest Syria between December 2019 and February 2020.
- Due to the large influx of displaced families, many schools were converted to temporary shelters, preventing them from being used for educational purposes. 23,419 people reside in 277 schools in Afrin, Al Bab and A'zaz districts in northern Aleppo governorate and Ariha, Harim, Idleb and Jisr-Ash-Shugur districts in Idleb governorate.
- Education activities have been continuously suspended due to insecurity as well as schools being used as shelter. Only five schools remain functional in Ariha sub-district as a result, with overcrowded classrooms due to displacement from nearby locations.
- Closures of schools due to COVID-19 compound the problem. Schools had been closed since 14 March in the Idleb area and since 16 March in northern Aleppo governorate and reopened temporarily. However, after the first confirmed case of COVID-19 being identified in northwest Syria on 9 July, schools have been closed again from 10 July. Learning has switched to the distance learning modality once more.
- Education authorities in Idleb had announced that they are planning to reopen schools in the last week of September.
- To address the needs, the objectives of the Education Cluster are:
 - Providing education personnel and teacher incentives and training
 - Providing learning materials for children and teachers
 - Provision of non-formal education and summer school for out of school children (in classroom or remote/distance)
 - Continuing to support for the safe reopening of schools (repair/expansion of classrooms and school furniture, WASH, hygiene promotion and supplies, school disinfection, etc.)
 - Using a blended approach for students' learning process, combining face-to-face education with distance learning.
 - Providing support for children to sit the national exams
- COVID-19 prevention needs:
 - Cleaning of education facilities that are accessible to children and/or adults again.
 - Clean WASH facilities in schools (in coordination with WASH cluster).
 - Hygiene and basic health sensitisation at home, printed and/or through social media in coordination with Risk Communication and Community Engagement (RCCE) efforts.
 - Continued physical re-planning of school infrastructure, especially in camps, taking into consideration adequate physical distancing and to prevent large gatherings of children.
 - Maintain adjusted modalities for education services (classes etc.) to incorporate physical distancing and prevent large gatherings.
- Continuation of learning needs:
 - Childcare arrangements for children whose parents are healthcare workers (in coordination with the Child Protection sub-cluster).
 - Adaptation of existing curricula and implementation through printed materials and/or social media and self-learning programmes.
 - Assessment of students', parents' and teachers' access to affordable internet connectivity and internet-enabled devices. Consider paper-based individual home learning assignments based on current curricula as alternative.
 - Provision of education materials and supplies to children affected by COVID-19 to enable them to continue education through distance learning.
 - Provision of exercise sheets to all students, regardless of whether they have access to online platforms.

Response:

- The Education Cluster reached at least 416,953 school-age displaced children with education assistance. Children are being reached with diverse packages of education services including psychosocial support (PSS), psychological first aid (PFA), formal and non-formal education activities, home schooling, student bags and textbooks to minimise disruption to children's learning.
 - 11,682 children supported with PSS and PFA in Idleb, Maaret Tamsrin, Harim, Dana, Atareb, Qourqeena, Daret Azza and Bennsh.
 - 51,811 children supported with formal and non-formal education in Idleb, Harim, Dana, Atareb, Salqin, Maaret Tamsrin and Qourqeena including children with disabilities.
 - 75,388 children supported with recreational kits, school bags, student kits and textbooks in Idleb and Aleppo.
 - 4,150 children supported for their mid-year exams.
 - Total number of children supported to sit the final exams is 24,404 students. 14,697 of these students are in Grade 9 and 9,707 students in Grade 12. Second round of exams (re-sitting) is ongoing.
 - 173 children provided with medicine to treat headlice, in coordination with the Health Cluster.
 - 4,133 children supported with home-based education based on a self-learning programme, in Marat Tamsrin, Daret Azza, Ariha and Haritan sub-districts.
 - 4,000 out-of-school children provided with life skills, recreation and PSS education activities.
 - At least 205,474 children and teachers benefited from distance learning in Idleb and Aleppo governorates as an alternative way to continue education during the COVID-19 pandemic.
 - In Idleb and Dana sub-districts, 171,494 students and teachers have been provided with awareness raising on COVID-19 and received information, education and communication (IEC) and sterilisation materials.
 - 25,529 students, teachers and parents sensitized on prevention of COVID-19.
 - Since February, 228,878 children from displaced and host community populations received textbooks in Idleb and Aleppo governorates.
 - 508 Number of teachers and education personnel provided with training
 - 90 teachers and education personnel provided with teachers' incentives.
 - 328 teachers and education personnel were trained on literacy, numeracy and PSS and referral mechanisms.
 - 227 families have been provided with tents by Education Cluster members to support the relocation of displaced people sheltering in schools, in order to enable the resumption of learning activities in the affected areas.
 - At least 17,623 children in schools and temporary learning spaces benefited from sterilisation of education facilities as mitigation against the spread of COVID-19.
 - 25,000 masks provided for student exams in Idleb and Aleppo countryside.

Gaps & Constraints:

- Increased recent fighting is impacting on children's safety and security and the delivery of education services.
- Lack of funds inhibits the ability of Education Cluster members to provide quality education support, particularly in conjunction with the security situation in which children are constantly on the move.
- Education services need to be relocated to follow displaced populations and be established in locations where displaced people settle. Lost or destroyed educational materials need to be replaced.
- The education system in areas receiving newly displaced families was already overstretched prior to the latest displacement. The need to receive the newly displaced people in existing education services risks inflaming inter/intra-community tensions.
- Students and teachers lack basic education supplies, and school furniture and WASH facilities are insufficient.
- Many learning facilities have no basic safety equipment/systems in place despite ongoing safety and security concerns.
- Students and education personnel are not receiving the psychosocial support, knowledge and skills needed for a safe and productive learning environment.
- Suspension of schools due to COVID-19 impacted on the quality of education.
- 30% of population do not have access to internet/smartphones impacting children access to distance learning.
- Use of schools by displaced people as shelter impacted on the children's access to education services.

Food Security

Needs:

- Emergency food assistance is needed for recently displaced people during the first two to four weeks of displacement, through cooked meals and ready-to-eat (RTE) rations. After the first-line emergency response, displaced people need to be integrated into the monthly regular food assistance.
- After the initial wave of displacement, livelihood initiatives are key to support affected local communities and households to recover agricultural production, sustain small-scale food production, maintain productive assets and create income-generating activities to prevent negative coping mechanisms.

274,000

People in need of food assistance

Response:

- The FSL Cluster established three area coordination groups to enhance the coordination among its members in Idleb, in Afrin and A'zaz-Jarablus-Al Bab areas. These groups will be in addition to the Livestock Technical Working Group (LTWG), Agriculture Technical Working Group (ATWG), Bread and Bakery Coordination Group (BBCG), and the COVID-19 focal points group. The aim is to maximize coordination, avoid any potential overlap, and exchange the knowledge, challenges, success stories, and lessons learned.
- 10 FSL Cluster members delivered emergency food assistance to 212,191 recently displaced people and returnees in August 2020:
 - Seven FSL Cluster members distributed 16,254 Emergency Food Baskets to reach 86,456 people;
 - Three FSL Cluster members distributed 24,474 ready-to-eat (RTE) rations to reach 122,303 people;
 - Two FSL Cluster members distributed 3,432 cooked meals to 3,432 people.
- The Cluster co-lead agency will maintain sufficient prepositioned food in northwest Syria to meet the needs of more than 1.3 million people for at least one and a half months. The Cluster lead agency has 194,953 RTEs ready to respond to the needs of some 974,765 IDPs.
- The FSL Cluster released the bread and bakery dashboard, which includes actual figures for June 2020 and plans for August, September and October 2020, as well as the number of members currently working, or planning to work, in bread and bakery activities. In addition to the price per tonne of flour and per kilogramme of bread in northwest Syria, the three main points are:
 - In June, some 822,414 people benefited from bread assistance programmes by FSL members across Idleb and Aleppo governorates.
 - 24 FSL Cluster members are reporting on the bread assistance.
 - The plan is to increase the number of people receiving bread assistance to 1.19 million people in September.
 - A'zaz, Mare and Sharan sub-districts do not have any bread assistance planned.
- Four FSL Cluster members began bread distribution activities with an additional US\$ 2 million received from the SCHF to support bread-related activities.
- 400 feed roller mills were shipped to Harim, Al Bab, Jarablus and A'zaz districts in northwest Syria and distributed to 400 farmer groups (4,000 households) who were trained and supported to use feed roller mills for producing animal feed on their farms. A voucher scheme was set up to enable farmers to purchase raw materials locally for producing animal feed at affordable prices. By producing their own animal feed, livestock owners no longer need to rely on purchasing expensive, low-quality commercial livestock feed.
- In response to an outbreak of Lumpy Skin Disease (LSD) in Lattakia governorate, vaccine for cattle was shipped to northwest Syria. To prevent an outbreak of LSD across northwest Syria, all dairy cattle is being vaccinated in September 2020 and an online training course is being conducted for veterinarians inside Syria.
- Protection of livestock against endemic and epidemic diseases and improved local availability of quality animal feed increases the production of animal source foods for humans (dairy products, eggs, meat). The support provided to animal production is a significant contribution towards reducing human malnutrition, protecting human health and reducing the vulnerability of IDPs and host communities to COVID-19.

Gaps & Constraints:

- A gap of 274,000 people remains unreached by food assistance.
- There is a need to enhance the complementarity between food assistance and livelihood, in addition, to support the livelihood including the income generation activities.
- FSL Cluster members are applying mitigation measures related to COVID-19. The Cluster conducts monthly meetings with COVID-19 focal points to reiterate the messages about the mitigation measures and to make sure that Cluster members have the capacity to continue operating while applying mitigation measures.



Health

Needs:

- The continuity of essential health services is in jeopardy due to the need for funding during the last quarter of the year. This is a serious challenge for health facilities and health services to continue serving the people in need in northwest Syria.
- For COVID-19:
 - Given the spread of the virus among the health staff, scaling-up of testing for health care workers (HCWs) is needed with a special focus on those who are working at COVID-19 designated health facilities (e.g. hospitals, CCTCs) and at facilities caring for most vulnerable groups such as tuberculosis clinics, dialysis centres as well as members of tracing and laboratory teams.
 - There will be increased demand for testing as a result of people fearing being infected as well as for tracing contacts and for expanding screening to identify and contain the virus.
 - Since the start of pandemic in northwest Syria, individuals who had contact with COVID-19 positive cases, i.e. “contact cases”, are frequently resisting to be referred to isolation/quarantine centres. Awareness raising efforts should continue to focus on the available facilities and to highlight their services.
 - Precautionary measures need to be rigorously implemented at community level. Therefore, camp managers need to be aware of preventive activities and to emphasize the public use of fabric face masks, physical distancing, avoiding mass gatherings and other measures as recommended by WHO and the COVID-19 taskforce.
 - Due to shortage of masks in the market, there is a need to enhance the local procurement and production of fabric masks in the field. This should be done in line with the COVID-19 taskforce recommendations and WHO’s global guidelines for mask usage.

Response:

- Geo-prioritization of health facilities is ongoing by the Health Cluster working closely with Cluster members and health directorates (HDs) in northwest Syria. The Cluster lead agency will support 8 primary health centres (PHC) as of September 2020 in addition to the existing 27 PHCs and mobile teams (8 in Idlib area, 15 in Afrin in northern Aleppo governorate, 4 in A’zaz and Al Bab in northern Aleppo governorate) that provide child health, reproductive health, management of communicable and non-communicable diseases and referral system in Idlib.
- Technical support continues to be provided by the Cluster lead agency to the referral system in Idlib, whereas in Afrin and north Aleppo (A’zaz, Jarablus and Al-Bab) the support is technical and financial.
- Based on a survey conducted for Sexual and Reproductive Health (SRH) at 78 health centres in 54 communities in northwest Syria, 93% of births are taking place in a health facility and 7% are home deliveries assisted by traditional midwives (dayeh).
- To support the quality of care for Comprehensive Emergency Obstetric and New-born Care (CEmONC) and neonatal care services for partners, two training sessions on caesarean sections indications and management of obstructed labour breech were organized. 49 health professionals (obstetricians and midwives) from 10 hospitals attended the training.
- Following the increase in Leishmaniasis cases (visceral and cutaneous) from the field, three leishmaniasis mobile treatment clinics and five health facilities will provide training for 250 community health workers in northwest Syria on Leishmaniasis.
- All the 131 Emergency Programme Immunization (EPI) teams are functional in northwest Syria and provided 626 EPI sessions during the last week while cautiously applying Infection Prevention and Control measures.
- The field monitoring, on-the-job training, coaching and mentoring for the Non-Communicable Disease (NCD) Care Team from 64 PHCs are ongoing through 4 NCD Field Monitoring Teams working across northwest Syria.
- On logistics, the distribution of 400 sachets of Oral Rehydration Solution (ORS) is ongoing. Mental health supplies will be provided to three mobile clinics. On another hand, Personal Protective Equipment (PPE) and Infection Prevention and Control (IPC) materials have been provided by the Cluster lead agency to 120 health facilities operated by 17 Cluster members in addition to surgical masks for 1,600 CHWs to cover the need for 4 weeks.
- For COVID-19:
 - 1,832,300 medical surgical masks, 3,521,900 examination gloves and 90,600 protective gowns were procured and will be transferred to northwest Syria soon. The COVID-19 supplies survey data is collected and supplies to cover the needs for a one-month period will be distributed to health facilities.
 - Following logistic challenges (customs procedures) which occurred during the procurement of two new PCR machines, one machine has arrived in Afrin city in northern Aleppo governorate where a new laboratory is expected to open shortly, expanding the testing capacity provided currently by one COVID-19 laboratory in Idlib. The second machine has arrived in Idlib city to increase the capacity of the existing lab.

- Concrete measures are being put in place to strengthen the implementation in certain critical areas such as improving testing and sample collection and improving field strength for contact tracing. This includes strong monitoring mechanisms to audit facility level readiness in terms of IPC measures including triage and refresher trainings for staff.
- Under capacity building, the Early Warning and Response Network's (EWARN) District Level Officers (DLOs) conducted 9 training sessions for 108 health care providers working in 9 health facilities in Idlib, Harim, Afrin and Jisr Ash Shugur on the basics of COVID-19 disease surveillance and diagnosis.
- The Mental Health Psychosocial Support (MHPSS) Helpline for northwest Syria is still serving frontline workers and their families, COVID-19 patients and their families as well the people in northwest Syria.
- Since mid-August, a 2-day psychological first aid (PFA) training for COVID-19 and Self-Care was held. targeted 164 frontline workers in addition to staff working at CCTCs and isolation hospitals were trained and an additional 140 will receive the training by mid-September.
- In close collaboration with the CCCM Cluster, a list of camp managers (about 900) was provided to COVID-19 Taskforce Risk Communication and Community Engagement (RCCE) group in order to raise awareness on the importance of quarantine for "contact" cases. Health Cluster members will provide RCCE services by focusing on the importance of quarantine as well community messages regarding the services provided by CCTCs services and how to access them.
- There are 11 COVID-19 Community Treatment Centres (CCTCs) and 7 hospitals dedicated for COVID-19 in northwest Syria with the capacity of 645 hospital beds out of which 114 are intensive-care unit beds. There are 86 available ventilators.
- 15 Continuous Positive Airway Pressure Units (CPAP) will be added to the response with the financial support of the Syria Cross-border Humanitarian Fund (SCHF).
- Under the same grant, more than 16 million personal protective equipment (PPE) items including masks, gloves, googles and face shields were shipped into northwest Syria on 22 August). The PPEs will be provided to more than 80 humanitarian organizations who shared specific needs for their staff who will use the equipment to protect themselves. Protective gowns will also be shipped too.

Gaps & Constraints:

- The MHPSS Helpline for Southern Turkey was postponed for a period due to some technical issues.
- Due to access difficulties, the coverage for the detection of tuberculosis cases and diagnosis is low in the camps and rural areas.
- For COVID-19:
 - The COVID-19 Community Treatment Centres (CCTCs) planned in northwest Syria are still facing delays due to funding availability, approval from Local Councils about the location and the availability of human resources.
 - The dire economic factor in northwest Syria is playing an important role in deterring potential cases from accepting to go into quarantine in CCTCs or even in their own home due to fear of losing their livelihoods and income in the absence of any paid leave system and/or financial support.
 - Following the announcement of the first positive COVID-19 case at a camp, it is obvious that isolating potential cases in crowded settings with dire living conditions is a serious challenge that risks spreading the virus widely. The coordination between the Clusters is ongoing in order to develop an integrated response to quarantine and isolation centres with clearer definitions to be shared with the community and the community leaders.
 - Before COVID-19, the lack of health care workers in northwest Syria was a serious challenge and some health care workers are working in more than one health facility. Therefore, the Health Directorates requested in a written statement that the health workers who are working in COVID-19 health facilities do not work in another facility. While this would potentially limit the infections within the community from health workers who may inadvertently spread the virus, it may have a negative impact on the available human resources to maintain the non-COVID-19 health service provision.
 - The personal protective equipment (PPE) and infection control and hygiene items for medical staff and community health workers (CHWs) continues to be a gap.



Nutrition

Needs:

- Based on August 2020 nutrition surveillance report, the proxy prevalence of acute malnutrition across northwest Syria based on community-based nutrition surveillance was 2 percent among children 6-59 months and 10 percent in pregnant and lactating women (PLW).

1,279,725

Children below age 5 and pregnant and lactating mothers reached with life-saving nutrition services

- The proxy prevalence of acute malnutrition was higher in Idleb compared to Aleppo among children 6-59 months (3 percent vs. 1 percent) and PLW (19 percent vs. 2 percent).
- The proxy prevalence of chronic malnutrition (stunting) among children 6-59 months across northwest Syria was 32 percent and it was higher among boys (34%) compared to girls (30%).
- The proxy prevalence of acute malnutrition was generally highest among those displaced compared to residents in both children 6-59 months and PLW.
- The prevalence of acute malnutrition among children 6-59 months has increased from 1 percent in May 2019 to 2 percent in August 2020. Similarly, the prevalence of chronic malnutrition (stunting) has increased from 19 percent to 32 percent during the same period.
- Exclusive breastfeeding was found to be 38 percent, minimum dietary diversity at 55 percent, while minimum acceptable diet (MAD) was 43 percent.
- While the proxy prevalence of acute malnutrition in children 6-59 months remains relatively low, the high prevalence of stunting in children 6-59 months and acute malnutrition in PLW are of primary concern.
- The proxy prevalence of acute malnutrition among children 6-59 months in the following locations was found to be of primary concern (prevalence $\geq 5\%$): Darkosh (9%), Jisr-Ash-Shugur (9%), Armanaz (8%), Qourqeena (7%), Hazano (7%), and Milis (5%).
- The proxy prevalence of acute malnutrition among PLW in the following locations was found to be of primary concern (prevalence $\geq 10\%$): Aqrabat (40%), Sarmada (37%), Janudiyeh (32%), Qourqeena (26%), Qah (24%), Armanaz (22%), Daret Azza (20%), Salqin (20%), Milis (19%), Darkosh (19%), Haranbush (17%), West Idleb (17%), East Idleb (16%), and Hazano (16%).
- The poor nutrition situation is largely attributed to continued exposure of children and PLW to unsafe living conditions, diseases (including impacts of COVID-19), suboptimal infant and young child feeding (IYCF) practices, high maternal malnutrition, economic downturn, low purchasing power, poverty, food insecurity, family separations and poor care practices, early marriages, and destruction of infrastructure causing limited access to health services, and inadequate sanitation and water supply.

Response:

- Since the start of the year, 1,279,725 children 6-59 months and PLW have been reached with life-saving nutrition services covering 513 communities and 40 sub-districts in Idleb and Aleppo.
- The number of children 6-59 months and PLW reached to date represents nearly 56 percent of the population in need with 6 percent increase in the coverage compared to the last situation update.
- The following numbers of children 6-59 months and PLW have been reached with specialized nutritious supplements – Ready-to-Use Foods (RUF), Lipid-based Nutrient Supplements (LNS), High Energy Biscuits (HEB) or micronutrient supplement:
 - 657,138 children 6-59 months reached which represents 53 percent of those in need.
 - 235,717 PLW reached which represents nearly 40 percent of those in need;
- Life-saving nutrition services are provided through 120 Rapid Response Teams (RRTs) and mobile teams, 10 Stabilization centers, 165 Outpatient Therapeutic Programme (OTP), and 23 Targeted Supplementary Feeding Programme (TSFP) by 25 Nutrition Cluster partners.
- Nutrition Cluster partners provided the following services;
 - 179,867 displaced children 6-59 months and PLW received HEB for prevention of acute malnutrition;
 - 548,581 PLW and children 6-59 months received micronutrient supplementation;
 - 129,511 children 6-36 months received LNS for prevention of acute and chronic malnutrition;
 - 386,870 mothers and care givers were reached with infant feeding and caring practices messages and counselling.
- Out of the 1,279,725 PLW and children 6-59 months screened for acute malnutrition:
 - 5,083 cases of severe acute malnutrition and 14,174 cases of moderate acute malnutrition were identified among children 6-59 months and referred for appropriate treatment;
 - 15,639 acutely malnourished PLW identified and referred for appropriate treatment.
- Nutrition Cluster members provided the following COVID-19 related services;
 - 122,213 mothers and caregivers received information and prevention measures related to COVID-19;
 - 70,850 mothers and caregivers counselled on breastfeeding in context of COVID-19;
 - 33,239 beneficiaries received masks, IEC materials related to COVID-19 (posters, WhatsApp videos, etc.);
 - 1,251 staff of partners trained on COVID-19 IPC measures;
 - 769 staff of partners trained on nutrition programmatic adaptations in context of COVID-19 - CMAM, IYCF-E, Surveillance, etc.;
 - 2,137 staff of partners received PPE tools (e.g. masks, gloves, hand sanitizers, etc.).

- Nutrition Cluster partners are implementing the recommended adaptations in the context of COVID-19 which include: continuity of life-saving nutrition services, integration of IPC measures for mitigation of COVID-19 infection in all platforms, enhanced communication on IYCF-E in context of COVID-19, simplified protocol for treatment of acute malnutrition, surveillance, supply pre-positioning to avoid stockouts, etc.
- Nutrition Cluster COVID-19 taskforce meetings are conducted fortnightly to review emerging global evidence and recommendations, and discuss northwest Syria experiences and questions raised by partners in relation to the operational guidance. The Cluster also conducts Nutrition Cluster Coordination meetings fortnightly.
- The Nutrition Cluster participated in cash and voucher discussions as part of ongoing initiatives on exploring Cash and Voucher (C&V) programming for nutrition and how to make current C&V programmes more nutrition sensitive.

Gaps & Constraints:

- During the Mid-Year Review, partners reported a number of operational challenges including; shortage of supplies for management of Moderate Acute Malnutrition (MAM), potential sharing of ready-to-use foods (RUF) at household level, community misunderstandings of the target groups, limited PPE for frontline staff, and referral refusals especially to stabilization centers (SC) due to long distances in some locations.
- A few Nutrition Cluster partners have procured light PPE for their non-health staff who are involved in routine Middle Upper Arm Circumference screening to ensure continuity of this activity as it informs the nutrition situation and impact of COVID-19 on children and PLW. However, the procured quantities are insufficient due to funding constraints.
- The proportion of those reached with services for treatment of MAM, prevention of acute and chronic malnutrition, and micronutrient supplementation are 33 percent, 47 percent, and 52 percent respectively of those in need. The low achievements are indicative of limited funding, access constraints and supply shortages especially Ready-to-Use Supplementary Food (RUSF) for MAM treatment.
- COVID-19 outbreak and economic downturn could potentially cause a further deterioration of the nutrition situation during the second half of 2020 attributed to dysfunctional markets, limited livelihoods opportunities, inflation, low purchasing power, increasing food insecurity, and disruption of access to health and WASH services.
- Limited implementation of a multisectoral which is crucial in addressing the underlying drivers of acute and chronic malnutrition.

Protection

Needs:

- In terms of the security context, sporadic hostilities continue to be reported in the Idleb area and northern Aleppo, especially in locations south of the M4 highway. Shelling incidents have resulted in civilian casualties, while unexploded explosive hazards continue to imperil civilians' lives. In addition, tensions involving non-state armed groups continue to be reported, with consequences for civilian safety and giving rise to protection concerns.
- Human rights violations and abuses continue to be reported by Protection Cluster members, the protection environment continues to be severely affected by the compounding impacts of COVID-19 mitigation measures, the economic downturn, prolonged and large-scale displacement, as well as the ongoing armed conflict.
- Forced evictions of IDPs from residential, commercial, and public property continue to be reported, these evictions are assessed to be linked to a consistent increase in rental prices due to the Syrian Pound (SYP) devaluation as well as the intention to revert to the original use of public buildings such as schools.
- GBV sub-cluster members continue to report a significant increase in various types of gender-based violence (GBV), mainly domestic violence (marital rape, physical and emotional violence, and denial of resources and services). Psychosocial stress, stemming from poverty and lack of employment of heads-of household, in addition to extended lockdown/stay at home measures, are factors driving this increase. Women and girls with disabilities and pregnant women are reported to be among the most vulnerable to domestic violence during this period.
- Restrictions of movements and forced quarantine measures are impeding GBV and violence against children survivors' access to services. Schools, community centers, Child Friendly Spaces and Women and Girl Safe Spaces were significantly scaled down due to COVID-19 precaution measures. This has also made it more difficult for women and girls to disclose incidents and seek GBV services as well as for children affected by violence to be identified.
- Cases of exploitation of women (both financial and sexual exploitation) have been reported in recent weeks. Alleged perpetrators include camp managers and landlords. IDP women heads of household are especially at risk of this type of exploitation due to situations of (financial) vulnerability as well as societal dynamics. Cases such as these are most frequently reported in IDP sites exclusive to widowed and divorced women and girls (so-called 'widow camps').
- The GBV sub-cluster continues to receive reports about families marrying off their daughters repeatedly for short period in exchange of money. Adolescent girls left on their own with children at the age of 18-19. Furthermore, reports are received of continued use of hormonal treatments for young girls to advance puberty in order to enable marriage of daughters in exchange of dowry and/or to reduce pressure on families.

- Reports are also received on the use of violence to force pregnant women to abort in order not to deal with an additional financial burden. Moreover, there is an increase in reported divorces that are happening for the same reason, leading to an increase in female headed households.
- Issues related to women's access to health services were observed during the reporting period, as well as a reduced willingness of older persons and persons with disabilities to seek basic healthcare due to fears of contracting COVID-19 or a hampered ability to access health centers. Furthermore, members reported that certain types of medication for pregnant women have become unavailable.
- Child Protection sub-cluster members continued to report a persistence of child protection concerns during the reporting period. The impact of the economic deterioration and COVID-19 mitigation measures exacerbates an already dire humanitarian situation for children in northwest Syria, resulting in a steep increase of families resorting to negative and harmful coping mechanisms including child labour, including the worst forms of child labour, and child marriage.
- Despite limitations in an increasingly restrictive operational environment and suspension of Child Friendly Spaces, child protection members have strived to deliver, while incorporating where possible COVID-19 prevention messages and messages on childcare in times of isolation and unpredictability. Child protection members continue to adapt core activities, such as PSS activities and parenting programmes. However, with the confirmed COVID-19 cases in northwest Syria, members are currently getting ready to implement with even stricter measures on the ground, which will slow down activities.

Response:

- From 17 to 30 August 2020, 3 Protection Cluster members provided emergency response services to civilians recently displaced from Idlib and Aleppo due to the ongoing hostilities. Cluster members provided 33,531 protection interventions to IDPs and affected host community members in 37 communities within 8 sub-districts in Idlib and Aleppo reaching 11,378 individuals (3,653 girls, 1,126 boys, 6,351 women, 248 men). The main services protection actors provided are as follows:
 - Psychological First Aid (PFA) and Psychosocial Support (PSS)
 - Information sharing about services and assistance
 - Dignity kits distribution
 - Explosive hazard risk education
- Cluster members also referred individuals to other basic services, notably to health centers and shelter assistance, and provided Individual Protection Assistance (primarily cash grants for protection outcomes). It should be noted that the above emergency response activities are in addition to activities included in the HRP which are reported on through cluster 4W IM products a monthly basis.
- Since December 2019, GBV sub-cluster members have distributed over 240,000 dignity kits. Based on feedback, those kits were critical in responding to their increased need for personal hygiene products in the time of COVID-19 and satisfaction was reported with measures taken by GBV sub-cluster members during distributions to prevent against COVID-19. Kit contents are being adjusted to meet specific needs related to COVID-19.
- Members of the GBV sub-cluster continue provision of GBV services, both through static facilities and online, which is creating several different entry points for disclosure of GBV and receipt of services.
- GBV sub-cluster members continue to work with medical service providers and communities to raise awareness on the issue of virginity testing and its consequences on women and girls, in addition to raising awareness on issues related to sexuality and sexual violence and further dissemination of GBV district referral focal point contacts to allow survivors' access to GBV specialized support.
- During this current reporting period, 2,973 individuals (1,170 girls, 1,379 boys, 257 women and 167 men) have been reached with child protection emergency interventions. 1,011 children (439 girls and 528 boys) received psychosocial support (structured and sustained). 53% of children reached were located in Armanaz, while 47% in Kafr Takharim, Harim district in Idlib governorate. 15 children (all boys) received Psychological First Aid (PFA) in Kafr Takharim, Harim district in Idlib governorate. 565 PSS Kits were distributed to children (248 girls and 317 boys). 19% of children reached were located in Armanaz, while 81% in Kafr Takharim, Harim district in Idlib governorate. 1,382 caregivers and children (415 girls, 519 boys, 257 women and 167 men) were reached through awareness raising on child protection issues including prevention. 54% of children reached were located in Armanaz, while 46% in Kafr Takharim, Harim district in Idlib governorate.
- The Protection Cluster is contributing to an inter-cluster task force on establishment of quarantine centers and will conduct focus group discussions with communities to better understand issues related to separation of families, stigma, confidentiality, and willingness to quarantine to inform the design and procedures of these centers and increase protection sensitivity.
- The Protection Cluster, through its Protection Monitoring Task Force, finalised data collection of the second round of its COVID-19 protection impact survey. Initial results show widespread concern related to COVID-19 since the first identified case in northwest Syria. Generally, awareness of mitigation measures is adequate across northwest Syria, with gaps in knowledge identified in overpopulated and informal IDP sites. Initial results also show that the application

of preventative and risk mitigation measures shows gaps in these communities due to the need to engage in daily labour, limited availability of water, and crowded conditions.

Gaps & Constraints:

- Protection Cluster members continue to face obstructions in accessing affected populations in some IDP sites, including for information provision, counselling, as well as protection monitoring. Hampered access to protection services, especially for women and children, is of increasing concern given the compounding effects of the economic downturn, COVID-19, and the armed conflict.
- Increased basic needs across the population due to the currency devaluation and economic downturn hampers acceptance of protection interventions due to populations prioritizing of addressing basic needs by the affected population.
- GBV specialized services remain unavailable in many communities in northwest Syria, mostly due to limited funding. Additional resources are needed to support GBV prevention and response with a focus on vulnerable groups such as adolescent girls, widows, divorced women, persons with disabilities and men and boys who have experienced sexual violence.
- Currently there are 41 functional Women and Girl Safe Spaces across northwest Syria (16 in Aleppo and 25 in Idlib) for a population of 4.1 million individuals. GBV sub-cluster members have been struggling to sustain the existing spaces due to lack of funding. In past months, several GBV projects and WGSS in northwest Syria have had to close down due to limited funding.
- Lifesaving activities such as Victim Assistance for persons with disabilities resulting from explosive hazard accidents remain underfunded and under-implemented whilst population needs are growing in light of the escalation of conflict.
- Activities that continued with COVID-19 countermeasures included specialized services such as case management for high-risk and individual cases and referrals for child protection, GBV and mine action, individual protection assistance and physical rehabilitation. Where feasible, psychosocial support, legal awareness raising, and counseling on housing, land, and property rights and civil documentation have also continued (in centres, via outreach, and in camps).

Shelter and Non-Food Items

Needs:

- According to HNAP's Mobility and Needs Monitoring Factsheet for July 2020, over half of the IDP population in northwest Syria are now living in adequate housing and 36% of IDPs are living in emergency shelter, predominantly tents. Housing options for IDPs remain limited, with 7% living in sub-standard buildings, most of which are unfinished buildings; and 1% of IDPs have found public buildings, like schools, to be the only shelter option, thereby disrupting the provision of public services.

Response:

- Shelter/NFI (SNFI) Cluster members continue to actively respond to the needs of the newly displaced population as well as protracted IDPs in northwest Syria. In July, 200,556 individuals received NFI assistance in the form of NFI kits, kitchen sets, mattresses and blankets. Some of these distributions were complimented with supplementary NFI items. Shelter needs of around 96,187 people were addressed with activities like provision of emergency shelter (72,393 people) or shelter rehabilitation and repair (23,794 people) during July.
- SNFI continues to provide site planning support through coaching and trainings with the goal of building capacity and facilitating well-planned settlements in northwest Syria. The trainings have been in the form of weekly online sessions with simultaneous Arabic interpretation. Training topics varied from terrain analysis to child protection in IDP sites, introduction to GIS, and site planning strategies to mitigate GBV. A specific [Site Planning Page](#) has been developed on the SNFI website, where various resources are compiled to provide additional support.
- In response to multiple fire incidents occurring in IDP sites in northwest Syria, SNFI focused on coordinating and meeting to discuss fire risks and mitigation measures in IDP sites with SNFI members, during the monthly cluster meeting, and with the CCCM Cluster. Site planning support has also included mitigation measures for the spread of fire by ensuring that plans submitted for support and review have the appropriate fire breaks and distance between tents in accordance with Sphere Standards.
- The Cluster Coordination Team is working on developing a document about fire incidents in IDP sites in northwest Syria that will help guide cluster members on the best ways to respond, according to the specific reasons behind these incidents when using heating and cooking fuel and stoves. The Cluster will publish and share a brochure in Arabic on the best practices when using different types of fuel and stoves, which will be distributed by the cluster members when responding to needs during winter.

- The Cluster is also responding to distress calls that are received habitually from many actors, by sharing with members who have the capacity to address the needs after an updated verification in the field is conducted to ensure that the gap is covered appropriately.
- The Cluster Coordination Team is also coordinating with SCHF as part of follow up efforts up on the ongoing and revised projects, taking into account the challenges and changes happening in the field that require the Cluster's engagement, technical intervention and decisions.
- Following multiple reports of flood incidents in IDP sites in northwest Syria, SNFI has prepared [Flood Classifications and Effects on IDP Sites in north-west Syria](#) which were shared and published on the cluster website. Site planning trainings have provided further support to guide partners' interventions specifically in regard to terrain analysis and water shed analysis. One aspect that these two training sessions provide guidance on is how water flows across the site thus informing the designer where not to place tents. Related upcoming trainings focus on drainage dimensions, road construction and water supply networks. Additional details on site planning trainings, including previous recordings, are available from the cluster website.
- As part of winterization preparations, the Cluster Coordination Team shared the updated Guidance Note on Winterization for northwest Syria with cluster members. This document combines recommendations, based on experience, inputs from Donors, SAG and cluster members as well as members of the Cash-Working Group. Cluster members have also shared their winterization plans, and a coordination meeting is planned with the objective of coordinating targets and overlap analysis at the community level, to ensure that winterization plans are implemented in an efficient and timely manner.

Gaps & Constraints:

- Difficulties continue to include finding a place to rent. While the availability of houses and apartments for rent has improved over the past month, IDPs reported that the spike in the market has meant that many cannot afford rent. The price of rent is often indexed to the dollar, therefore prices in SYP have significantly increased, putting people at risk of eviction.
- Improving infrastructure in camps and IDPs sites is essential to avoid future floods that happen regularly. These activities include drainage system upgrades and rehabilitating the infrastructure.
- Replacing worn-out, emergency shelters with transitional shelters that include water and sanitation is needed, especially for protracted IDPs, in order to improve living conditions and access to adequate, dignified shelter solutions. This is particularly important in the context of the COVID-19 pandemic, where access to improved infrastructure and hygiene facilities help to mitigate the spread of the virus. The SNFI Cluster is currently working with a Technical Working Group to address new shelter solutions.
- Some cluster members reported funding gaps when sharing winterization plans for 2020-2021, taking into account the large numbers of displaced people and those living in inadequate shelters and units, as well as the harsh conditions that most people face in northwest Syria during winter. Organizations have funding to target 695,000 people with winter assistance, and the SNFI Cluster is planning to target more than 1 million people in need of assistance. Specifically, there is a funding gap of USD 10.2 million.

Water, Sanitation and Hygiene

Needs:

- As the Syrian Pound is stabilizing against the USD, prices in the local markets are also stabilizing. Despite the stabilization of the exchange rate, the prices continue to remain high in comparison to prices prior to the fluctuation. The diminishing value of the SYP is decreasing the purchase power of local communities, forcing households to reprioritise their needs. As a result, under the same conditions, reliance on humanitarian aid will increase across all sectors in the medium and long term. WASH Cluster member organisations are less susceptible to the fluctuating SYP value as grants are provided in USD.
- Comprehensive life-saving WASH services and supplies are still needed for 370,000 displaced people to ensure coverage. There is a need to increase the operational support to existing piped water systems to handle additional population in communities and in surrounding informal/formal settlements and camps. Attention is needed for ensuring services to returnees.

Response:

- In its overall response, the WASH Cluster has provided safe water supply for over 2.97 million people (infrastructure and water trucking), solid waste management support for some 1.71 million people, and access to sanitation for 636,384 people (infrastructure and latrines). The Cluster has also reached more than 2 million people with hygiene kits.

- The ongoing WASH response has reached to 1.3 million recently displaced people in 1,176 locations through 37 Cluster members (82% of the locations responded to are camps, 13% are communities, 2% are collective centers and 3 % are other locations).
 - 529,453 people have received and continue to receive water via water trucking;
 - 631,722 people received solid waste management services;
 - 250,158 people got access new latrines (most of the existing public/community latrines are overcrowded due to an inadequate number of latrines);
 - 512,755 people benefited from hygiene kits (102,551 actual family hygiene kits, each kit being designed for a household of five people);
 - 345,491 people benefited from water purifying agents (Aqua tablets);
 - 456,740 people benefited with the distribution of jerry cans (91,348 jerry cans distributed, two ten litre Jerry cans per household).
- Cluster members continue to respond to people displaced between December 2019 and early March 2020, including with COVID-19 mitigation activities.
 - 83,784 additional people are expected to receive water trucking based on Cluster members' plans for displaced people;
 - 88,405 additional people are expected to receive solid waste management services – especially in locations with high number of IDPs. This will benefit both displaced and host communities (50 percent host community, 50 percent IDPs).
 - 54,568 additional people benefit from new latrines that are currently under construction.
 - 163,600 additional people will benefit from the available hygiene kits (32,720 actual family hygiene kits)
 - 125,784 additional people will benefit from available jerry cans (25,156 jerry cans available, each household usually receives two 10 litre jerry cans)

COVID 19 Response:

- According to updates from 24 WASH Cluster members in 110 locations to the WASH COVID-19 reporting matrix, 89 percent have changed their response due to COVID-19, 80 percent have increased the amount of water supplied, 83 percent have adapted hygiene promoted activities, 59 percent have increased the amount of soap distributed, and 15 percent have increased the amount of laundry detergent distributed.
- Collaboration between the WASH and FSL Cluster lead agencies continues with actual/planned distribution of soap bars with 720,000 food parcels in northwest Syria from April to October. This is accompanied with Risk Communication and Community Engagement stickers.
- The WASH Cluster lead agency will purchase 1,056,000 soap bars over the next six months, to be delivered to the COVID-19 Awareness Team (CAT). In August, 176,160 soap bars have been delivered to the CAT, which were distributed to 44,040 households through 1,600 Community Health Workers.

Gaps & Constraints:

- According to the most recent WASH Cluster gap analysis, the immediate gaps in 22 sub-districts for 722,000 displaced people are as:
 - 482,691 people need immediate water via water systems and water trucking;
 - 166,567 people need public latrines and sewage network rehab/construction.
 - 95,558 people need recurrent solid waste management;
 - 44,760 people need hygiene kits.
- The financial requirement for such humanitarian response is estimated at USD18 Million. An additional cost of USD11 Million is estimated for a six-month response to support the need of an additional 220,000 who may be displaced in case of renewed hostilities.
- No major challenges have been reported with regards to transshipments as the cluster member organizations also use the commercial channels. The Cluster lead agency mostly transshipped life-saving WASH supplies prior to the expiry of previous UN Security Council Resolution on 10 July and has stocks to support the people in need until October 2020.
- The WASH cluster is working with CCCM and Shelter clusters to ensure joint planning and establishment of new camps with requisite WASH services.

Logistics

Needs:

- Organisations responding to the needs of the affected population in northwest Syria require a reliable and consistent transshipment service that facilitates the delivery of life-saving cargo from Turkey into the region.

- The transshipment hub at Bab al Hawa requires an increase in staffing, which in turn requires physical hub expansion to maintain COVID-19 preventive measures and observe physical distancing.
- Ensuring the safety and health of the staff working at the transshipment points by following WHO guidelines on mitigating COVID-19 risks at transshipment points.
- Assessing the capacity of main humanitarian supply routes inside the northwest of Syria and mapping physical road access.
- Monitoring the availability of warehousing space inside northwest Syria.
- Partners including local and international NGOs, donors and partners at the global level are expressing the need to establish a procurement working group.
- With the outbreak of COVID-19, coordination and timely information sharing with partners will be critical to assist the operational decision-making by partners and to ensure that bottlenecks or the duplication of efforts are avoided.

Response:

- In August, the Logistics Cluster has coordinated the transshipment of 176 Syrian trucks through Bab al-Hawa, facilitating the delivery of 3,250 metric tonnes of Food Security, WASH, Education and Health sector items.
- The Logistics Cluster developed a physical access constraints map of northwest Syria, which is continuously updated based on partner reports. To ensure that the map remains up to date, a phone application has been developed to collect physical road access information.
- The Cluster is collecting warehouse information for analysis and readiness planning.
- The transshipment hub at Bab al Hawa is being expanded to improve physical distancing. The augmentation will add an extra 5,000 m² of space to improve physical distancing.
- The Cluster continues to implement COVID-19 countermeasures at the hubs, including regularly holding workshops on COVID-19 awareness.
- To promote physical distancing, the Logistics Cluster has developed procedures for coordination meetings to continue to be held online. In addition, regular communication of logistics information and updates through a dedicated mailing list continues to be provided.

Constraints:

Road conditions inside certain areas of the northwest are a constraint to truck traffic movements, where road maintenance may be required.

GENERAL COORDINATION

An inter-cluster taskforce was established to ensure that a cross-sectoral integrated approach is followed for establishing and managing COVID-19 quarantine centres. The task force held its first meeting on 1 September. On 8 September, the Inter-Cluster Coordination Group had its regular monthly meeting, focusing on the operational aspects of the humanitarian response.

For further information, please contact:

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