The Humanitarian Needs Overview draws on information and data from multiple sources, including surveys and assessments by the United Nations. Due to prevailing security challenges, it has not been possible to undertake comprehensive needs assessments that cover Syria in its entirety. Analysis is by OCHA unless otherwise noted. Secondary information has not been independently verified by OCHA.

**Strategic Priorities**

1. ** Advocate for the protection of civilians**, and in particular of vulnerable groups, calling for adherence to international humanitarian and human rights law including, the end of indiscriminate and deliberate attacks against non-military objects.

2. **Increase the provision of life-saving emergency assistance and essential services** for affected people in Syria, especially in the sectors of food, water, sanitation, health, shelter and essential non-food items.

3. **Maintain and negotiate humanitarian access** to allow for the unhindered delivery and distribution of humanitarian assistance to all affected people without discrimination.

4. **Enhance the operational capacity** of national and international humanitarian responders and support existing local and community coping mechanisms.

5. **Ensure adequate levels of preparedness** to respond to a significant deterioration of the humanitarian situation.
The humanitarian situation in Syria is catastrophic and continues to deteriorate at a rapid pace. Fierce fighting across large parts of the country has led to massive displacement and mounting refugee outflows. Almost 80,000 people have been killed since the conflict began two years ago. An estimated 6.8 million Syrians, or almost one-third of the entire population, now require humanitarian assistance, including 4.25 million internally displaced people. This marks an increase of 5.5 million affected people since March 2012. About 3.1 million, or some 50 per cent of those who require assistance, are children.

While the humanitarian situation is particularly precarious in Aleppo, Ar-Raqq, Homs, Rural Damascus, Hama, Idleb and Dar’a, all of Syria’s 14 governorates are affected.

Civilians continue to bear the brunt of the violence. According to the Independent International Commission of Inquiry on the Syrian Arab Republic (the Commission), the main cause of civilian deaths, mass displacement and destruction is the “reckless manner in which parties to the conflict conduct hostilities. Furthermore, the Commission has highlighted that violence reached new heights over recent months, including widespread shelling, bombardment of cities, mass killings and the deliberate firing on civilian targets (CoI on Syria, March 2013).

According Since late July 2012, Syrian government forces have according to Human Rights Watch (HRW) carried out air strikes from fighter jets and helicopters against cities, towns, and neighborhoods under the control of opposition forces. These attacks have killed more than 4,300 civilians according to one Syrian group documenting casualties, injured thousands of people, and destroyed civilian property and infrastructure in Aleppo, Idlib, Hama, Deir al-Zor, Damascus, Dar’a, Homs, Raqq, and other governorates. These attacks include deliberate attacks against civilians and indiscriminate attacks—that is air strikes that did not or could not distinguish between civilians and combatants. Both types of attacks are serious violations of international humanitarian law (the laws of war). (HRW, 11 April 2013).

Government forces and affiliated militia are reported to have committed crimes against humanity, including murder, torture, rape, enforced disappearances and other inhuman acts. War crimes and gross violations of international human rights law have also allegedly been committed. Extra-judicial killings, beatings, enforced disappearances and arbitrary arrests are reported to occur at checkpoints manned by Government forces and affiliated militias (Col on Syria, March 2013). In mid-March, HRW reported that the use of cluster munitions by the Syrian Armed Forces is causing mounting civilian casualties (HRW, 16 March 2013).

Four key drivers of the humanitarian crisis:

1. Sustained and escalating violence is the central driver of the humanitarian crisis. Indiscriminate use of heavy weapons in densely populated areas is common and in many instances, the pattern of destruction in neighbourhoods of urban centres takes the form of collective punishment prompting large-scale population movement.

2. Large-scale and fluid population displacement as a result of violence and destruction has disrupted the lives of millions of people. Internally displaced people generally rely on family and community support and/ or humanitarian assistance.

3. The unraveling of public services leaves people unable to access basic services, including health care. The ability of the Syrian authorities to operate services is diminishing in many areas. Central infrastructure such as hospitals and clinics has sustained considerable damage or has been destroyed. Lack of supplies and staff, as well as insecurity, further hamper the ability of people to utilize or access services.

4. The conflict has left the Syrian economy in tatters. Economic decline, the loss of jobs and livelihoods, as well as the impact of economic sanctions have increased vulnerability among large sections of society. Lower purchasing power, along with significant price hikes affecting basic staples, including bread, has increased reliance on humanitarian assistance.

This humanitarian needs overview is produced by OCHA with inputs from a variety of partners. Analysis is provided by OCHA unless otherwise noted. Secondary information has not been independently verified by OCHA.
Anti-Government armed groups are also reported to have committed war crimes, including murder, torture, hostage-taking and attacks on protected objects. Moreover, such armed groups continue to endanger the civilian population by taking up military positions inside civilian areas (OHCHR, February 2013). Anti-Government armed groups have wrested control of some areas of the country from the Government and have assumed some of the roles and functions akin to a de facto state authority. Quasi-judicial mechanisms and law enforcement structures have been established in Aleppo, Homs, Idlib and Deir-ez-Zor, which operate independently on uncertain principles with no or little apparent judicial oversight.

The conflict in Syria has deepened social, political and sectarian fault lines, affecting the delicate fabric of Syrian society. There is concern that the conflict may result in increasing acts of reprisal against those perceived to be supportive of one side or the other, in particular against religious minority groups, but also Palestine and other refugees.

The Commission has observed a worrying trend of mass killings allegedly committed by so-called “Popular Committees”, or neighborhood militias, some of which appear to have been trained and armed by the Government, and who have reportedly been involved in sectarian killings (Col on Syria, March 2013). While armed opposition groups have attacked civilians from religious communities who are likely perceived as supporting the Government. Through interviews, the Commission established that Shi’ites and Alawites have been targeted in Damascus, Homs and Dar’a. Christians in Homs also report being targeted. Kidnappings and counter kidnappings along confessional lines have increased in recent months.

The Commission has also reported that wounded and sick persons have been refused treatment on sectarian or political grounds (Col on Syria, March 2013). HRW has found evidence of attacks targeting religious minority sites, such as churches and mosques, in mixed areas of northern governorates after those areas had fallen under the control of armed opposition groups and Government forces had left the areas. Religious minorities have been displaced as result of such attacks or in anticipation of attacks (HRW, 23 January 2013).

Children are increasingly being used by both parties to participate in a range of conflict-related activities ranging from serving as couriers to active fighting” (Col on Syria, March 2013).

People across the country live in constant fear and many have been displaced multiple times as they flee the violence. The urban centres of Syria’s largest cities, including Aleppo, Homs, Damascus and Dar’a remain fiercely contested and continue to prompt large-scale population movement. Conduct in some areas may indicate the tactic of forcible displacement (OHCHR, February 2013).

Figure 2: Reported incidents
Border areas are also heavily affected. In early March, the opposition launched new military offensives in the north of the country, leading to the take-over of the provincial capital of Ar-Raqqa and the strengthening of positions in most of the northern governorates. In the south, near the border with Jordan and the demilitarized area of the Golan Heights, the confrontation has escalated. Since most of the fighting, including shelling and aerial bombardment, has taken place in heavily populated areas, the numbers of affected population and of IDPs have increased.

There are also serious concerns about the occurrence of gender-based and sexual violence. A report by the International Rescue Committee (IRC) details the prevalence of sexual violence, describing rape as “a significant and disturbing feature of the Syrian civil war.” In the course of three IRC assessments in Lebanon and Jordan, Syrian refugees identified rape as a primary reason why their families had fled the country (IRC, 14 January 2013). The Special Representative of the Secretary-General on Sexual Violence in Conflict, Zainab Hawa Bangura, noted in a statement that “the people of Syria continue to suffer greatly. Civilians already caught in a vicious cycle of violence are also the target of sexual violence by all parties to the conflict” (http://www.un.org/news/dh/pdf/english/2013/15022013.pdf)
**affected population**

**people in need**

Humanitarian needs in Syria have grown sharply since the issuance of the first Humanitarian Assistance Response Plan in June 2012, which targeted 1 million Syrians in need of assistance. In September 2012, the draft response plan was revised, indicating that 3 million people were affected and some 2.5 million people required assistance. In December last year, the population in need was adjusted to 4 million. By April 2013, the number of people in need has reached 6.8 million, including 4.25 million IDPs. The total number of people in need represents almost one in three Syrians.

The numbers below show UN estimates of people in need. Figures are derived from a wide range of sources, including the Syrian Arab Red Crescent (SARC); the Ministry of Local Administration (MoLA); Local Committees; food distribution targets; and NGOs. Data has been triangulated through assessments undertaken inside Syria and based on reports on population movement and displacement. The UN acknowledges that tracking exact data on IDPs remains difficult due to the fluidity of the situation, particularly as many people are displaced multiple times.

Table 1: Population in need of humanitarian assistance and internally displaced population by governorate

<table>
<thead>
<tr>
<th>Governorate</th>
<th>Population (2012 est.)</th>
<th>People in need</th>
<th>Internally displaced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Al Hasakeh</td>
<td>1,512,000</td>
<td>297,300</td>
<td>207,400</td>
</tr>
<tr>
<td>Aleppo</td>
<td>4,868,000</td>
<td>2,400,000</td>
<td>1,250,000</td>
</tr>
<tr>
<td>Ar-Raqqa</td>
<td>944,000</td>
<td>249,100</td>
<td>230,000</td>
</tr>
<tr>
<td>As-Suweida</td>
<td>370,000</td>
<td>26,200</td>
<td>18,000</td>
</tr>
<tr>
<td>Damascus</td>
<td>1,754,000</td>
<td>290,000</td>
<td>250,000</td>
</tr>
<tr>
<td>Dar’a</td>
<td>1,027,000</td>
<td>283,300</td>
<td>180,000</td>
</tr>
<tr>
<td>Deir-ez-Zor</td>
<td>1,239,000</td>
<td>325,500</td>
<td>283,200</td>
</tr>
<tr>
<td>Hama</td>
<td>1,628,000</td>
<td>320,000</td>
<td>284,300</td>
</tr>
<tr>
<td>Homs</td>
<td>1,803,000</td>
<td>625,000</td>
<td>355,800</td>
</tr>
<tr>
<td>Idleb</td>
<td>1,501,000</td>
<td>430,000</td>
<td>300,600</td>
</tr>
<tr>
<td>Lattakia</td>
<td>1,008,000</td>
<td>165,400</td>
<td>70,000</td>
</tr>
<tr>
<td>Quneitra</td>
<td>90,000</td>
<td>47,300</td>
<td>30,000</td>
</tr>
<tr>
<td>Rural Damascus</td>
<td>2,836,000</td>
<td>1,255,900</td>
<td>705,200</td>
</tr>
<tr>
<td>Tartous</td>
<td>797,000</td>
<td>104,500</td>
<td>90,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td>21,377,000</td>
<td>6,819,500</td>
<td>4,254,500</td>
</tr>
</tbody>
</table>

**casualties**

By the end of March 2013, the overall number of fatalities in Syria could have reached as high as 80,000 people. An analysis by the Office of the High Commissioner for Human Rights (OHCHR) published on 2 January indicated that 59,648 individuals had been killed in Syria between 15 March 2011 and 30 November 2012. The analysis was based on seven different data sets. According to Navi Pillay, the UN High Commissioner for Human Rights, the figure is not definitive and could be an underestimate of the actual number of deaths. The analysis was not able to differentiate between combatants and non-combatants. However, the majority of those killed were men (OHCHR, 2 January 2013).

There has been a steady increase in the number of monthly casualties, from around 1,000 per month in the summer of 2011 to an average of more than 5,000 per month since July 2012. Should the crisis continue, the Joint Special Representative for Syria, Lakhdar Brahimi, has warned that as many as 100,000 people could be killed in 2013 alone (http://www.un.org/apps/news/infocus/Syria/press.asp?NewsID=1257&sID=45).
Figure 3: Reported deaths

In addition to direct conflict-related casualties, deaths rates continue to rise as a result of a decrease in access to basic services, including health care.

The World Health Organization has estimated that more than 400,000 people have been wounded between March 2011 and April 2013, with many resulting disabilities and chronic conditions (WHO, April, 2013, http://bit.ly/11J9dvK).

Internal Displacement

According to UN estimates, some 4.25 million people are currently displaced within Syria. The highest numbers of IDPs are now present in Aleppo (1.25 m) and Rural Damascus (0.7m) (figure 5). Official Syrian estimates indicate that the vast majority of those who are internally displaced are staying with host families and communities.

Many of the displaced were forced to leave their homes without a chance to bring even basic household items, in many cases escaping with only the clothes on their backs. Many IDPs are staying in unofficial shelters, unfinished buildings and makeshift accommodation, as well as in unofficial camps. The displaced population consists predominantly of women, children and elderly.
Palestine Refugees in Syria

The conflict in Syria has taken a heavy toll on the estimated 525,000 Palestine refugees in Syria. Many Palestine refugees have been killed and an increasing number have been wounded and displaced. About 400,000 Palestine refugees are in need of humanitarian assistance, according to the United Nations Relief and Works Agency (UNRWA). The Agency estimates that over 50 per cent of all Palestine refugees in Syria have been displaced from their areas of residence.

Displacement of Palestine refugees accelerated significantly from December 2012, when armed clashes spread to Yarmouk camp in Damascus, home to the largest number of Palestine refugees in Syria. In Yarmouk camp alone, approximately 85 per cent of the Palestine refugees have fled (UNRWA, April 2013).

Clashes and shelling are affecting several areas of refugee concentration throughout Syria, including in the suburbs of Damascus, Dar’a, Homs and Aleppo. Many displaced Palestine refugees have sought temporary shelter in camps in Hama and Lattakia; in UNRWA facilities such as schools; as well as among other host communities. The UN is concerned that Palestine refugees are vulnerable to discrimination and/or are being deliberately targeted as they are increasingly perceived as being affiliated with one or other parties to the conflict.

Palestinians who arrived in Syria from Iraq (Palestinians ex-Iraq) after 2003 have yet again been displaced as a result of conflict. Most of the ex-Iraq Palestinians do not hold valid documentation other than a Palestinian Travel Document, increasing their vulnerability and protection risks in the current environment.

On 11 March 2013, Filippo Grandi, the UNRWA Commissioner General, noted that unlike Syrian nationals, Palestinians had “limited flight options” as neighbouring countries, such as Jordan, had capped their admittance numbers to the Palestinian refugee population. By April, more than 5,000 refugees had fled to Jordan. Another 37,000 refugees had left for Lebanon (ANERA, Palestinian Refugees from Syria in Lebanon, April 2013), adding to the already high number of Palestine refugees in these countries (2 million and 440,000 Palestine refugees, respectively) (UNRWA, 31 Dec. 2012). There have been reports of refoulement of Palestine refugees at the
border with Jordan (UNRWA, UNRWA Syria Crisis Response January - June 2013, and HRW, 21 March 2013).

Other Refugee Communities in Syria

The protection and assistance needs of other refugees in Syria have also increased as a result of the deteriorating situation. UNHCR planning figures of January 2013 indicate that 58,200 registered refugees will receive assistance. Of those receiving assistance, 88 per cent are Iraqi refugees. About 1,800 asylum seekers have also been identified to receive assistance (UNHCR, 2013 Planning Figures for the Syrian Arab Republic, http://www.unhcr.org/pages/49e486a76.html).

Most refugees are entirely dependent on assistance provided by UNHCR and others. The frequency and severity of security and protection incidents affecting refugees rose in mid-2012. Iraqi and other refugees reportedly face threats, risk of abduction, harassment and extortion. According to UNHCR, nearly 40 per cent of refugees in Syria have special needs and require targeted support.

Migrant Workers

At the beginning of the conflict, the International Organization for Migration (IOM) estimated that between 120,000 and 150,000 migrant workers were present in Syria, with some 15,000 people in need of evacuation assistance. By the end of March 2013, more than 3,300 stranded migrants from 35 different countries had received assistance from IOM to return to their home country. IOM reported that the number of requests for repatriation assistance is increasing steadily. More than 700 vulnerable migrant workers in Syria are in urgent need of assistance to safely return to their home countries. The majority are single female migrants who are largely dependent on their employers and have limited access to accurate information or resources that would enable them to secure evacuation or repatriation on their own.

Beyond the impact of violence and unrest, migrant workers in Syria face gaps in legal protection mechanisms, absence of consular assistance, confiscation of passports, an exploitative sponsorship system, high exposure to physical, verbal and sexual abuse, and limited access to healthcare. Migrants trying to flee the violence are also confronted with problems associated with labour exploitation and potential human trafficking.

Syrian Refugees

The outflow of refugees has increased dramatically since the beginning of 2013. From a total of around 575,000 refugees early in the year, the number of Syrian refugees either registered or assisted awaiting registration exceeded 1.4 million people by 26 April 2013.

During the month of February, an average of more than 8,000 people left Syria for neighbouring countries each day. If the refugee exodus continues at the current pace, the overall Syrian refugee figure in neighbouring countries and North Africa could reach 3.5 million people by the end of 2013, according to UNHCR.

An estimated 33,000 Syrians have so far fled to various European countries. In 2012, with 24,800 submissions, Syrians accounted for the second largest total of asylum applications in industrialized countries, up from 15th place in 2011 (UNHCR, March 2013). Humanitarian needs among refugees are urgent and growing. Many have left the country with only a few possessions and very limited financial resources.
Figure 7: Syrian refugee movements

**Hosting arrangements differ among countries.** In Lebanon and Egypt, Syrian refugees live mostly among the host communities. Refugees in Iraq are roughly divided between camps and host communities, while the remainder is hosted in camps. The Turkish authorities provide assistance to refugees in 17 camps across eight provinces, while tens of thousands of Syrians have sought refuge in a number of cities in the country. Priority areas of assistance include basic needs, food, shelter, health services, protection, water and sanitation and access to education (UN, Syria Regional Response Plan, Jan-Jun 2013).

The host governments and local communities in the neighbouring countries have generously welcomed Syrian refugees. However, there is concern that the increasing number of refugees, coupled with the economic, political and social impact felt by the host countries as a result of the Syria conflict, may lead to domestic tension and unrest as well as a less welcoming attitude towards refugees.
Socio-Economic Impact

The Syrian economy is severely affected by the continued crisis. By the end of 2012, the total loss to the Syrian economy due to the crisis was estimated at US$48.4 billion at current prices, representing more than 80 per cent of Syria’s 2010 GDP in 2000 constant prices (Syrian Center for Policy Research, Socioeconomic Roots and Impact of the Syrian Crisis, January 2013).

Every year of conflict costs around 18 per cent of Syrian GDP, according to the UN’s Economic and Social Commission for Western Asia (ESCWA) in their report National Agenda for the Future of Syria (ESCWA, March 2013). Simulations show that GDP losses could reach 58 per cent if the conflict continues until 2015.

ESCWA calculates damage to capital stocks at 43 per cent; a 5 per cent reduction in the labour force; a 50 per cent reduction in public investment; and a 50 per cent reduction in tax and non-tax collections. Most of the GDP losses (83 per cent) were incurred by four sectors: internal trade, transportation and communications, manufacturing and mining. Meanwhile, Syria saw an increase of US$3 billion in military expenditure during 2011 and 2012.

Economic sanctions imposed on Syria by various countries have also made a mark in the socioeconomic sphere. According to the Danish Institute for International Studies, the sanctions regime has had “significant economic repercussions beyond the Syrian state and government.” More specifically, private sector import and export of all types have been impacted and the sanctions have “indirectly contributed to the increasing unemployment rates, decreasing salary levels and thus the fall in purchasing power.” The decline in purchasing power has, in turn, negatively affected people’s access to basic commodities, including food, exacerbated existing vulnerabilities and left new groups financially vulnerable. (DIIS, Sanctioning Assad’s Syria: Mapping the economic, socioeconomic and political repercussions of the international sanctions imposed on Syria since March 2011, October 2012)

The situation of the poor appears particularly dire. The rapid rise in inflation - the CPI increased by 51 per cent between March 2011 and September 2012 - has made the purchase of basic items increasingly
SYRIA: Humanitarian Needs Overview

26 April 2013

Sectoral Analysis

Sector targets under SHARP 2013 (January-June)

Humanitarian needs inside Syria are high and are expected to increase as long as there is no political solution to the conflict. Key activities and beneficiary targets presented under the different sectors below reflect what the UN and its partners are implementing under the Syrian Humanitarian Response Plan (SHARP), and not the overall humanitarian response in the country. The SHARP is currently being revised to cover the period of July-December 2013.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Target reached in 2012</th>
<th>Target to June 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Services</td>
<td>830,000</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Health</td>
<td>2,790,000</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Food</td>
<td>1,500,000</td>
<td>2,500,000</td>
</tr>
<tr>
<td>WASH</td>
<td>250,000</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Shelter &amp; NFI</td>
<td>563,272</td>
<td>2,255,000</td>
</tr>
<tr>
<td>Education</td>
<td>50,000</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>16,000</td>
<td>70,000</td>
</tr>
</tbody>
</table>

Table 2: Sector targets under SHARP 2013 (January-June 2013)

Protection and Community Services

Situation Overview

The United Nations Mine Action Service (UNMAS) report that the conflict has involved extensive use of indiscriminate, area-wide explosive weapons, causing both immediate and long-lasting damage due to high levels of Explosive Remnants of War (ERW) contamination. There has also been an increase in the number, size and complexity of Improvised Explosive Devices (IEDs) used in the conflict, particularly in Aleppo, Damascus, Deir-ez-Zor, Hama, Homs, Idleb, and Lattakia.

Displaced persons are particularly exposed to ERW while moving through contaminated areas without any knowledge or understanding of existing explosive hazards. Children in general, and boys and male adolescents in particular, are also especially vulnerable. Children have been severely injured while playing with ERW in the streets of highly affected areas. Humanitarian actors in Syria are now also at risk from ERW (UNMAS February 2013).

Protection concerns are prevalent in communal shelters all over Syria. Numerous community shelters are found to be lacking proper doors and locks, windows are missing protective screening and women do not have access to protective entry and exit areas or privacy. This is known to increase the risk of women and girls of being exposed to sexual and gender-based violence. In addition, communal shelters present specific protection concerns for persons with special needs, including those with disabilities and elderly people. Fear of being subject to sexual violence prevails among women and girls in areas where fighting, attacks and raids take place.

Despite the fact that many Palestine refugees sought to remain neutral within the wider conflict, the UN is concerned that Palestinians may be vulnerable to discrimination or be specifically targeted if perceived as being affiliated with one or other parties to the conflict. Furthermore, Palestine refugees suffer the effects of armed clashes and shelling, as most camps and other refugee population centres are located in or nearby major conflict areas (Dar’a, Damascus, Rural Damascus, Homs and Aleppo).

Boys and girls are suffering from psychosocial distress while their caregivers face difficulty providing them with much needed support due to their own high levels of distress. A recent remote assessment of the education sector found that children’s exposure to extreme violence is causing serious psychological distress and impacting children’s performance at school (UNICEF Education Assessment, December 2012).

Pre-existing child protection issues have been exacerbated by the conflict. These include voluntary separation of children from their parents, low birth registration, street children, child labour, and child marriage. The latter is often being used as a negative coping mechanism by populations under hardship.
A UNICEF Crisis Report from March 2013 highlights serious protection concerns for tens of thousands of children including killing and maiming, sexual violence, torture, arbitrary detention, recruitment and use of children by armed forces and armed groups, exposure to explosive remnants of war, growing intolerance, and a lack of access to healthcare facilities (UNICEF Crisis Report March 2011-March 2013).

Young boys are particularly at risk of recruitment by armed groups. It is reported that boys as young as 13 have been recruited and boys as young as 14 given weapons training (Col on Syria, March 2013). Children are reportedly being used as porters, guards, informers and fighters and, in some cases, as human shields (Save the Children, 13 March 2013).

The affected populations have exhausted their resources and coping mechanisms as a result of increased poverty, multiple displacement and lack of adequate access to services in many parts of the country. Traditional community support mechanisms are failing due to displacement and distrust. This has had a significant impact on the psychological well-being of the population and may lead to increased protection risks, including violence and exploitation of women and girls.

Priority Needs

- Improved protection of civilians, particularly of children, women and wounded and other vulnerable groups such as persons with disabilities, unaccompanied/separated children, victims of violence including Gender Based Violence (GBV), and victims of torture.
- Adherence to international humanitarian law including treating those not (or no longer) participating in hostilities with dignity at all times, ending indiscriminate and deliberate attacks against non-military objects, in particular refraining from targeting medical personnel and hospitals, and halting the recruitment of children.
- Improved access to provide protection and assistance to civilians in conflict areas, including the internally displaced, Palestine and other refugee populations, through increasing the capacity of partners, community based organizations (CBOs) and civil society organizations (CSOs).
- Free and safe movement of displaced populations to potential areas of refuge, and the right to seek asylum in neighbouring countries.
- Improved access to education and alternative learning to provide protection and access to life-sustaining activities.
- Reduction of mortality and casualties through increased knowledge about protective measures in conflict areas and the risks associated with explosive remnants of war.
- Prevention of the separation of children from their parents, enhancement of tracing systems and child friendly spaces in collective shelters.
- Individual, family and community-based counseling and psychosocial support and referral to specialized services.
- Support to particularly vulnerable families, community-based initiatives and income generation.

Key Activities / Targets

- Community services to support at-risk Syrians are planned for 4 million people (including two million children and over one million women).
- Psychological support for 200,000 internally displaced families, including 40,000 pregnant women.
- Another 300,000 children and adolescents are targeted for psychosocial support, child protection and distribution of non-food items.
- Raising awareness concerning explosive remnants of war for 500,000 children and adolescents.
Health

Situation Overview

The Syrian health system has been severely disrupted due to the conflict. A collapsed health care infrastructure, reduced workforce and lack of essential medicines, supplies and health professionals have seriously impeded the provision of primary and secondary health care (preventive and curative). There is limited support for chronic diseases, reproductive health, infant and child health, nutrition (see separate sector), mental health services and support for people with disabilities.

An assessment of six northern governorates in December 2012 and January 2013 noted that most of the injured in these governorates suffer from war-related injuries and that there is a severe shortage of surgeons who can treat such injuries. According to the Syrian Ministry of Health (MoH), 57 per cent of public hospitals are affected with 21 per cent damaged, and 36 per cent out of service. Dar’a has the most affected health centers. There, 31 percent or 31 out of 101 health centers are affected, followed by Quneitra with 26 per cent or 14 out of 54 affected.

According to WHO, the worsening insecurity is also preventing many health workers from reporting to duty, thus contributing to severe staffing shortages in hospitals and other health facilities. Many doctors have left the country. For example, over 50 per cent of medical doctors have reportedly left Homs. In Damascus, Aleppo and Homs at least 70 per cent of health providers live in rural areas and are frequently unable to report work place due to blocked and unsafe roads. In Aleppo, only 36 doctors are reported to be practicing in and around the city of Aleppo, as compared to 5,000 before the crisis started (J-RANS, 28 March 2013).

Health workers are being targeted and reports indicate that a large number of health personnel have left the country. Overall, 142 health workers are reported to have been killed (52), injured (76) and kidnapped (14) (WHO, February 2013).

Prior to the onset of the crisis, the Syrian pharmaceutical industry produced 90 per cent of required medicines. With local production collapsing, the Syrian health system is now lacking essential medicines, including insulin, oxygen, anesthetics, serums and intravenous fluids. Additionally, the main government storage for imported medicines has been destroyed (WHO, March 2013).

Health facilities and local pharmacies are increasingly unable to provide medicines for patients who require continuous treatment for chronic diseases. In March 2013, the International Committee of the Red Cross (ICRC) warned that dozens of Syrians are dying every day due to limited access to health care and shortages of essential medical supplies. In areas heavily affected by insecurity such as Aleppo, Dar’a and Deir-ez-Zor, physical inaccessibility of health facilities constitutes a further limitation (ICRC, March 2013).
According to WHO, lack of access to health care facilities due to insecurity and severe shortages of medicines are among the main obstacles to the provision of health care. Health assistance that was previously identified as regular PHC services (i.e. dialysis, insulin provision, etc.) are now treated as emergency interventions in many areas across Syria affected by the conflict. Shortages of medicines are becoming more critical not only in the public health sector, but also among private service providers. Local pharmacies are increasingly unable to provide regular medicines such as simple pain killers. Health authorities across the country are receiving insufficient supplies from the central authorities.

Additionally, there is an increasing lack of ambulances to support emergency health services. Almost 55 per cent of the country’s 520 ambulances have been damaged or destroyed, leading to a shortage of transportation to support the transfer of patients to health facilities. In addition, 117 out of 157 vehicles used to support vaccinations have been damaged and are not in use (Syria MoH, February 2013).

Electricity cuts and fuel shortages continue to affect the health care system. As a result, health facilities are struggling to provide laboratory diagnostics, x-ray, ultrasound and cardiac monitoring (WHO, February 2013).

There is a lack of trained specialists, especially outside the capital (Rural Damascus, Homs, Tartous, Quneitra, Suweida and Aleppo), who can address acute psychosocial needs. Based on WHO projections, the percentage of people with mild and moderate mental health needs can reach up to 20 per cent of the population, and severe mental illness can reach up to 4 per cent of the population as a consequence to the ongoing conflict.

Reports from many governorates indicate that mental health experts have left the area. As such, there is a dire need to strengthen capacity of the medical staff to fill the current critical gap in mental health management on all. Lack of adequate specialized personnel on mental health is further aggravated by lack of required medication.

Access to reproductive health (RH) services, especially emergency obstetric care and family planning has reduced due to damage to public health facilities, depleted stocks and qualified health professionals. Lack of information about where and when to seek RH care, transportation to health facilities, and inability to afford the services are also jeopardizing timely interventions, particularly for safe delivery (UNFPA, March 2013).

Reports from the Health Early Warning Alert and Response System (EWARS) indicate an increase in the numbers of suspected cases of typhoid fever and hepatitis A. Some 70 typhoid cases were reported from only one site in Deir-ez-Zor (Almayadin health center) through EWARS during one week in February. A total of 2,500 registered typhoid cases were reported by one of the NGOs working in Deir-ez-Zor over a period of four months. In addition, several hundred new cases of the skin disease Leishmaniasis have been reported. The most affected governorates to date are Hama (172 cases), Deir-ez-Zor (107) and Rural Damascus (19).

An increasing number of people are seeking psychological assistance for affected family members, particularly women suffering from post-partum depression (UNFPA Annual Report, December 2012 and WHO, November 2012).
Priority Needs

- Provision of essential primary and secondary health services (preventive and curative) including support for chronic diseases, reproductive health, trauma care, infant and child health, nutrition, and mental health services;
- EPI (extended programme for immunization) and vaccination campaigns.
- Provision of effective and efficient delivery of life-saving emergency health care (medical, surgical, maternal, child health etc.) at all levels of health facilities in directly and indirectly affected areas;
- Provision of essential medicines and medical supplies, with a priority for life-saving medicines including chronic diseases, medicines for war injuries (anesthetics), antibiotics, disability aids;
- Provision of minimum initial services package (MISP) for reproductive health;
- Increased monitoring of early warning and timely detection of possible outbreaks of communicable diseases and initiating an effective response for control;
- Increase access to mental health services and psychosocial support particularly for women and child victims of violence/GBV;
- Rehabilitation of damaged health facilities in conflict areas
- Early rehabilitation of injured patients.

Key Activities / Targets

Secondary Health Care:

- Surgical assistance to 400,000 people with trauma/injuries
- Support to 1.2 million people affected by mental health matters

Primary Health Care:

- Support to 1.36 million people affected by non-communicable diseases
- Routine vaccination and primary health care targeting 911,200 children under five
- Supplementary vaccination targeting 1.4 million children
- Reproductive Health services targeting 1,700,000 women at child-bearing age including 68,000 pregnant and 30,000 women with special needs

Other

- Improved access to health services to 50,000 people affected by disabilities
- Improved access to health care for 525,525 Palestine refugees

Nutrition

Situation Overview

Background levels of malnutrition in Syria are high relative to neighbouring countries (Family Health Survey Assessment, 2009). Given the current difficulties in accessing medicines and other health sector commodities, it can be assumed that access to nutrition supplies are affected, leading to poorer treatment outcomes.

Already before the onset of the crisis, the overall nutrition situation in Syria was estimated to be worse than in the neighboring countries of Jordan and Lebanon, based on data available on wasting (12 per cent), stunting (28 per cent) or underweight (10 per cent) (UNICEF, State of the World’s Children Reports 2009 and 2012). Furthermore, micronutrient deficiency, especially of iron, and vitamins A and D, is on the rise in most Middle East and North African countries, and has likely deteriorated as a result of the emergency.

Based on the acute malnutrition rate of 12 per cent, an estimated 480,000 children aged 0 -5 years are suspected to be at risk of malnutrition. These children may thus be in need of supplementation or actual treatment. Many children need access to diversified quality diets and possibly to micronutrient supplementation in order to prevent further deterioration of nutrition status. Deterioration of nutrition status can put children at higher risk of morbidity and mortality.
Recent nutritional data is scarce. However, WFP’s monitoring confirms that displaced families are struggling to maintain a varied diet and provide adequate complementary food for young children. Other reports also point out the scarce access to safe water which has resulted in poor hygiene practices. Mid-year results (July 2012) of the National Nutritional Surveillance suggest the prevalence of malnutrition is within the “acceptable” range. However, results are based on measurements of children in accessible primary health care centers, and there is a 60 per cent decrease in the number of children measured in 2012 compared to the same period in 2011. There is concern that the most vulnerable children, including those in displaced families or living in remote areas, are not being surveyed and that malnutrition rates are likely to be higher than reported as a result.

- Treatment of identified malnourished children in districts with high numbers of IDPs and other vulnerable populations, including refugees;
- Adequate maternal nutrition support to enhance child feeding and care;
- Targeting of women of child-bearing age with a package of multi-sectoral assistance including food security support and health and water sanitation services to improve nutrition levels;
- Provision of micronutrients and supplementation for children and pregnant/lactating mothers at high risk of malnutrition;
- Strengthen capacity building with local partners for nutrition response, including malnourished case identification and referral, as well as support to appropriate infant and young child feeding and micronutrient supplementation;
- Increased supplementary feeding for the prevention of acute malnutrition.

**Key Activities / Targets**

- Micronutrient supplementation targeting 570,100 under-five children;
- Management of Moderately Acute Malnutrition targeting 55,300 children under five;
- Management of Severely Acute Malnutrition targeting 13,120 children under five.

**Food Security**

**Situation Overview**

The number of people estimated to be food insecure rose from 3 to 4 million in just six months from mid to late-2012, indicating that people are increasingly unable to produce, access, and/or afford enough food. It is understood that this number could be much higher given emerging reports from refugees who have arrived in neighbouring countries. The increase in vulnerability and food insecurity is a result of economic disruption, a consequence of economic sanctions, suspension of trade, devaluation of the Syrian pound, lower purchasing power and reduced government capacity to sustain producer and consumer subsidy schemes. Devaluation brought the Syrian pound from 90-93 in December 2012 to 110 by March 2013. Further increases are expected.

Households are depleting their stocks, losing their livelihoods and having to cope with increased prices for food, fuel, heating and electricity.
Subsistence farmers, small-scale herders, casual labourers and internally displaced families have been identified to most at risk. Up to 10 per cent of these households are headed by women. The capacity of these vulnerable groups to generate income and access food has been drastically reduced. Many people employed in industries and manufacturing are suffering the consequences of factory closures, markets disruptions and damage to infrastructure.

The capacity of the farming population to produce food and generate income has been significantly reduced. The main factors contributing to this decline include decreasing availability of farming inputs and labour, price hikes for diesel, fertilizers, rented equipment, and seeds, damaged irrigation infrastructure and scarcity of spare parts and water resources. Moreover, insecurity is preventing farmers from accessing farmlands. During the December Joint Rapid Food Security Needs Assessment (JRFSNA) carried out by WFP, FAO and the Syrian Ministry of Agriculture and Agricultural Reform (MAAR), only 52 per cent of focus groups reported to have fully harvested their wheat crop during the summer season of 2012. Meanwhile, only 45 per cent reported a full harvest for barley.

The 2011/12 wheat harvest amounted to only 63 per cent of an average year – a situation worsened by the reduced surface area planted during the 2012/13 winter cereal season. Preliminary estimates by MAAR point to a 20 per cent reduction in the area cultivated with wheat and barley compared to an average year (five-year average of 2.9 million ha).

Livestock losses are increasing, as is the sale of livestock below market prices. Herders lack access to veterinary supplies and services, and face serious shortages of fodder and concentrate feed, which now cost at least twice as much as before the crisis. Pastoralists are particularly vulnerable as their resilience has been eroded from years of drought and animal losses. The most destitute are selling off their entire herd, thus abandoning their way of life. Many poultry farms have been destroyed or closed due to the high price of production inputs in local markets.

Disruption to livestock activities is a serious concern as animals provide an important source of livelihood in Syria, particularly in drier regions of the country and among women. Safeguarding livestock assets is especially crucial to families during the lean season as people struggle to diversify their diets with important nutrients from meat, eggs and milk. Regenerating herds and restoring pastoral livelihoods is becoming increasingly difficult.

Market disruption, transportation difficulties and problems along the value chain – from production to consumers’ physical access to stores – are contributing to a decline in the range of basic food commodities. During the December 2012 JRFSNA, 60 per cent of respondents indicated that markets were heavily disrupted, 50 per cent reported a reduction in their working days/hours and 10 per cent reported that markets were not functioning at all.

Economic sanctions and the suspension of trade with neighbouring countries are adding inflationary pressure and contributing to the erosion of the purchasing power of Syrian households. The average household is reported to be spending more than 50 per cent of total expenditures on food. Food price inflation is driven by price increases for cereals, pulses, vegetables and dairy products. Food prices have risen by 45-60 per cent since December 2012. The prices of staple commodities such as wheat flour, bread and sugar has risen by over 100 per cent in several governorates (in particular, Aleppo and Damascus) by June 2012, continuing rising and extending to other Governorates like Qamishli up to December.

Shortages of fuel and wheat flour have resulted in soaring prices of non-subsidized bread. The gap between bakery-level and shop-level prices of bread has widened over the last three months due to increased transaction costs (fuel, distance, insecurity, transport costs and time) and demand pressure on subsidized bread sold at shop level. The majority of the population is now dependent on private bakeries. In some governorates the price of 1 kg of bread, when available, reached SYP250 (US$3.40), in December 2012, compared to a subsidized price of SYP15 SYP (US$0.18) prior to the crisis.
The prices of staple commodities, such as wheat flour, bread and sugar, have risen by over 100 per cent in several governorates, including especially in Aleppo and Damascus. In these cities, the majority of the population now depends on private bakeries with bread prices at SYP250/kg (US$3.40) – 4 to 5 times higher than in some other governorates. Prices of milk, meat and chicken have risen considerable and as much as 300 per cent in some areas, according to WFP price monitoring. The J-RANS assessment conducted in the six northern governorates of Aleppo, Al-Hasakeh, Ar-Raqqa, Deir-ez-Zor, Idleb and Lattakia also confirms that one of the major problems facing the affected population is the price increase on basic food commodities, rather than unavailability of food products.

Negative coping mechanisms adopted by families include reduction of food consumption and substitution for lower quality and cheaper food. Such low quality diets combined with reduced access to health services increase the population’s vulnerability to illness and disease. Households are also reported to have withdrawn children from school, sending children to work, selling livestock and other assets, and cutting back on medical and educational expenses (JRFSNA, December 2012).

Fewer households are able to maintain food stocks, which are growing smaller in size – for many lasting less than one week. Furthermore, families are increasingly incurring debts to maintain minimal food consumption.

WFP is gradually scaling up to provide emergency food assistance to 2.5 million people having dispatched more than 550 food trucks each month to the 14 Governorates, in spite of growing security challenges. In March 2013, 397,950 rations were distributed, sufficient for 1,986,750 people or 99.5% of the 2 million beneficiary target for that month. Of those reached by WFP in February, about 500,000 people were located in non-government-controlled areas.

As part of the expansion plan, WFP is engaging with new NGO partners throughout the country to increase its reach. Partner organizations are identified based on organisational strength, neutrality, operational capacity and geographic coverage.

Many people in acute need of food assistance remain beyond the reach of humanitarian partners, especially in conflict zones or locations held by armed opposition groups to there is limited or no access. Based on the most recent estimates, the number of people in need of food assistance could double by the end of 2013. An FAO/WFP Crop and Food Security Needs Assessment Mission (CFSAM) is planned for mid-year.

With increased partnerships, deep-rooted knowledge of the country and a well-established logistical network, WFP is ready to further increase its target as needs assessments are completed and if resources are forthcoming.

Priority Needs

- Any revision of planning figures beyond the current target of 2.5 million people will be founded upon the immediate need of food assistance, needs assessment and the operational conditions on the ground;
- Adjustment of the general food rations to cover 80 per cent of daily energy requirements (from 60 per cent), including through the addition of wheat flour and yeast for baking bread;
- Targeted interventions for livelihoods support and income generation activities to provide immediate economic relief to affected populations in rural and peri-urban areas;
- 480,000 people (60,000 households) require emergency crop and livestock support (e.g. seeds, fertilizer, farming tools, animal feed, poultry and other farming/livestock inputs);
• Increase the availability of protein- and vitamin-rich foods among IDPs and host community families in peri-urban areas through provision of vegetable seeds and poultry: Increase crop production during the next cereal planting season by ensuring the distribution of crop seeds and fertilizer to farmers by the end of summer. Rehabilitation of small-scale irrigation systems will be essential to restoring and expanding crop production;
• Strengthen the collection, analysis and dissemination of food and nutrition security information.

Key Activities / Targets
• 2.5 million people targeted for food assistance,
• 40,000 small-scale herding families (320,000 people) targeted with animal feed to sustain their livestock. Deseitute pastoralist families targeted with poultry packages (poultry and poultry feed),
• 10,000 small-scale farming households (80,000 people) assisted through agricultural input packages,
• 10,000 households targeted with livelihood and income generating support (e.g. vegetable/fertilizer packages for backyard gardening, integrated livestock/agricultural input packages),
• 89,740 Palestine refugee families (360,000 people) targeted with emergency food assistance, while 89,740 families are to receive onetime cash assistance for six months. (SHARP 2013)
• Increase the number of children receiving supplementary feeding for prevention of acute malnutrition from 50,000 to 100,000 (from July 2013).

Water, Sanitation and Hygiene (WASH)

Situation Overview
In all the affected areas, per capita availability of the water supply in Syria has decreased to one third of pre-crisis levels. Frequent power cuts, fuel shortages, production and maintenance of water works along with infrastructure damages have a direct impact on water supply availability country wide. UNICEF estimates that the water availability per person per day from an estimated pre-crisis availability of 75 litres per person a day has dropped to an average of 25 litres per person a day (UNICEF, WASH Inter-Agency Rapid Assessment, December 2012).

Access to waste-water treatment chemicals has also become increasingly difficult. Most water utilities/eater establishments are short of chlorine, and chlorination is not systematically carried out by public and private water truckers. (UNICEF, December 2012). Limited access to chemicals is resulting in lower efficiency at treatment plans to properly treat and dispose of waste, further increasing the discharge of untreated waste into the environment with an increased risk of ground and surface water contamination. This issue is of particular concern in Idleb and Deir-ez-Zor. (WASH Assessment, December 2012).

According to WHO, contaminated water supply continues to pose a major public health risk for several of the affected governorates. Poor hygiene practices in densely-populated areas and collective shelters are increasing the risk of epidemic disease outbreaks.

Children and women in collective shelters are more exposed to unsanitary conditions, including unsafe drinking water and a lack of water for personal hygiene, placing them at further risk of water-borne diseases, including diarrhoea and skin diseases, such as scabies. In particular children and women are more exposed to:
• Unsanitary conditions due to lack of toilet facilities (generally range from 1/50 to 1/70 people/toilet as compared to the SPHERE standard of 1/20). To make matters worse, IDPs have been observed using the limited number of toilets in collective centres for bathing and other washing purposes, not only increasing the demand on the sewer or discharge system, but reducing their overall ability to maintain good hygiene practices. There is also a lack of water for basic needs (personal hygiene, menstruation management, washing clothes and flushing toilets);
• Unsafe drinking water, lack of chlorine and insufficient quality control of tap water, trucked water or bottled water;
• Risk of both food-borne and WASH related diseases (diarrhoeal diseases, acute respiratory infections, skin disease, and head lice);
Protection risks including poor or no locks, broken windows, doors, mixed-sex sharing of facilities, lack of lighting;

Water supply has been observed on average 8 to 10 litres per person per day, with a low of 4 to 5 litres per person per day in some locations, well below the minimum international SPHERE standard of 14 litres per person. (WASH Assessment, December 2012)

Water supply systems require repairs, particularly those which have been damaged in ‘hot spot’ areas, such as, Aleppo and Deir-ez-Zor. This would in turn require temporary and/or alternative solutions, while longer term repairs are underway. Most water supply systems are vulnerable to attacks and to system failures because most cities are supplied by water sources dozens kilometres away from city centre. For example, Aleppo is supplied from Assad Lake, located 80 km east of the town, where the water source is currently operating only 10 hours per day due to diesel scarcity and frequent mechanical issues as a result of constrained maintenance. Meanwhile, Damascus is supplied by two channels from Ain El-Fijeh spring, some 40 km from the city centre, which cover 65 per cent of needs. Currently the pumping stations are working at 50-65 per cent of the standard pre-crisis.

According to the December 2012 WASH assessment, national production of water treatment chemicals has come to a halt. This has caused the cost of water treatment to double in some cases. Moreover, frequent power cuts are affecting the capacity of water treatment and pumping stations as well as wastewater plants. In cases of system failure, most cities can trigger contingency water supply from other nearby sources, such as borehole fields, but this requires adequate preparedness.

Water pumping has decreased by 20 per cent in Damascus while it has dropped by 90 per cent in certain localities of Deir-ez-Zor. As a consequence, public water rationing is widely implemented. Water trucking is commonly used as an alternative, where water networks are not functional. For the most vulnerable families, the main challenge is the prohibitively expensive cost of trucked water; more than US$5 per cubic metre (3,000 litres cost 1,000 SYP - about US$15. family of 7 members requires at least one tank of water every 15 days. In Deir-ez-Zor, reduced access to water through the piped network has resulted in people accessing river water, which is often not safe for drinking if not treated.

Typhoid cases reported in the area are believed to have resulted from the consumption of unsafe water. Moreover, there is an increased risk of faecal-oral contamination due to lack of water to flush and clean toilet facilities in collective shelters. This issue poses serious public and environmental health risks (Syria Humanitarian Assistance Response Plan, January-June 2013).

Solid waste disposal and collection has been disrupted, with a majority of formal collective shelter without access to continuous services, which are usually carried out at the municipality level. In parts of Aleppo, Homs, Deir-ez-Zor, Idlib and Rural Damascus, solid waste management is becoming a problem due to lack of garbage collection. There is also an acute shortage of dustbins/containers in these areas.

Figure 13: Severity of WASH risks (The figure shows the severity of WASH risks assessed against the degree to which water services, quantity and quality have been impacted.)
Priority Needs

- General affected population: Support technical authorities to sustain minimum public services: water supply, wastewater and solid waste management, hygiene promotion and information mass campaign;
- Vulnerable groups: Support technical authorities and organisations to sustain WASH minimum standards (SPHERE as reference) for IDPs in collective shelters and for other public facilities such as schools and health facilities;
- Increase water storage capacity and provide support in the supply of spare parts/equipment to increase water production at the municipal level;
- Repair water supply systems, particularly those which have been damaged in ‘hot spot’ areas such as Aleppo and Deir-ez-Zor;
- Provide water bladders, tanks and distribution points while rehabilitation work of municipal systems are underway;
- On-going provision of sodium hypochlorite for water supplies for up to 10 million people and ensure on-going emergency access to safe drinking water and water quality testing/monitoring in collective centres);
- Increase number of toilets and access to showers in collective shelters (gender segregation and protection);
- Increase access to hygiene items such as soap, shampoo, toothpaste, toilet paper, and detergent;
- Improve and upscale regular WASH monitoring in collaboration with local authorities.

Key Activities / Targets

- Temporary access to safe water for up to 4 million people.
- 4 million people in affected communities (host communities, IDP locations, and collective shelters) will benefit in the medium term from rehabilitation of water services.
- Up to 2 million people will benefit from improved sanitation services and clean sanitary facilities.
- Up to 4 million people receive hygiene kits (including baby and family kits), soap, water collection and storage items, as well as household water treatment options.
- The rehabilitation of solid waste management for at least 500,000 people in shelters and affected communities.
- The rehabilitation of WASH equipment and facilities in schools, hospitals and health centres will benefit 1,000,000 people.

Shelter & NFIs

Situation Overview

The conflict has wrought considerable damage to housing and infrastructure across the country. According to ESCWA, an estimated 1,200,000 houses have been damaged, of which 400,000 are completely destroyed (ESCWA, March 2013). Concentrations of housing damage are found mainly in informal settlements (where mostly poor people live) of conflict areas, such as Homs, Damascus, Aleppo, Dar’a and Deir-ez-Zor. In December 2012, community leaders from Dar’a reported that on average 48 percent of private housing was damaged with Karak, Hrak, Da’el, Nahta and Tafs the areas hardest hit of communities assessed.

Though the majority of IDPs live among host communities, increasing numbers seek refuge in official and unofficial communal shelters. According to the Ministry of Local Administration, there are currently 722 public collective shelters hosting some 165,000 IDPs across Syria. The highest numbers staying in such shelters can be found in Aleppo (70,000 people), Ar-Raqqa (24,000 people), and Homs (15,000 people). In addition, over 1,500 schools are being used as shelters, according to UNICEF. About 1,100 of these schools are located in Aleppo governorate (UNICEF, March 2013). By April, the Syrian Ministry of Education indicated that the number of schools used as shelters had risen to 1,992.

Many IDPs are staying in unofficial shelters, unfinished buildings and makeshift accommodation, as well as in unofficial camps. These shelters are not under the coordination of the Government or municipalities. The sites are often unfinished structures, consisting of concrete floors and columns, with block infill – and they may extend up to 15 stories in height.
With the efforts of small local organizations, many families are being accommodated at such sites. The largest concentrations of displaced people staying in such locations are found in Aleppo, Idlib and Ar-Raqqah governorates, and along the northern border area of Syria and Turkey.

The increasing number of Syrians living in inadequate public or private shelters indicates that the coping mechanisms of both IDPs and host communities have become overstretched. Many of the communal and makeshift shelters are overcrowded and unsuitable in terms of water and sanitation facilities, cooking and privacy, especially for women. Displaced people who are living in such structures are particularly vulnerable as sites tend to be unfinished structures, with limited access to clean water, sanitation, waste management, electricity and insulation.

An inter-agency mission to Homs in January 2013 found that thousands of IDPs were spending the winter months in buildings with makeshift doors, windows and with limited fuel. In Dar’a, more than 23 per cent of communities surveyed in December did not have access to electricity. Some 77 per cent of surveyed communities had only partial access to electricity for few hours per day. Of the surveyed population, 58 per cent were reporting to be without access to fuel for cooking, heating and transport.

An assessment in northern governorates found that a single house may be hosting three to seven families (J-RANS, January 2013). At the beginning of the unrest, the vast majority of displaced people were hosted by other Syrian families. However, as the effects of the crisis became more severe, coping mechanisms were no longer sufficient.

IDPs living in formal collective shelters, IDPs living with the host families and the resident families hosting IDPs are the most vulnerable groups of population in need of shelter assistance. A vulnerability scale can be envisaged based on shelter modality; from displaced people living in unofficial shelters or in the open; people in official, assisted shelters; people staying with host families; and to displaced families who are able to rent alternative accommodation.

Many of the displaced were forced to leave their homes without a chance to bring even basic household items, in many cases escaping with only the clothes on their backs. The lack of possessions leaves the IDPs exposed to the elements and can create serious protection risks as it increases the vulnerabilities and hence the risk of exploitation of an already vulnerable population group.

Figure 14: Number of IDPs in formal collective shelters in Syria

The displaced population consists predominantly of women, children and elderly, highlighting the importance of provision of essential household items. Possessing a basic set of household items enhances the dignity of the displaced as it allows the IDP to create a private sphere in overcrowded, shared shelters and to ensure a satisfactory level of hygiene, food preparation and comfort.

Since early 2013, the Syrian Government has increased official prices on heating oil by 40 per cent and gasoline by 18 per cent. At the onset of the crisis, the price of heating oil was SYP15 per litre. The current price is SYP35 per litre. Meanwhile, prices on the black market are well above the price set by the Government. In some areas, the price per litre has reached SYP75-90 (ESCWA, March 2013).
Priority Needs

- Public buildings and homes used as shelters for IDPs are in need of repairs and enhancement to provide dignified, hygienic and safe living conditions;
- Basic NFIs including mattresses, bedding, kitchen and hygiene sets, clothes, baby supplies to be provided to IDPs;
- Fuel for heating and gas for cooking;
- Rapid emergency repair with plastic sheeting and lumbers on public and makeshift shelters;
- Cash assistance for the most vulnerable to support their shelter and household needs.

Key Activities / Targets

The total population targeted in the shelter & NFIs sector is 2,233,000. This includes:
- Shelter rehabilitation for 155,000 people in 180 collective shelters.
- Cash assistance for 200,000 persons to support their shelter and household needs.

Education

Situation Overview

An estimated 3.1 million children in Syria are identified to be in need of assistance as a result of the on-going crisis. This constitutes almost half of all Syrians in need of assistance. About 80 per cent of children in need of assistance (almost 2.4 million) are below the age of 14, and more than half of them (1.9 million) have been displaced, with their opportunities for schooling severely constrained. In cities where the conflict has been most intense many children can only attend school irregularly, while others have missed up to two school years.

The education sector has been particularly hard hit by the crisis. According to Ministry of Education (MoE) data (April 2013), 1,992 schools are being used as collective shelters for people who have been displaced, while 2,535 schools have been damaged or destroyed. Combined, schools either damaged or used as shelters represent around 20 per cent of Syria’s 22,000 schools.

In Idlib alone, 772 schools have been affected, representing 61 per cent of all schools in the governorate. In Aleppo, 300 schools have been damaged or destroyed, with a similar number recorded in Dar’a, according to UNICEF. According to a survey, more than 54 per cent of communities in Dar’a reported that schools are not functioning, while 46 per cent of the surveyed communities reported that schools are only partially functioning.

The escalating level of violence is threatening the education of hundreds of thousands of children as school attendance has plummeted in many areas affected by the conflict. In Aleppo, an assessment by UNICEF revealed that only 140,000 out of 1.2 million school-aged children (6 per cent) are able to go to school. Other governorates face similar problems, including Idleb (38 per cent), Ar-Raqqa (60 per cent), Dar’a (70 per cent) and Rural Damascus (70 per cent) (UNICEF, March 2013).
In some areas, children have dropped out because of school closures. Attendance reports from the school-year 2011/12 indicated that 70 per cent of the schools in Homs were closed from March - May 2012. This number increased to 90 per cent one month later. Also in Idlib and Dar’a governorates, 90 per cent of the schools closed in May-June 2012. This trend continued into the current school-year.

In addition to the 2,535 schools that have been damaged or destroyed, many other educational facilities such as administrative offices, training centers, print shops and warehouses are affected, corresponding to a loss of nearly US $740 million according to the MoE. The latter is resulting in major constraints to re-print textbooks and workbooks that are provided for free to every student every year.

The worst affected governorates are Idlib, Aleppo and Dar’a, reporting 60 per cent, 38 per cent and 34 per cent of schools damaged or used as shelters, respectively. The MoE, through its directorates of education, is undertaking maintenance works in order to rehabilitate damaged schools and put them back in operation.

Education is most disrupted in areas where conflict has been severe including Aleppo, Idlib, and Dar’a as well as Rural Damascus, Homs, and Al-Hasakah. There are reports that some schools have been used temporarily, and sometimes for longer periods, by armed groups.

In schools that remain open, school attendance varies widely. Insecurity, lack of a safe and protective learning environment and parents’ fears that schools will be targeted have a negative impact on attendance rates. So does the level of damage to schools, lack of water and sanitation facilities, lack or absence of teachers, and lack of education materials. In addition, early marriage constitutes an obstacle for children’s school attendance.

Children and adolescents are dropping out of school to try and earn an income for their families. In Idlib, in December 2012, only 38 per cent of children went to school. In contrast, in governorates like Tartous, Lattakia and As-Suweida, which are less affected by the crisis, the MoE reported normal attendance. Unverified data from the MoE estimate that an average of 84 per cent of teachers continue to report to their schools. It is unclear how many of these teachers are actually teaching and how often.

UNRWA reports that of its 118 schools, approximately 58 are consistently closed due to ongoing hostilities in the vicinity. Many school buildings have been damaged by conflict, reducing the availability of education services to over 67,000 Palestine refugee children. Some 17 per cent of all UNRWA schools are currently being used to house IDPs, resulting in alternative school buildings being rented or donated by the MoE. Approximately 25,000 children continue to attend regular classes, translating into an attendance rate of 37 per cent. The majority of students in Damascus are, however, unable to attend school and UNRWA is developing distance learning materials to mitigate the effects this is having on their education.
At least 184 teachers and other school personnel have been killed, while 40 students have been killed in or around school facilities (MoE 1 April 2013).

In many instances, IDPs have fled their cities and villages without any of their possessions. As a result, children often do not have copies of their official school records or their school materials. The same holds true for displaced teachers and education personnel who may have fled without copy of their credentials, making it difficult to work as teachers in their area of displacement.

Many schools did not re-open at the start of the new school year in September 2012, and thousands of others are operating under very difficult conditions. At least 368 schools - mostly in Damascus, Rural Damascus, Idleb, Quneitra, Dar’a, Homs and Ar-Raqqa - have adopted a system of double shifts, which is an increase of 14 per cent compared to the 2011/2012 school-year. Other schools are overcrowded, with more than a hundred children per class. In addition, most schools suffer from a lack of teaching and learning materials and have insufficient staff, supervision and management.

Access is also a problem for pre-school children. In Damascus, Homs, Idleb and Ar-Raqqa, pre-school buildings have faced damages, looting and closure. Higher education faces a similar plight, with many students unable to attend classes and complete their degrees, due to continued violence and campus closures or disruptions. University campuses have also experienced mortar attacks and fighting, with students being killed as a result, including in Aleppo in January 2013 where media reported 82 people killed.

Figure 18 depicts the status of schools and attendance rates as of February 2013.

Not being able to go to school regularly puts children at risk of losing sense of normality and routine which is crucial to the healing process associated with conflict. In addition, children risk having fewer opportunities for further learning and good livelihoods. For many of them, their chances of ever returning to school are severely compromised.

**Priority Needs**

- Ensure access to quality education in safe and protective learning environments for school age children and adolescents who are IDPs or from other affected groups, particularly in the provinces severely affected by IDP influx and conflict such as Aleppo, Ar-Raqqa, Al-Hasakah, Homs, Hama, Rural Damascus, Dar’a and Damascus.
Livelihoods

Situation Overview

Whether living in shelters or hosted by the community, IDPs are suffering from loss of income, loss of productive means and disrupted livelihoods. Moreover, there is an increasing number of female-headed households, which require particular attention to avoid resorting to negative coping strategies. IDPs and their hosting communities have depleted their savings and resources as a result of the protracted conflict. An increasing number of people require support for emergency income-generating activities and restoration/stabilization of basic livelihoods to cover immediate requirements.

Both urban and rural areas are affected. The June 2012 Joint Rapid Food Security Needs Assessment concluded that farming and livestock-based livelihoods are at real threat and in need of urgent assistance. Access to food at household level is at risk for approximately 30 per cent of the rural population (around 3 million people or 375,000 families) and to displaced families who are currently living in urban and peri-urban settings (WFP, FAO and MAAR, JRFSNA, June 2012).

Syria’s Human Development Index in 2012 is estimated to lose 15.1 per cent of its pre-crisis value to reach its 1993 level, a loss of two decades of human development caused by a sharp deterioration in health, education, and income indices. According to ESCWA, the number of poor people has increased by 3.1 million persons, of which around 1.5 million are expected to have fallen below the lower poverty line, thus becoming extremely poor. Moreover, the poverty map has changed substantially with conflict areas bearing the highest impact. Meanwhile, the increasing number of displaced people and refugees has deepened multidimensional poverty. According to the Syrian Center for Policy Research, around 28.3 per cent (about US$6.8 billion) of the total GDP loss in 2011 and 2012 was sanctions-related (The Syrian Center for Policy Research, Socioeconomic Roots and Impact of the Syrian Crisis, January 2013). The main part of this loss (about US$3.9 billion) was a result of international sanctions on the Syrian oil sector. The transportation, manufacturing, and financial sectors were also negatively affected by the sanctions. In terms of sanctions on trade, the

Key Activities / Targets

The total population targeted in the education sector is 1 million:

- School age children (6-15) from IDP groups
- Vulnerable children from communities hosting IDP groups
- Non-displaced children in areas where schooling is disrupted by violence and insecurity
- Preschool age children
- Teachers and other school staff and education personnel

- Provide psycho-social support and remedial education (‘catch-up classes’) through school clubs, especially for IDP and other crisis affected out-of-school children.
- Promote access of pre-school age children to pre-primary education programmes and ensure they benefit from psycho-social support activities to help them overcome the stress and fear resulting from having been exposed to or witness of violence.
- In schools hosting IDP children, provision of extra learning space such as pre-fabricated classrooms and repair of damaged school buildings including WASH facilities, and accommodate double shifts if required, including through paying salaries for education personnel involved.
- Provide necessary teaching and learning materials. Material provided to schools should also include recreational material that teachers and counselors can use to organize recreational activities to help relieve the stress experienced by children and adolescents;
- Organize training sessions for school principals, teachers and counselors in a number of fields, including psychosocial support;
- Promote alternative learning opportunities through distance education programmes using media to reach children at home and other safe and protective learning environments
- Reduce drop out and improve school retention and quality learning for vulnerable children and adolescents from communities hosting IDP groups particularly in the provinces severely affected by the IDP influx.

This humanitarian needs overview is produced by OCHA with inputs from a variety of partners. Analysis is provided by OCHA unless otherwise noted. Secondary information has not been independently verified by OCHA.
potential exports to Arab countries declined by 52 per cent, (mainly manufacturing goods), to EU countries by 93 per cent and to Turkey by 82 per cent (mainly oil exports). The sanctions led to a shortage in diesel and cooking gas for home use, and to a surge in the prices of oil derivatives by about 200 per cent.

The effects of the crisis have been felt in other productive and service sectors. These include physical damage, loss of productive assets, loss and decreased access to clients and market distribution, limited financial transactions and movement of capital, isolation and limited movement of the population, increased production costs, inflation and decreased productivity. Capital flight as well as brain drain and labor migration have also increased. Meanwhile, remittances have decreased due to economic sanctions. Within this context, it is critical to restore and stabilize livelihoods in order to prevent dependence on aid and the exacerbation of existing humanitarian needs, and avoid seeing a large segment of the Syrian population falling into further destitution.

Priority Needs

- Stabilization/ restoration of livelihoods as early as possible through the implementation of emergency employment and self-employment schemes.
- Rehabilitation of small community infrastructure and access to basic services to respond to the urgent needs of affected groups.

Key Activities / Targets

- The total population targeted in the livelihoods sector is 70,000 people. Livelihood support includes emergency assistance to restore livelihoods of 3,200 affected families (25,600 persons) from both IDP and host communities.

Logistics

Situation Overview

While the Logistics sector was set up in July 2012, the Logistics Cluster was formally activated in January 2013 to facilitate the delivery of assistance to those affected by the current civil unrest in Syria. The increased presence of humanitarian organizations in the country, coupled with a deteriorating security and economic situation have posed a number of challenges. Fuel is often in short supply, with the consequential increase in cost throughout the country, including in major cities and ports. The high levels of insecurity have made access and humanitarian presence hazardous. Access to commercial logistics services, including warehousing and transport has also become unpredictable.

While there is no shortage of trucks in Syria, challenges arise in the process of matching dispatch destinations with drivers willing to go. For example, it is difficult to get drivers for dispatches and delivery in Al-Hasakah governorate in north-eastern Syria.

As of March 2013, the Logistics Cluster maintains warehousing capacity inside Syria and regionally in Jordan. The storage needs in Syria have increased significantly. During the first three months of 2013, the Cluster stored more than 10,000 cubic meters of supplies on behalf of humanitarian partners. Items stored include essential medical supplies, clothes, plastic sheeting, blankets, mattresses, school items, seeds, hygiene kits, soap, and supplementary food.
Current common storage capacity:

Syria
- Damascus (Kisweh: 2,500 m²) – **Note: Kisweh warehouse may become inaccessible due to insecurity.**
- Safita (400 m²)
- Qamishli (300 m²)
- Lattakia (1,000 m²)
- Warehouses in Adraa in Rural Damascus and Aleppo are no longer accessible due to the situation on the ground.

Regional (Jordan)
- Irbid (1,200 m²)

Diesel fuel availability in the areas served by WFP transporters was considered satisfactory as of late March, with no imminent requirements for WFP to draw upon its reserves to supplement contractors. However, the situation remains precarious, as any major disruption to Syrian diesel imports risks a return to fuel shortages, as experienced in December 2012. As a consequence WFP continues to build its strategic reserves in-country, to selectively disperse storage in vulnerable areas, to reduce the risk of loss of stocks, and to explore both alternative sources of supply in collaboration with other UN agencies inside Syria. Inter-agency requirements of fuel have been largely identified and are built into the reserve strategy so that WFP may meet its commitments to the Logistics Cluster. The lack of petrol (benzene) for agency light vehicles continues to be an issue.

As of 11 March, the official price of gasoline (petrol/benzene) was SYP65 per liter, while the official price of diesel was SYP35 per liter. Overall approximate market rates for different locations are as per the table below (subject to frequent variation):

**Table 3: Market rates for fuel as of 11 March 2013**

<table>
<thead>
<tr>
<th>Location</th>
<th>Petrol Price (SYP)</th>
<th>Diesel Price (SYP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Damascus</td>
<td>100</td>
<td>95</td>
</tr>
<tr>
<td>Tartous</td>
<td>55</td>
<td>50</td>
</tr>
<tr>
<td>Lattakia</td>
<td>55</td>
<td>50</td>
</tr>
<tr>
<td>Aleppo</td>
<td>140</td>
<td>125</td>
</tr>
<tr>
<td>Al-Hasakeh</td>
<td>100</td>
<td>115</td>
</tr>
<tr>
<td>Deir-ez-Zor</td>
<td>100</td>
<td>70</td>
</tr>
<tr>
<td>Homs</td>
<td>55</td>
<td>45</td>
</tr>
</tbody>
</table>
Recent security incidents are affecting warehousing operations. For example, recent damage to one of the WFP warehouses in Adraa in Rural Damascus has made the facility inaccessible. The security situation has also led to the non-use of the Aleppo warehouse. The Kisweh warehouse, also located in Rural Damascus, is the main warehouse for common storage of NFIs for humanitarian partners. Given the current security situation in this area, it may also become inaccessible.

There have also been intermittent border closures depending on the security situation, affecting logistics:

- The Lebanese/Syrian ‘Al Arida’ Border Crossing was temporarily closed during clashes and re-opened on 19 February. The border closed yet again on 20 March when cargo transport operations on the roads leading to Al-Arida and Dabboucieh border crossings (Lebanon to Syria) were temporarily halted, disrupting transport northward towards Tartous and Lattakia. The border crossing re-opened on 26 March, but experienced recurring difficulties towards the end of the month.
- Currently there is no movement of cargo vehicles in or out of the Jordan-Syria Border Crossing 'Jader/Naseeb'.

Despite challenges, Tartous and Lattakia ports continue to operate normally.

Customs Information including guidelines for exemptions, customs paperwork (Jordan/Lebanon to Syria) is available on the Logistics Cluster website.

**Priority Needs**

- Joint convoys to locations identified and prioritized by the Inter-sector Coordination Group (ISC), and evaluated on the basis of field assessments, SARC reports, and inter-agency data triangulation;
- Decentralization of UN operations through establishment of humanitarian hubs;
- Import of fuel;
- Contingency planning for warehouses, regional stocks, access roads, and ports as well as border crossings that can be used or not used;
- As lead agency for the Logistics Sector, WFP remains on standby to provide logistics support for organisations beyond filling gaps with a view to increasing overall efficiency in the humanitarian response as the situation evolves.

**Emergency Telecommunications**

**Situation Overview**

The conflict has affected the Information Technology (IT) and telecommunications infrastructure throughout Syria, with Homs, Deir-ez-Zor, Aleppo and Qamishli considered the worst affected. Damascus continues to maintain full mobile telephone coverage. Syria used to have stable electrical power throughout the country – even remote areas – and the cost of electricity was relatively low. However, the conflict has seriously affected the electrical infrastructure, with many remote areas and cities left without electrical power. Humanitarian agencies operating in the field mostly rely on generator power. For instance, the WFP office in Qamishli uses city power only 3 hours a day. In Damascus, the UN and NGOs operate from hotels or offices with sustained electrical power, yet also rely on generators.

Operational challenges include the following:

- Deteriorating security situation;
- Licensing issues (importing and operating) – including of satellite communication and radio networks;
- Procurement and importation of technical equipment;
- Limited radio coverage across the country;
- Restricted access due to deteriorating security;
- Lack of MOSS Compliance Operational Areas due to the lack of Emergency Telecommunications services;
- Lack of Operational common areas with voice and data services due to the lack of reliable local Infrastructure and restrictions on importing UN Standard ICT Equipment;
- Difficulty in Inter-sector coordination due to the lack of Communication Centres (Radio Rooms) in operational areas;
- Staff Safety and security concerns due to the lack of operational Radio Rooms with coverage in all operational areas.
Despite the difficult and restrictive situation, the ETC has achieved:

- Installation and programming of telecommunication equipment for humanitarian organizations based in Damascus;
- Centralized equipment procurement, coordination and tracking on behalf of the humanitarian community;
- Development of vehicle tracking systems in collaboration with the UN Department of Safety and Security (UNDSS) for tracking missions and convoys;
- Continued coordination and information sharing among partners;
- Assessment of telecoms infrastructure in common operational areas.

**Priority Needs**

Priority needs include rapid mitigation of operational risks and challenges disrupting the provision of ETC services in all operational areas within Syria. Plans to expand services within Damascus, Aleppo, Homs, Qamishli and Tartous are subject to security and Government authorization. Additional staff and equipment will be required for these hubs, in addition to reduced restrictions on import and licensing of IT and telecoms equipment. IT and telecoms equipment are being prepositioned in surrounding countries to increase capacity for internet connectivity on the ground. Moreover, a tracking process is being put in place to monitor equipment location and usage. Experienced ETC responders are on stand-by to deploy as soon as access is granted.

The ETC aims to provide the following services:

- Radio coverage to UN Operational Areas
- Communication Centers/‘Radio Rooms’
- Radio Training to UN Staff
- Radio Programming
- Common Security Communication assessments
- Common ICT Infrastructure assessments
- Basic Data Connectivity ‘Internet Cafe’
- Advanced Data Connectivity
- Basic Telephone Services
- Dedicated Telephone Services
- Liaison with Government authorities
- Collaboration forum

- Dedicated NGO ETC Coordinator
- Helpdesk for ETC Services
- Basic Business Services (Print, Scan, etc.)
- Liaison with Government authorities on behalf of the humanitarian community to license and import telecoms equipment
Operational Analysis

Humanitarian Access

Humanitarian access is hampered by a combination of constraints:

Security-related
- Active fighting and military operations.
- Lack of respect by parties to the conflict for International Humanitarian Law.
- Multiplicity / fragmentation of armed groups.
- Suspicion and misperceptions vis-à-vis humanitarian actors.
- Attacks on humanitarian personnel, goods and facilities.
- Interruption of access to warehouses, closure of key access routes, formal and informal checkpoints.

Bureaucratic/administrative
- Visa restrictions for UN/INGO staff.
- Restrictions on importation of telecoms equipment and armoured vehicles.
- Excessive administrative procedures for humanitarian missions and aid delivery.

Lack of resources/infrastructure
- Limited availability of fuel.
- Lack of drivers and transportation companies willing to operate in certain areas of the country. Drivers have in some instances been detained for several days.

Road access along Syria’s main highways is dependent on the security situation. As a result, humanitarian access to affected populations, is impaired with certain areas (e.g. Homs Old Town, Palestine refugee camps) cut off from essential assistance for extended periods of time.

Humanitarian partners have not been able to reach all areas of Syria to assist those in need. Access to hot spots and areas under opposition control remains a particular challenge; both in terms of the main access roads used to reach the location and intra-location movement, as control over territory regularly shifts hands and command is characterized by fragmentation. There is often a plethora of armed groups involved in holding small areas, particularly in urban centres. One small neighbourhood may have multiple armed opposition groups on the ground, with no overall central command to facilitate safe access for humanitarian personnel and aid convoys. The UN continues to call for unrestricted access and safe passage for civilians who wish to leave an area of conflict.

Despite the constraints, the UN and its partners seek to reach all those in need. To improve access, the UN employs various efforts, including:

- Negotiations with all parties to the conflict, both at the central and the local level, state and non-state,
- Increased coordination among UN agencies in support of inter-agency convoys and dispatches to hard-to-access areas, inter alia in Idlib, Aleppo and Homs Governorates,
- Decentralization of operations through the opening of hubs across the country and
- Partnering with an increasing number of local partners.

Since January 2013, further cross-line access has been achieved in some parts of the country, enabling inter-agency delivery of assistance to north-western areas of Idlib and Aleppo governorates, as well as Homs. In February 2013, an estimated 49 per cent of food assistance reached Syrians in contested or opposition-held areas.

Insecurity

Efficient and effective assistance delivery is hampered by the prevailing high levels of insecurity. On-going violence, including aerial bombardment and gunfire characterizes the overall operational environment. Over the recent three-month period, more than a dozen security related incidents impacted UN staff and assets. Incidents include arrests, detention, hijackings of cars and kidnappings.
A number of humanitarian workers have been killed. Since March 2011, 9 UN staff and 18 Syrian Arab Red Crescent (SARC) volunteers have lost their lives. Meanwhile, a number of UN staff and SARC volunteers are in detention or missing. During the first week of March, WFP’s main warehouse facility was struck by mortar fire. Similar incidents have previously affected other storage facilities used by UN agencies and SARC.

Humanitarian dispatches have been held up or come under threat on numerous occasions. Drivers have in some instances been detained for several days.

**Capacity**

Ten UN agencies, the United Nations Department of Safety and Security (UNDSS), as well as the International Organization on Migration (IOM) are operational inside Syria. Twelve international NGOs have been authorized by the Government of Syria to provide humanitarian assistance in the current crisis and have signed or are in the process of signing a Memorandum of Understanding with the Syrian Arab Red Crescent (SARC). In addition, some international NGOs operate under a Memorandum of Understanding with relevant lines ministries. At national, regional and local levels, SARC – through more than 10,000 volunteers across the country – remains the key implementing partner for humanitarian aid delivery.

In total, more than 100 organizations are involved in the assistance effort in cooperation with UN agencies in Syria. Humanitarian partners continuously work to expand local partnerships and provide capacity-building. In January 2013, the Government of Syria authorized 110 additional national NGOs to provide humanitarian assistance in partnership with the UN. However this list was recently reduced to 29 NGOs.

Before 24 March 2013, more than 120 international UN staff were based in the country. On 24 March, a number of mortars landed inside the grounds of and around the Sheraton hotel where the majority of UN staff live and work. As a result, a decision was taken by the Syria Security Management Team to reduce the number of staff with immediate effect resulting in the temporary relocation of staff members to support offices in Amman and Beirut. Some critical staff have already returned to Syria. In the meantime, agencies continue to send staff to sub offices in Homs and Tartous.
About 1,000 national staff are employed by the UN in Syria. Approximately 3,800 local staff work for the United Nations Relief and Works Agency for Palestine Refugees (UNRWA). While the bulk of international and national staff operate from Damascus, UNRWA staff are based throughout the country. There is UN staff presence in Qamishli, Al Hasakah, Ar-Raqqa, Tartous, Aleppo, Homs, An-Nabk (Rural Damascus) and Dar’a.

Many organizations deliver assistance in multiple governorates and sectors. IFRC and ICRC have their own funding mechanisms and are not part of the SHARP 2013. UNRWA provides assistance to Palestine refugees in all sectors, as included in SHARP.

To enhance assistance delivery, UN agencies have or are in the process of establishing humanitarian hubs and deploy additional staff throughout the country. Such hubs will be located in Homs, Tartous, Dar’a, Ar-Raqqa and Qamishli. The hubs in Homs and Tartous are already operational. While the hubs are being established, humanitarian partners continue to increase the number of joint assistance delivery missions to hot spots and hard-to-access areas.
Funding

The overall funding for the Syria crisis in 2013 totals $1.262 billion as of 26 April, compared to $152 million at end January. Donors have directed $926 million to the Syria Humanitarian Assistance Response Plan (SHARP) and the Syria Regional Refugee Response Plan (RRP). Other funding received has been committed outside the common planning framework.

As of 26 April, the SHARP is funded at 63 per cent ($354 million) with $208 million of its $561 million revised requirements still unmet. The RRP is funded at 55 per cent ($573 million) with $471 million of its $1.04 billion requirements unmet. Both appeals will be revised by the end of May 2013, and requirements are expected to at least double. Even if all Kuwait Conference pledges are committed, there will be significant gaps between requirements and funding in the second half of the year.

Figure 23: Overall funding for the Syria crisis in 2013

![Graph showing overall funding for the Syria crisis in 2013](image)

The two appeals coordinated by the United Nations require $1.56 billion to cover as much of the needs as possible from January through June 2013.

Figure 24: Funding to the RRP and the SHARP

![Graph showing funding to the RRP and the SHARP](image)

Figure 25 shows allocation of funding to sectors. It does not yet fully reflect the recent Kuwait funding commitment of US$300 million which is still awaiting final sector allocation.

* SHARP requirements have risen from US$519 million to US$562 million to reflect increased need for food. WFP is scaling up to reach 2.5 million beneficiaries in April, up from 1.5 million in January.
**Coverage and Gaps**

The UN and its humanitarian partners are prioritizing the provision of life-saving interventions to mitigate the suffering of affected populations, including through food, emergency livelihood support, access to basic health care, access to clean water, adequate sanitation and hygiene, emergency shelter and essential relief items, reproductive health as well as protection. However, effective delivery of humanitarian assistance to address critical needs is challenged by compromised humanitarian access, limited partnerships as well as funding shortages. Given the low level of funding, gaps are significant across all sectors, yet the dramatic increase in number of people affected and in urgent need of humanitarian assistance necessitates the upscale and acceleration of response.

Despite the ongoing conflict and access/security constraints, the UN is working closely with SARC and other partners in scaling up humanitarian assistance. Food distributions in February reached almost 1.7 million people across the country, while nearly two million people were reached with food assistance from WFP in March 2013. Since 2012 more than 980,000 people were reached with essential non-food items. Around 4,000,000 million people benefited from dispatch of 400 metric tons of chlorine and 333,820 persons received soap, hygiene items and hygiene related messages. In 2012, 45 shelters were rehabilitated benefiting around 5,000 families. In 2013, plans are underway to rehabilitate 171 shelters. To date, more than 1,300,000 children were vaccinated against measles. Some 75,201 school aged children in conflict affected areas attended remedial classes through school clubs and 49,590 adolescents benefited from non-formal and informal education.

Despite the high level of insecurity, in the past two months, access opportunities materialized to reach vulnerable groups that were besieged and/or not reached for a long time, as a number of interagency humanitarian convoys were organized to hot spot areas where access had to be negotiated with different actors at local level.

Through UNRWA's support, 28,652 Palestine refugee households have been provided with food and essential non-food items. In addition, 70,000 families have received cash assistance.
### Key Baseline Indicators – Syria

<table>
<thead>
<tr>
<th>Category</th>
<th>Indicator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area</strong></td>
<td>(square kilometres) (thousand)</td>
<td>185.0</td>
</tr>
<tr>
<td><strong>Arable land</strong></td>
<td>(% of land area)</td>
<td>25.4</td>
</tr>
<tr>
<td><strong>Access to electricity</strong></td>
<td>(% of population)</td>
<td>92.7</td>
</tr>
<tr>
<td><strong>Demographic Indicators</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population (2011 estimation in million)</td>
<td></td>
<td>23.6</td>
</tr>
<tr>
<td>Population growth (annual %)</td>
<td></td>
<td>1.8</td>
</tr>
<tr>
<td>Rural population (% of total population)</td>
<td></td>
<td>43.9</td>
</tr>
<tr>
<td>Birth rate, crude (per 1,000 people)</td>
<td></td>
<td>22.8</td>
</tr>
<tr>
<td>Life expectancy at birth, total (years) -2010</td>
<td></td>
<td>75.7</td>
</tr>
<tr>
<td>Population ages 14-0 (% of total)</td>
<td></td>
<td>36.2</td>
</tr>
<tr>
<td>Population ages 64-15 (% of total)</td>
<td></td>
<td>59.8</td>
</tr>
<tr>
<td><strong>Economic Indicators</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GDP per capita (current US$) 2009</td>
<td></td>
<td>2,462.6</td>
</tr>
<tr>
<td>GNI per capita, PPP (current international $)</td>
<td></td>
<td>5,090.0</td>
</tr>
<tr>
<td>Unemployment, total (% of total labour force)-2010</td>
<td></td>
<td>8.4</td>
</tr>
<tr>
<td><strong>Maternal and Newborn Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal mortality ratio, per 100,000 live births, 2010</td>
<td></td>
<td>70.0</td>
</tr>
<tr>
<td>Adolescent birth rate, per 1,000 women aged 15-19, 2008</td>
<td></td>
<td>75.0</td>
</tr>
<tr>
<td>Births attended by skilled health personnel, per cent, 2009</td>
<td></td>
<td>96.2</td>
</tr>
<tr>
<td>Births by caesarean section (2001) (%)</td>
<td></td>
<td>15.0</td>
</tr>
<tr>
<td>Contraceptive prevalence (2006) (%)</td>
<td></td>
<td>58.3</td>
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<tr>
<td>Immunization, BCG (% of one-year-old children) - 2010</td>
<td></td>
<td>90.0</td>
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<tr>
<td>Immunization, DPT (% of children ages 12-23 months) - 2010</td>
<td></td>
<td>80.0</td>
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<tr>
<td>Mortality rate, under- 5 (per 1,000 live births) - 2011</td>
<td></td>
<td>15.3</td>
</tr>
<tr>
<td>Infant mortality rate, (under 1) – 2011</td>
<td></td>
<td>13.2</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
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<tr>
<td>Population undernourished (2011), %</td>
<td></td>
<td>5.0</td>
</tr>
</tbody>
</table>

### ANNEX I: ACRONYMS AND ABBREVIATIONS

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
</tr>
<tr>
<td>Tuberculosis prevalence rate per 100,000 pop (mid-point) –</td>
<td>23.0</td>
</tr>
<tr>
<td><strong>ICT</strong></td>
<td></td>
</tr>
<tr>
<td>Mobile cellular subscriptions (per 100 people)</td>
<td>63.2</td>
</tr>
<tr>
<td>Fixed telephone lines per 100 inhabitants - 2011</td>
<td>20.9</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
</tr>
<tr>
<td>Improved sanitation facilities (% of population with access)</td>
<td>95.0</td>
</tr>
<tr>
<td>Improved water source (% of population with access) - 2010</td>
<td>90.0</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Public expenditure on education (% of GDP)</td>
<td>4.9</td>
</tr>
<tr>
<td>Education index</td>
<td>0.534</td>
</tr>
<tr>
<td>Combined gross enrolment in education (both sexes)</td>
<td>66.4%</td>
</tr>
</tbody>
</table>

#### Sources:

SCFA  Syrian Committee for Family Affairs
SHARP  Syria Humanitarian Assistance Response Plan
SOWC  The State of the World’s Children report
SYP  Syrian Pound
UNDP  United Nations Development Programme
UNDSS  United Nations Department of Safety and Security
UNFPA  United Nations Population Fund
UNHCR  United Nations High Commissioner for Refugees
UNICEF  United Nations Children’s Fund
UNMAS  United Nations Mine Action Service
UNRWA  United Nations Relief and Works Agency
WASH  Water, sanitation and hygiene
WFP  World Food Programme
WHO  World Health Organization