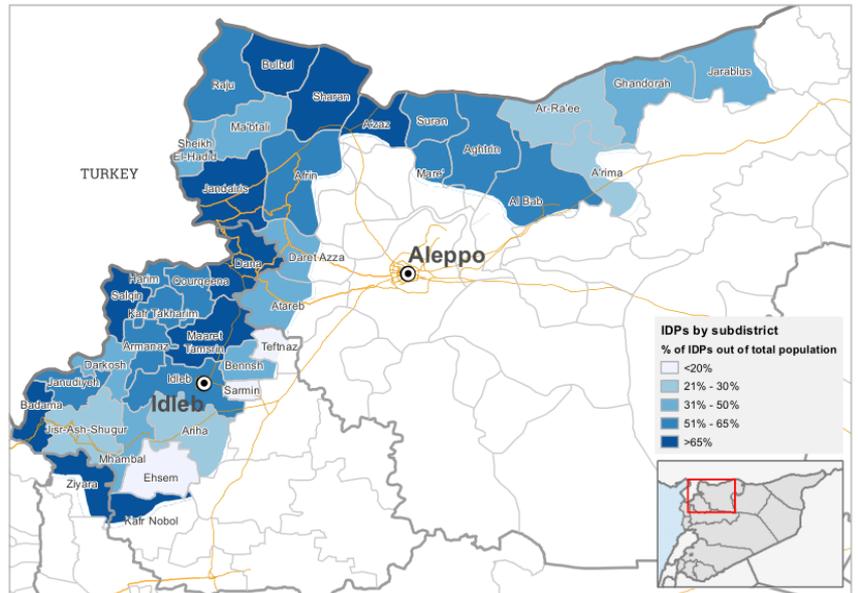


### HIGHLIGHTS

- The Syrian Pound has halved in value since the beginning of May, pushing prices of basic necessities to record highs and further out of reach for people in northwest Syria.
- Renewed displacement has been reported from some parts of southern Idlib governorate and northern Hama governorate following hostilities in the area.
- No laboratory confirmed COVID-19 cases identified in northwest Syria to date. Efforts remain focused on awareness raising and measures to mitigate an outbreak, with preparation for an effective response in the event of any cases.
- Major humanitarian needs persist across all sectors. Due to the pressures of COVID-19 mitigation measures and the economic deterioration, there are increasing reports of gender-based protection issues such as short-term marriages, domestic violence, divorces and forced abortions.



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

**4.1 M**

People in northwest Syria

**2.8 M**

People in need of assistance

**2.7 M**

People are internally displaced

**76%**

Of the overall population are women and children

### SITUATION OVERVIEW

The humanitarian situation in for people northwest Syria remains severe as the decline of the economic situation exacerbates the effects of the ongoing conflict on the four million people living in the area. The impact of the COVID-19 mitigation measures and the rapid devaluation of the Syrian Pound (SYP) are putting additional strain on the population, which has already eroded significantly through nine years of conflict, insecurity, displacements and economic hardship. An estimated 2.8 million people are in need of humanitarian assistance to meet basic needs such as food, shelter, water, health and education; the impact of these recent developments are entrenching the existing humanitarian needs and creating new needs.

Since early June, the value of the SYP has been declining rapidly with the informal exchange rate reaching a historical record of 3,175 SYP per USD in Idlib on 9 June. As of publication time, the exchange rate is fluctuating around 2,650 SYP per USD. In real terms, the current rate represents a devaluation of the SYP by some 105 percent since the start of May and by some 360 percent in the one year since June 2019. The devaluation has resulted in the prices of basic necessities such as bread, food, water and hygiene supplies reaching record highs, well beyond the ability of the population to cope with price increases. People are experiencing shortages of food and other key supplies in markets.

There are difficulties in conducting key humanitarian activities such as water trucking are being reported across northwest Syria due to the collapse of the currency and related complications in monetary transactions. To mitigate against the volatility of the SYP, local authorities in the Idleb area and northern Aleppo governorate have initiated steps towards substituting the SYP with the Turkish Lira and/or the US Dollar for official and everyday transactions, including payments of wages and stipends. To facilitate this, large quantities of Turkish Lira notes and coins were reportedly delivered to Idleb city on 11 June. This economic impact come atop the complexity of COVID-19 preventive measures, which have already been taking a toll on the availability of goods in markets since April. The impact of the devaluation exacerbates an already dire humanitarian situation for people where only 17% of children and mothers who need treatment for acute malnutrition were reached, leaving a gap for more than 57,000 individuals. Some 60% of the people who need access a safe water supply are being reached, leaving a gap of 1.3 million people across northwest Syria. In the Idleb area only, it is estimated that at least 45 percent of the population rely fully on water trucking as the only and main source of water and at least 65 percent rely on water trucking to complement their consumption of water.

There are multiple drivers of people's humanitarian needs in northwest Syria, including displacement. Of the four million people living in northwest Syria, 2.7 million people are estimated to be internally displaced. Most recently, some 780,000 of the nearly 1 million people displaced in northwest Syria between last December and early March reportedly remain in displacement. Longer-term needs are increasing, including for health, nutrition and education services, even as urgent needs for shelter, food, water, sanitation, hygiene and protection persist. For instance, more than 300,000 people who were displaced during the latest wave of violence were not able to receive emergency food assistance due mainly to funding shortages. Just over half of the 100,000 tents needed to accommodate 500,000 people displaced between December and March were installed as of 2 June. Overall, some 1.4 million displaced people, meaning some 270,000 families, are estimated to be living in IDP sites across northwest Syria. 80 percent of this displaced population, some 1.12 million people, are women and children. For people in northwest Syria, displacement not only means the loss of their homes, but also the loss of their livelihoods due to the predominantly agricultural population's loss of access to their fields and/or livestock. For the 180,000 people who have returned to their home communities and 20,000 displaced people who returned to their former places of displacement, difficulties persist as basic services and humanitarian activities had been suspended in areas close to the frontlines where they have returned.

The ceasefire announced on 5 March has reduced violence significantly. However, military developments on the ground including shelling and clashes along the frontlines in southern Idleb and airstrikes on 8-9 June are concerning. As a result of these tensions, civilians living in areas close to the frontlines in southern Idleb and northern Hama, including those who had recently returned to these areas after the ceasefire, are once again fleeing from their homes. While the number of people who are moving is not yet clear, local sources estimate that hundreds of families have already fled. Given the precarious economic situation as well as COVID-19 concerns, a displacement movement may be even more devastating than usual for those who have to flee their homes and for the host communities receiving them, who are themselves facing difficulties coping with the economic downturn.

The overall security situation is precarious across the Idleb area and northern Aleppo governorate as a result of increased inter-NSAG tensions, incidents involving members of NSAGs and the civilian population as well as the prevalence of improvised explosive device (IED) incidents over the past three months. These have resulted in many deaths and injuries to civilians as well as material damage. In addition, popular protests triggered by the economic downturn are frequently taking place, adding to the unpredictability of the situation.

The effects of the COVID-19 pandemic not only exacerbates humanitarian needs across northwest Syria, but also contributes to the complexity of the operational environment for humanitarian activities. Humanitarian actors had to cease or reduce certain activities that could not be adapted to the current environment in an effort to keep people in need and humanitarian staff safe. For instance, protection and education activities had to be suspended to a large degree as the virtualization of these activities was limited due to the difficulties accessing phones and internet for some people. COVID-19 countermeasures have also resulted in the delayed treatment of urgent medical cases in Turkey, as only limited numbers of patients requiring chronic treatment unavailable in Syria, such as chemotherapy, have been able to cross. While no cases of COVID-19 have been identified in northwest Syria to date, relaxation of some preventative measures such as reopening of schools, markets and mosques have been reported recently. The humanitarian community remains committed to the ongoing COVID-19 preparedness and response efforts, alongside ensuring the continuity of regular humanitarian assistance in a safe and appropriate manner. Testing and isolation capabilities as well as facilities to treat more severe cases of COVID-19 are operational and these capacities are being enhanced. However, major gaps in personal protective equipment such as protective gowns, goggles and surgical and N-95 masks persist.

## FUNDING

The Syria Cross-Border Humanitarian Fund (SCHF) continues to prepare a standard allocation for approximately US\$ 75 million. 140 projects were submitted amounting to US\$ 140 million across 10 clusters. A review of the submitted projects was conducted between 1 and 8 June. Nearly 60 percent of the submitted projects have been approved in principle, pending the implementation of the review committees' recommendations. Partners are required to complete the revision of the projects no later than 22 June and to strictly adhere to the required guidance.

Since the start of 2020 the fund will have allocated a total of US\$ 150 million, including the COVID-19 emergency reserve. This is the most since the establishment of the fund, enabled by generous contributions from 14 donors. Despite this being the largest allocation launched since the inception of the SCHF in 2014, the collective funding ask across sectors illustrates the continued immense need for funding, especially for Syrian partners. This is crucial for supporting the initiation and renewal of critical life-saving activities across northwest Syria and reflects the high dependence of the population on humanitarian financing activities from the SCHF and other donors contributing to the cross-border humanitarian response. The Deputy Regional Humanitarian Coordinator has called for additional funding to be contributed to scale-up the current allocation, particularly in light of the severe ongoing economic deterioration in Syria.

To facilitate resource mobilisation, partners and agencies are required to ensure information on funding secured is appropriately reflected in the Financial Tracking Service (FTS). This will enable an accurate overview of the funding situation for the humanitarian response in Syria. As of 10 June 2020, US\$ 659 million has been reported against the 2020 Syria Humanitarian Response Plan (HRP) (19 percent funded) and US\$ 57 million against the additional COVID-19 response requirements (15 percent funded).

## HUMANITARIAN RESPONSE

### Camp Coordination and Camp Management

#### Needs:

- The devaluation of the Syrian Pound has exacerbated economic problems in northwest Syria. As indicated in the CCCM Cluster's monthly displacement updates, one of the main priority needs for new arrivals in May was cash/voucher assistance (36 percent), a significant increase from the April update (11 percent).
- In the context of the COVID-19 pandemic, expanding and establishing camps are essential to decongest overcrowded sites, whilst also ensuring that services are available in the new locations. Establishing and reinforcing camp management is also required. The CCCM Cluster's multisectoral service monitoring factsheet for May indicates that out of 907 sites hosting more than 1.2 million displaced people, camp management is not available in 515 sites.
- Most of the displaced families hosted in four reception centres have been there for more than five months, with no resettlement possibilities due to lack of adequate shelter options. Facilitating the relocation of displaced people from overcrowded reception centres to sites where physical distancing and hygiene practices are more feasible is a priority.

#### Response:

- The CCCM Cluster shared with its members the updated multi-sectoral service monitoring factsheet. The data for 907 sites was collected, cleaned and analysed. Key findings regarding WASH services in IDP sites indicated that 91 percent of displaced people had access to potable water. However, hygiene kits had been systemically distributed in only 8 percent of sites. In terms of health services, 733 sites were found to have a gap in the availability of community health workers, compared to 174 sites that were assessed as having no gap.
- As part of the SCHF First Standard Allocation, eight project proposals were received and reviewed by the CCCM Cluster Strategic Review Committee (SRC) on 2 June. COVID-19 risk mitigation measures and indicators in proposals were evaluated through the review process and fed into the decision-making. US\$ 5 million has been allocated for CCCM activities. The CCCM Cluster's key objectives are to improve camp management quality and accountability of IDP sites and to strengthen basic infrastructure support in IDP sites, including COVID-19 preparedness.
- The CCCM Cluster closely monitors 993 IDP sites hosting some 1.45 million displaced people (275,000 families). Updated information from the IDP Sites Integrated Monitoring Matrix (ISIMM) database was shared with members, with 21 new sites added to the CCCM database and 11 sites inactivated in the May update. More details about the IDP sites in northwest Syria are available via [the dashboard](#).

- The CCCM Cluster continued to monitor and report on multiple incidents in IDP sites as part of the coordination response. An increase in fire incidents has been observed by the CCCM Cluster, a reason for which has been the misuse of heaters.
- The Land Identification Taskforce has continued to prioritise the establishment and expansion of IDP sites, which are essential activities for decongesting overcrowded sites that face heightened risk from COVID-19. Between December 2019 and 12 May 2020, the Taskforce has assessed a total of 301 sites with an approximate area of 8 million square metres, including identified and verified sites as well as sites currently under proposal.
- According to the CCCM Cluster's monthly displacement tracking, in May the total reported IDP population is some 2.7 million people, while nearly 75,000 displaced people reportedly returned to their community of origin during May, with Ariha, Ehsem and Atareb recorded as the top three returnee destinations. In May, the CCCM Cluster tracked 41,328 recent displacements, noting that people may have been displaced multiple times and that there are different reasons for movements.
- According to the displacement update, the top priority needs in May of the recently displaced include cash/voucher assistance (36 percent), shelter (27 percent), NFIs (10 percent), food (9 percent), health (8 percent), water (5 percent), and safety and security (5 percent).
- To date, three functioning reception centres have responded by hosting 3,460 displaced people (some 734 families), including providing food, shelter and WASH services.

#### Gaps & Constraints:

- The continuous displacement led to a decrease in areas available to accommodate the newly displaced population.
- Although IDP sites are usually a last resort option, they are necessary in the current context of northwest Syria, and the issue of overpopulated IDP sites continues to be a concern.
- A massive data cleaning process and verification is required for the information provided by different members.
- As 90 percent of IDP sites are self-settled with a lack of a camp management system, there are challenges in ensuring the application and enforcement of COVID-19 prevention, response and mitigation guidance.
- An urgent need was identified for fire points in 724 IDP sites and gaps were identified in shelter availability in 584 IDP sites, based on the findings of the CCCM Cluster's multisectoral factsheet that evaluates 907 IDP sites.

### Early Recovery

#### Needs:

- According to the most recent nationwide socioeconomic overview report of a UN partner, one third of households in Syria reported their primary livelihood activity as private business, while in northwest Syria daily labour was the most common livelihood activity (32 percent), followed by private sector employment, not including small businesses (31 percent), and public sector employment (12 percent).
  - Household income is lowest in northwest Syria, where average income is 16 percent lower than the national average. Female-headed households reported an average income 33 percent lower than the national average, making them exceptionally susceptible to economic shocks.
  - Households reported an average monthly income of 113,503 SYP. 61 percent of households reported that their income was insufficient to meet their needs. Crucially, households that primarily depend on daily wage work (19 percent of total households in Syria and 32 percent of households in northwest Syria) on average report an income of 83,041 SYP, substantially lower than both the median and mean incomes.
  - The most important household barrier to employment or diversifying income was a lack of employment opportunities, as reported by 66 percent of households, followed by a lack of financing (54 percent), lack of skills (40 percent) and the security situation (19 percent). From a regional perspective, the security situation and lack of employment opportunities are more frequently reported as an obstacle in northwest Syria. Lack of skills is an obstacle that is also more commonly reported by female-headed households (51 percent).
  - 60 percent of households in northwest Syria reported that their income was insufficient to meet their needs. Other forms of income reportedly relied upon by these households to compensate for income gaps include borrowing money or buying on credit (79 percent) and spending on savings (43 percent), which can negatively impact the ability to deal with future shocks due to the reduction of resources. 24 percent of households reported selling household goods/assets and 12 percent of households reported selling productive assets or means of transport, directly reducing future productivity of households, including that of human capital formation. Three percent of these households reported that children in their household were working.
  - In northwest Syria, 81 percent of males between the ages of 17 and 64 worked during the last three months of 2019, while only nine percent of females worked during the same period. These are the lowest work rates for both males and females across all of Syria.

- The most common reason for not working was due to disability (32 percent). For men, being a student was the most reported reason, while the main reason women reported for not engaging in economic work was childcare or pregnancy. 17 percent of women who had not been working reported not having the right skills for the market, compared to four percent of men. 10 percent of women reported that they were not allowed to work, compared to one percent of men.
- According to the most recent multi-sectoral rapid needs assessment (RNA) in March, child labour is prominent across northwest Syria and poses a high risk particularly for displaced persons. This is due to greater challenges in accessing sustainable livelihoods than host community households, resulting in children being sent to work in order to provide for their families.
  - In 73 percent of assessed communities, it was reported that households faced barriers to accessing markets. The greatest challenge reported for accessing markets was lack of transportation.
  - Among reported sanitation issues were the absence of sewage systems and sewage flowing into streets. Insufficient garbage collection and the resulting presence of garbage in streets was reported in 33 percent of assessed communities.
  - Electricity networks were completely damaged by conflict in 56 percent of assessed communities, while internet coverage and telecommunications networks were completely damaged in 32 percent of assessed communities.
  - The most commonly reported rehabilitation needs according to the number of communities in which they were reported were electricity networks, water supply networks, roads, schools, hospitals and health facilities and community-dug wells.
- Due to COVID-19:
  - Projected further job depletion, resulting in increasing need for support in terms of livelihood opportunities, income and employment, adding to the people already in need of livelihoods. support prior to the crisis
  - Possible disruption in the supply chain for goods and services, with severe impact on the local economy (consumption patterns, business, service provision, rehabilitation works, etc.)

#### Response:

- 24 ERL Cluster members responded in April, with 11 ERL members reaching 70,323 people in 11 Aleppo sub-districts and 16 ERL partners reaching 274,655 people in nine Idlib sub-districts.
- Rehabilitation of access to basic utilities (electricity, gas, water and sewage) interventions reached 42,434 households, mostly in Al Bab and Jandairis in Aleppo governorate and Mhambal in Idlib governorate.
- 3,408 m<sup>3</sup> of debris and waste was removed, mostly in Atareb and A'zaz in Aleppo governorate and Bennsh in Idlib governorate.
- 218 persons were employed through the creation of short-term work opportunities, in light rehabilitation works of road and drainage systems or in COVID-19 awareness raising campaigns.
- 70 persons provided regular employment access in the field of media and advocacy works in Maaret Tamsrin in Idlib.
- 98 people were supported by entrepreneurial activities, mostly women and youth supported to start a business or service or farmers provided with micro-loans.
- 1,563 people benefited from vocational and skills trainings, primarily light rehabilitation works, mechanics and mobile maintenance, hairdressing and sewing.
- 19 people with disabilities benefitted from activities such as vocational training, short-term work opportunities and entrepreneurship support.
- Four organisations were provided capacity and equipment support in northern Aleppo governorate.
- Rehabilitation of 15 kilometres of road and six drainage systems in Dana in Idlib governorate remains ongoing.
- Recommendations were provided to ERL partners for mitigating the risk of COVID-19 transmissions while implementing ERL activities.
- A specific guidance note on the inclusion of persons with disabilities in the COVID-19 response, in ERL activities and in general was developed by an ERL Cluster partner and shared with other ERL partners.
- According to the latest indications from ERL partners following COVID-19-related adjustments:
  - Vocational training and skills training activities, social cohesion activities including support to civic engagement activities, and community initiatives have been and are expected to continue being affected. ERL partners have reported halting or suspending activities for an indefinite period. Few partners reported exploring/implementing shifting to online modalities; opportunities to address this are being explored.
  - Support to entrepreneurship, short-term work opportunities and support to regular employment: ERL partners have indicated that activities are continuing as planned and were adjusted to take into account curative and preventive health measures for COVID-19, such as raising awareness on prevention measures through distributions of brochures, leaflets and posters and reducing the number of participants where appropriate.
  - Most ERL partners rehabilitating basic utilities, local economic infrastructures and health facilities reported continuing as planned before COVID-19 while adapting for curative and preventive health measures.

## Gaps & Constraints:

- At least 500,000 additional people among the displaced population, returnees and host communities are not reachable by ERL partners with the currently available funding. This groups need to be urgently reached with:
  - Support to businesses in both urban and rural environments
    - Start-up support through grants or micro-credit;
    - Support for micro-businesses and businesses to contain the impact of the COVID-19 on their activities.
  - Creation of short-term work opportunities, particularly through the Cash-for-Work modality and potentially linked to rehabilitation works improving access to services.
  - Rehabilitation/restoration of access to basic utilities, local economic infrastructure and other social infrastructures, including:
    - Electricity (provision of electricity through solar panel installation, etc.);
    - Access ways/roads to markets for farmers, shopkeepers and business owners, to cultivatable lands, and to and from IDPs camps;
    - Markets;
    - Water systems (water pipes, pumping stations, groundwater tanks to ease stress on overburdened services);
    - Rehabilitation of sewage channels and drainage systems to ease stress on overburdened services.
  - Restoration of essential services and basic infrastructure to prioritise activities that would support the preventive and curative health response to COVID-19, including rehabilitation of health centres and facilities, retrofitting of designated quarantine facilities, equipping of isolation centres, waste management, restoration of water and sanitation services and provision of energy to these facilities, in close coordination with other sectors and local governance structures.
  - Collecting daily solid waste in urban areas and inside camps, providing cleaning machines or garbage collections vehicles to local councils, removal of demolitions from roads and sidewalks, and cleaning of main and secondary roads and social infrastructure by removing rubble and garbage.
  - Market-based modalities assistance to vulnerable households, including assisting vulnerable households with transportation to and from markets and health facilities.

## Education

### Needs:

- An estimated 398,000 school-age children (5 to 17 years old) have been displaced in northwest Syria since 1 December 2019.
- Due to the large influx of displaced families, many schools were converted to temporary shelters, preventing them from being used for educational purposes. 23,419 people reside in 277 schools in Afrin, Al Bab and A'zaz districts in Aleppo governorate and Ariha, Harim, Idlib and Jisr-Ash-Shugur districts in Idlib governorate.
- Education activities have been continuously suspended due to insecurity as well as schools being used as shelter. Only five schools remain functional in Ariha sub-district as a result, with overcrowded classrooms due to displacement from nearby locations.
- More than 300 schools are out of operation, impacting 117,000 children and more than 5,000 teachers:
  - 135 schools in Ma'arrat An Nu'man and neighbouring communities, impacting 48,649 children and 2,704 teachers;
  - 23 schools in the communities of Ariha, impacting 5,681 children and 384 teachers;
  - 41 schools in the communities of Saraqab, impacting 4,901 children and 615 teachers.
- Closures of schools due to COVID-19 compound the problem. Schools in northwest Syria reopened on 6 June after closure since 14 March in the Idlib area and since 16 March in northern Aleppo governorate, with the summer semester planned to take place until mid-August.
- Examinations for grades 9 to 12 will reportedly be held from 4 to 21 July.
- To address needs, the objectives of the Education sector are:
  - Providing education personnel and teacher incentives and training;
  - Providing learning materials for children and teachers;
  - Provision of non-formal education and summer school for out-of-school children (in classroom or remote/distance);
  - Preparing for the safe reopening of schools (reparation/extension of classrooms and school furniture, WASH, hygiene promotion and supplies, school disinfection, etc.)
- COVID-19 prevention needs:
  - Cleaning of education facilities (as they become accessible to children and/or adults again);

# 398,000

school-age children  
displaced in northwest Syria  
since 1 December 2019

- Clean WASH facilities in schools (in coordination with WASH cluster);
- Hygiene and basic health sensitisation at home, printed and/or through social media in coordination with Risk Communication and Community Engagement (RCCE) efforts;
- Physical re-planning of school infrastructure, especially in camps, taking into consideration adequate physical distancing and to prevent large gatherings of children when schools reopen;
- Modalities of education services (classes etc.) need to be adjusted to prevent large gatherings.
- Continuation of learning:
  - Childcare arrangements for children whose parents are healthcare workers (in coordination with the Child Protection sub-cluster);
  - Adaptation of existing curricula and implementation through printed materials and/or social media and self-learning programmes;
  - Assessment of students', parents' and teachers' access to affordable internet connectivity and internet-enabled devices. Consider paper-based individual home learning assignments based on current curricula as alternative;
  - Hold meetings virtually to consult with school governance bodies (PTAs, SMCs) on the proposed approach;
  - Provision of Education materials and supplies to children affected by COVID-19, to enable them to continue education through distance learning;
  - Provision of exercise sheets to all students, regardless of whether they have access to online platforms.

### Response:

- The Education Cluster reached at least 267,624 school-age displaced children with education assistance. Children are being reached with diverse packages of education services including psychosocial support (PSS), psychological first aid (PFA), formal and non-formal education activities, home schooling, student bags and textbooks to minimise disruption to children's learning.
  - 11,682 children supported with PSS and PFA in Idleb, Maaret Tamsrin, Harim, Dana, Atareb, Qourqeena, Daret Azza and Bennsh;
  - 22,916 children supported with formal and non-formal education in Idleb, Harim, Dana, Atareb, Salqin, Maaret Tamsrin and Qourqeena; including children with disabilities;
  - 26,669 children supported with recreational kits, school bags, student kits and textbooks in Idleb and Aleppo.
  - 4,150 children supported for their mid-year exams;
  - 173 children provided with medicine to treat headlice, in coordination with the Health Cluster;
  - 1,106 children supported with home-based education based on a self-learning programme, in Marat Tamsrin, Daret Azza, Ariha and Haritan sub-districts;
  - 4,000 out-of-school children provided with life skills, recreation and PSS education activities;
  - At least 58,959 children benefited from distance learning in Idleb and Aleppo governorates as an alternative way to continue education during the COVID-19 pandemic;
  - In Idleb and Dana sub-districts, 98,491 students and 654 teachers have been provided with awareness raising on COVID-19 and received information, education and communication (IEC) and sterilisation materials;
  - 21,779 students, teachers and parents sensitised on prevention of COVID-19;
  - Since February, 228,878 children from displaced and host community populations received textbooks in Idleb and Aleppo governorates;
  - 443 teachers and education personnel provided with teachers' incentives
  - 63 teachers and education personnel were trained on literacy, numeracy and PSS and referral mechanisms;
  - 227 families have been provided with tents by Education partners to support the relocation of displaced people sheltering in schools, in order to enable the resumption of learning activities in the affected areas;
  - At least 36 schools and temporary learning spaces have been sterilised to mitigate against COVID-19.

### Gaps & Constraints:

- Lack of funds inhibits the ability of Education Cluster members to provide quality education support, particularly in conjunction with security situations in which children are constantly on the move.
- Education services need to be relocated to follow displaced populations and be established in locations where displaced people settle. Lost or destroyed educational materials need to be replaced.
- The education system in areas receiving newly displaced families were already overstretched prior to the latest displacement. The needs for receiving the newly displaced people in the existing education services risk inflaming inter/intra-community tensions.
- Students and teachers lack basic education supplies, and school furniture and WASH facilities are insufficient.
- Many learning facilities have no basic safety equipment/systems in place despite ongoing safety and security concerns.

- Students and education personnel are not receiving the psychosocial support, knowledge and skills needed for a safe and productive learning environment.
- Suspension of schools due to COVID-19 impacted on the quality of children's education.

## Food Security

### Needs:

- The large-scale displacement of people in northwest Syria contributed to an intensive movement of livestock. Increased contact and exchange of animals between flocks from different areas has increased the risk of disease transmission and outbreaks. Extensive vaccination coverage for livestock is thus a priority in order to prevent epidemics.
- Emergency food assistance is needed for recently displaced people during the first two to four weeks of displacement, through cooked meals and ready-to-eat (RTE) rations. After the first-line emergency response, displaced people need to be integrated into the monthly regular food assistance.
- After the initial wave of displacement, livelihood initiatives are key to support affected local communities and households to recover agricultural production, sustain small-scale food production, maintain productive assets, and create income-generating activities to prevent reliance on negative coping mechanisms.
- There is need for provision of animal feed to limit sales of livestock by displaced and impoverished households. Due to transport cost, feed distributions are expensive and hence extremely limited in scope. Voucher schemes for provision of animal feed by local suppliers are cost-efficient and sustainable. The main current needs for livestock are dry storage fodder warehouses, water for the animals and three main vaccinations, against Pasteurella, Enterotoxaemia, Peste des Petits Ruminats (PPR).
- Availability of animal food products such as dairy, eggs and meat plays a crucial role in preventing human malnourishment. Support for animal production significantly contributes towards protecting human health and reducing vulnerability to COVID-19.

# 311,000

people in need of food assistance

### Response:

- Urgent response is still underway to provide food access to recently displaced people, via distributions of ready-to-eat rations (RTE), which are tailored to a standard five-person household, provision of cooked meals and emergency multi-purpose cash grants (MPCG) in the amount of US\$ 120 to US\$ 130 per household to cover immediate food needs.
- 18 FSL Cluster partners delivered emergency food assistance to some 665,000 recently displaced people and returnees between 10 May and 10 June:
  - 11 FSL Cluster members distributed 227,000 Emergency Food Baskets to reach 45,400 people;
  - 11 FSL Cluster members distributed 49,700 RTE rations to 248,000 people;
  - Two FSL Cluster members distributed US\$ 305,000 Cash for food to 11,800 people;
  - Five FSL Cluster members distributed 177,000 Cooked Meals to 177,000 people.
- FSL Cluster members' plans to provide further assistance in June and July include:
  - 17 FSL Cluster members planned 44,758 Emergency Food Baskets (one-off) to reach 224,311 people;
  - Seven FSL Cluster members planned 29,638 RTEs to assist 147,469 people;
  - Nine FSL Cluster members planned 204,274 Cooked Meals to assist 102,137 people.
- The Cluster lead agency has prepositioned more than 297,000 RTEs with partners in northwest Syria to meet the immediate food needs of more than 1,48 million people, in addition to the stock of food rations for regular monthly assistance. The Cluster lead agency reactivated its one-off emergency assistance response as of 31 March while maintaining monthly regular general food assistance (GFA) combined with RTEs for those in need.
- The FSL Cluster completed the strategic review of 38 proposals for the SCHF 1st Standard Allocation, recommending 21 of these – half focused on food assistance and half on livelihood, to reach a total target of 300,000 people over the next 12 months. A US\$ 15 million envelope is available, in addition to US\$ 2 million to support bread activities.
- To address the recent issues surrounding bread availability in northwest Syria, the FSL Cluster held an ad hoc meeting on 9 June with relevant partners in conjunction with the Bread and Bakery Coordination Group. Key points include:
  - 11,000 tonnes of bread are needed to meet the daily bread needs of the 4 million people in northwest Syria.
  - Due to the collapse of the Syrian Pound, bread packs in some areas have been priced in Turkish Lira. In some areas, the price of subsidised bread is fixed in Syrian Pounds, while unsubsidised bread prices are the Syrian Pound equivalent of US\$ 0.39 according to prevailing exchange rates.
  - The price of one tonne of wheat is currently US\$ 220 in Aleppo and US\$ 240 in Idleb.

**Gaps & Constraints:**

- Since 1 February, there are 562,600 displaced people (114,000 of them returnees) still in an emergency situation. 251,100 displaced people were reached in May through food baskets, RTE rations, Cash and Cooked meals, while a gap remains of 311,100 displaced people who were not reached.
- The wheat harvest is ongoing until the end of June 2020, making this a crucial period for farmers who are still seeking someone to purchase their yield at subsidised prices that would enable them to continue cultivation. These activities will impact on food security, alongside other livelihood activities related to agriculture, livestock and irrigation.
- Related to COVID-19:
  - Five FSL Cluster members reported having postponed training activities; around 1,596 people are planned to be trained (150 people, 32 agriculture engineers, 1,014 people and local councils, 200 people and 200 people from five projects).
  - More funds are needed to cover unexpected costs due to COVID-19 mitigation measures being applied by FSL Cluster members, such as door-to-door distribution, addition of soap to food baskets, etc.

**Health****Needs:**

- An outbreak of leishmaniasis is affecting northwest Syria, with increasing cases of both cutaneous and visceral leishmaniasis. The knowledge of local communities about prevention and control measures for leishmaniasis needs to be improved, the capacity of health personnel around leishmaniasis control needs to be enhanced, and more medical treatment supplies are needed.
- From January to March, 132 suicide attempts and incidents of self-harm were reported, particularly among displaced people living in very dire circumstances.
- An exit plan is urgently needed for the asylum hospital in A'zaz, which will soon be without support. This is the only existing acute mental care centre for Afrin and the A'zaz to Al Bab and Jarablus area of northern Aleppo governorate, serving some 120 chronic mental health patients. There is a need to maintain services for 76 chronic mental health patients and to organise a solution such as transferring critical cases to other specialised facilities, or facilitating discharge and integration into the community with consideration of stigma and discrimination.
- There is a need to preposition Non-Communicable Diseases (NCD) medicines and consumables in northwest Syria sufficient for at least 12 months. This will maintain life-saving services, including dialysis services, equipment and medicines in the event of disruptions in the cross-border supply line.
- There is a need to secure Personal Protection Equipment (PPE) for health personal (662 staff) and community health workers (CHW) in order to ensure the continuity of the activities in case of COVID-19.
- On COVID-19:
  - With no cases reported in northwest Syria to date, the focus remains on equipping Infection Protection Control (IPC) measures at points of entry and providing training to human resources required for accelerated response and mitigation capacity. There is a need to establish reliable communication channels with authorities in northwest Syria in order to facilitate community adherence to COVID-19 mitigation measures.
  - There is a need to strengthen active surveillance as a means to identify and test all suspected cases, including surveillance of influenza like illnesses (ILI) and severe acute respiratory infections (SARI) that fit the updated case definition of COVID-19. This includes expansion to high-risk groups as prioritised by the northwest Syria COVID-19 Taskforce. This entails strengthening field level efforts and reopening the sentinel sites that have remained closed, training, etc.
  - Patients with NCD and tuberculosis are considered at greatest risk in the event of a COVID-19 outbreak in northwest Syria. Despite efforts by the Health Cluster lead agency to supply NCD kits, there remains a critical need to allocate additional support to provide essential NCD drugs to serve people in northwest Syria over the next months.
  - There is increasing need for hygiene items such as soap to be distributed by CHWs.

**Response:**

- The Health Cluster lead agency is supporting 33 primary health centres (PHC) as well as mobile teams in Idleb, Afrin, A'zaz and Al-Bab. The Cluster lead agency provided 10,040 vials of Glucantime to treat leishmaniasis and is planning to provide more Glucantime and 140,000 bed nets for northwest Syria.
- The Health Cluster lead agency is supporting 6 mental health and psychosocial support (MHPSS) facilities, four hospitals and tuberculosis centres in northwest Syria, as well as providing technical support to the referral system in Idleb and technical and financial support to the referral system in Afrin.

- In terms of integrating NCD/MHPSS into 16 PHCs, the preliminary training for the 59 key PHC staff has been completed. On-the-job training and support has started in these PHCs for 6 months and the essential NCD drugs were distributed. The next phase will include an additional 48 PHCs to be considered in the integration.
- All the 117 MHPSS services across northwest Syria are functioning, with the exception of group counselling services and group activities for children on psychosocial support (PSS) that were halted due to COVID-19. As such, 11 MHPSS facilities are functional while two were closed temporarily and one was closed permanently. Services provided from January to March include 7,903 Mental Health Gap Action Programme (mhGAP) consultations, 53,000 PSS services, 17,000 psychological first aid (PFA) cases, 2,353 Problem Management Plus (PM+), 3,496 gender-based violence (GBV) services and 2,692 Child Protection services including 662 specialised MHC services.
- On MHPSS capacity building for health partners in northwest Syria, 193 active mhGAP-trained doctors and 301 psychosocial workers (PSW) are present in northwest Syria.
- The MHPSS Helpline has been performing well since its commencement in early April, with 99 received calls, new cases and follow-up by the end of April. The helpline provides referral advice in case the caller needs special MHPSS care and/or referral to other social or health services. The main issues raised via the helpline pertain to relationships and inter-personal problems, abuse and neglect, education and occupational problems, complaints based on somatic and physical problems and problems linked to COVID-19.
- A quality of care field mentoring team continues to visit secondary healthcare facilities to inspect the quality of care at Intensive Care Units (ICUs) and for NCDs. In addition to mentoring, the team provides technical support to 15 ICUs and 17 general hospital in northwest Syria.
- The Sexual and Reproductive Health (SRH) technical working group is supporting all partners with iron supplements through Kit 6B, and has developed an informative note and IEC materials in Arabic on anaemia and its management. A new protocol on malnutrition and anaemia during pregnancy and lactation has been developed in both English and Arabic. The working group is in ongoing coordination with Nutrition Cluster for integrated services.
- The 91 Expanded Programme on Immunization (EPI) centres in northwest Syria are all functional, and conducted 935 sessions in the last two weeks. An estimated 13,262 children aged below 1 year are targeted for immunisation each month. All vaccination activities in EPI centres were resumed on 4 April, following suspension as a precaution against the spread of COVID-19. WHO guidelines on physical distancing and use of PPE as well as COVID-19 awareness raising are being implemented at the EPI centres.
- WHO sent six truckloads of medical supplies to northwest Syria to respond to the ongoing humanitarian crisis and to provide 421,100 treatment courses. In addition to the prepositioned stock, the latest delivery included specialised emergency kits to support primary healthcare, NCD care, secondary healthcare, trauma and surgical care, including:
  - 90 interagency emergency health kits (basic module) to provide three months of treatments to 90,000 people;
  - Three interagency emergency health kits (supplementary medicine module) to provide three months of treatments to 30,000 people;
  - Eight trauma kits to provide 800 treatments;
  - Six surgical supply kits to provide 600 treatments;
  - 30 sets of essential medicines, serving 300,000 people for 3 months.

#### COVID-19:

- As of 7 June, 924 samples have been tested for COVID-19 using the PCR in laboratories in Idleb and northern Aleppo. Of these 921 samples are negative and three are pending. The Health Cluster lead agency is supporting the laboratory in Idleb with the procurement of 2,000 Universal Transport Medium (UTM) / Viral Transport Medium (VTM), which will be used for testing samples of COVID-19 and other respiratory illnesses.
- Community-based isolation (CBI) centres have been renamed COVID-19 Community Treatment Centres (CCTC), in order to establish a clear distinction between CCTC, which are health centres intended for treating patients with mild-to-moderate cases of COVID-19, and quarantine centres, which are intended for isolation purposes.
- 3,600 gloves, 70 protective goggles, 3,500 surgical masks, 350 face shields and 475 protective gowns have been distributed to two isolation units in Idleb. A further 1.3 million surgical masks (3 layers), 1.1 million powder-free nitrile gloves, 200,000 EN149 masks/FFP2, 100,000 protective suits, 27,000 safety goggles and 35 ICU ventilators were procured for northwest Syria. These have been delivered to warehouses in Syria and are in the pipeline for distribution to health facilities; 41 health facilities will be provided with PPE (masks and surgical gloves) for three months. Partners implementing IPC measures at points of entry will receive requested supplies for two weeks, 1,600 CHWs will be equipped with supplies for one month. The remaining supplies will be stored for use at CCTCs.
- The northwest Syria COVID-19 Health Task Force continues to coordinate actions to activate planned case management service delivery points. A monitoring framework with key performance indicators by response pillar is being developed to monitor variables for assessing progress and implementation gaps in the northwest Syria COVID-19 preparedness and response plan on an ongoing basis.

- Coordination is ongoing with the WASH and FSL Clusters to scale up hygiene promotion activities. This includes soap distribution and affixing COVID-19 awareness stickers on food parcels and soap packaging during distribution activities, as an alternative to circulating flyers and thereby decreasing the risk of spreading COVID-19.
- As of end-May, a network of health partners conducted 14 training sessions for 242 health workers in 14 reporting health facilities. The trainings took place in Idleb, Harim, A'zaz, Al Bab and Jabal Samaan, covering the basics of COVID-19 disease surveillance and diagnosis and collection of specimens for laboratory investigation.
- Screening measures were strengthened at five points of entry through the deployment of trained human resources, vehicles for referrals (emergency and non-emergency for asymptomatic cases) and providing equipment and supplies including PPE. Of the five points of entry, three are cross-border (Al Hammam, Bab Al-Hawa and Bab Al-Salam) and two are cross-line (Ghazawiyet and Deir Ballut).
- The referral system was upgraded with an additional 20 vehicles, 40 paramedics and the provision of PPE and other critical medical supplies. Some 120 paramedics and drivers attended a one-day training on IPC related to COVID-19 and in line with WHO recommendations on pre-transportation of people suspected as having COVID-19.
- Individual awareness raising activities held by six health partners reached 20,990 people.
- 496 community leaders, women and youth groups were reached with 25 training sessions on COVID-19, psychological first aid (PFA), self-care and protection against sexual exploitation and abuse (PSEA). The trainings were held in Idleb city, Bab Al-Hawa, Afrin, A'zaz and Al Bab.
- mhGAP refresher and roll-out training sessions that consider MHPSS for COVID-19 is underway for 160 PHC doctors. Under very strict IPC measures, seven sessions were attended by 136 PHC doctors in A'zaz, Dana and Afrin, with PSEA and GBV training included in the sessions.

### Gaps & Constraints:

- Ongoing insecurity, the protracted conflict, repeated displacement, socioeconomic deterioration and the latest crash of the Syrian Pound pose significant challenges in northwest Syria, exacerbated by additional barriers introduced by COVID-19 related restrictions affecting movement, imports and the availability of services such as women's access to family planning supplies. Availability and accessibility of family planning services in terms of supply and counselling provision are being affected.
- Most selected secondary and tertiary hospital are overwhelmed with high patient caseloads due to the influx of recently displaced people and returnees.
- Some health facilities reported funding gaps especially following adaptations to meet the northwest Syria COVID-19 preparedness and response plan. The eight PHCs functioning in Idleb (Salqin, Zardana, Janudiyeh, Darkosh, Sarmada, Termanin, Zarzur and Mashhad Ruhin) will have funding gaps as of July 2020, and four of these are operating 24 hours per day each day of the week and providing basic emergency obstetric and newborn care (BeMONC) services.
- Initial plans for conducting various in-person trainings for health facility staff on leishmaniasis control and on integrating tuberculosis services with PHC services have been suspended due to COVID-19.
- For COVID-19:
  - Referrals across Idleb, Afrin and northwest Aleppo have been very low over the past two weeks. Improving referral number of suspect, health facilities notification and communication/coordination efficacy will be focused within the northwest Syria COVID-19 Health Task Force.
  - Functional triage across health facilities managed by partners is a key area being coordinated under the COVID-19 Health Task Force. Data collection is underway at the field level to understand gaps. Initial findings include limited availability of space at some of the health facilities for erecting tents in place, while some information gaps exist for why tents are or are not being used. The COVID-19 Health Task Force is working to address this with partners. Enhancing the referral system efficacy in terms of knowledge at the health facility level on issues such as the level of treatment required, availability of services and beds and inter-facility transfer is being centred to improve coordination across the care continuum.
  - There are delays in starting work at the CCTC. Only two are presently active, in Idleb city and Kafr Takharim.
  - There are concerns about heightened risk of COVID-19 entering northwest Syria due to the Eid holidays and exam season of national schools. The COVID-19 Health Task Force is coordinating with local authorities, Health Cluster partners and other clusters to ensure appropriate IPC measures are applied.

### Nutrition

#### Needs:

- In May 2020, the proxy prevalence of acute malnutrition across northwest Syria based on community-based nutrition surveillance was 2 percent among children aged 6 to 59 months and 11 percent in pregnant and lactating women (PLW).

# 495,074

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

- The proxy prevalence of acute malnutrition was higher in Idlib compared to Aleppo among children aged 6 to 59 months (3 percent vs. 1 percent) and PLW (18 percent vs. 4 percent).
- The proxy prevalence of chronic malnutrition (stunting) among children aged 6 to 59 months across northwest Syria according to the May 2020 surveillance report was 29 percent, higher among boys (31 percent) than girls (26 percent).
- Proxy acute malnutrition was generally higher among the displaced population than host communities. The prevalence of acute malnutrition among children aged 6 to 59 months increased from 1 percent in April 2019 to 2 percent in May 2020. The prevalence of chronic malnutrition (stunting) increased from 19 percent to 29 percent during the same period.
- Exclusive breastfeeding was found to be 34 percent, minimum dietary diversity 54 percent, and minimum acceptable diet (MAD) was 39 percent.
- The prevalence of acute malnutrition in children aged 6 to 59 months remains relatively low, while the high prevalence of stunting in children aged 6 to 59 months and acute malnutrition in PLW are of concern.
- The Nutrition Cluster estimates the burden of acute malnutrition in the accessible locations of northwest Syria to be 103,905 PLW and 26,720 children aged 6 to 59 months – 3,127 cases of severe acute malnutrition (SAM) and 23,593 cases of moderate acute malnutrition (MAM).
- The poor nutrition situation is largely attributed to continued exposure of children and PLW to unsafe living conditions, diseases (including impacts of COVID-19), suboptimal infant and young child feeding (IYCF) practices, high maternal malnutrition, low purchasing power, poverty, food insecurity, family separations, poor care practices, early marriages, destruction of infrastructure causing limited access to health services, and inadequate sanitation and water supply.

### Response:

- Since the start of the year, 495,074 children aged 6 to 59 months and PLW were reached with life-saving nutrition services covering 437 communities and 38 sub-districts in the Idlib area and northern Aleppo governorate.
- The number of children aged 6 to 59 months and PLW reached to date represents nearly 31 percent of the population in need, with a 5 percent increase in coverage since the last situation update.
- Specialised nutritious supplements (Ready-to-Use Foods (RUF), Lipid-based Nutrient Supplements (LNS), High Energy Biscuits (HEB) and micronutrient supplements) reached:
  - 198,207 children aged 6 to 59 months, representing 21 percent of those in need;
  - 120,911 PLW, representing nearly 29 percent of those in need.
- 24 Nutrition Cluster partners provide life-saving nutrition services through 120 Rapid Response Teams (RRTs) and mobile teams, nine stabilisation centres and 165 Outpatient Therapeutic Programmes (OTP)/Targeted Supplementary Feeding Programmes (TSFP).
- Nutrition Cluster partners provided the following services;
  - 74,998 displaced children aged 6 to 59 months and PLW received HEB for prevention of acute malnutrition;
  - 173,737 PLW and children aged 6 to 59 months received micronutrient supplementation;
  - 55,170 children aged 6 to 36 months received LNS for prevention of acute and chronic malnutrition;
  - 175,956 mothers and care givers were reached with infant feeding and caring practices messages and counselling.
- Of the 495,074 PLW and children aged 6 to 59 months screened for acute malnutrition:
  - 1,900 cases of severe acute malnutrition and 6,376 cases of moderate acute malnutrition were identified among displaced children aged 6 to 59 months and referred for appropriate treatment;
  - 6,937 acutely malnourished PLW were identified and referred for appropriate treatment.
- Nutrition Cluster partners are implementing the recommended adaptations for COVID-19, including continuity of life-saving nutrition services, integration of infection prevention and control (IPC) measures in all platforms to mitigate against transmissions of COVID-19, enhanced communication on IYCF-E in the context of COVID-19, simplified protocol for treatment of acute malnutrition, surveillance, and supply pre-positioning to avoid stockouts.
- Weekly Nutrition Cluster COVID-19 Taskforce meetings are conducted to review emerging global evidences and recommendations, and to discuss northwest Syria experiences and questions raised by partners in relation to the operational guidance. The Cluster also conducts Nutrition Cluster coordination meetings fortnightly.
- The Nutrition Cluster Strategic Review Committee (SRC) completed a review of the 10 projects that were submitted for the SCHF First Standard Allocation for 2020 and shared its recommendations with the SCHF.

### Gaps & Constraints:

- Key challenges encountered by Nutrition Cluster members in adjusting their operations for COVID-19 according to the Cluster guidance include lack of personal protective equipment (PPE), lack of infrared forehead digital thermometers to facilitate isolation at facilities, inadequate WASH services and mobility restrictions.

- Several Nutrition Cluster members procured light PPE for their non-health staff who are involved in routine mid-upper arm circumference (MUAC) screening to ensure continuity of this activity, as it informs the nutrition situation and impact of COVID-19 on children and PLW. However, the procured quantities are insufficient due to funding constraints.
- The low proportions of people reached with services for treatment of SAM (61 percent), treatment of MAM (10 percent), prevention of acute and chronic malnutrition (41 percent) and micronutrient supplementation (19 percent) are indicative of limited funding, access constraints and supply shortages especially Ready-to-Use Supplementary Food (RUSF) for MAM prevention and treatment.
- A recent Nutrition Cluster gap analysis for MAM treatment services found that among the accessible sub-districts, four do not have MAM treatment services, 20 have mixed MAM treatment services provided by WFP and UNICEF as providers of last resort (POLR), one sub-district is supported by WFP, and five sub-districts are covered by UNICEF (POLR) MAM treatment services.
- A COVID-19 outbreak could potentially cause further deterioration of the nutrition situation during the second half of 2020, as result of dysfunctional markets, limited livelihood opportunities, inflation, low purchasing power, increasing food insecurity and disruption of access to health and WASH services.
- Limited implementation of an integrated approach which is crucial for addressing the underlying drivers of acute and chronic malnutrition.

## Protection

### Needs:

- In past months, large-scale civilian movements towards areas close to the frontline have been observed in Idleb governorate. Civilians returning to places from which they were displaced may face shortages of basic supplies and services, general insecurity, limited assistance, as well as damage to – or destruction of – homes.
- In the Afrin and A'zaz to Jarablus area of northern Aleppo governorate, civilians are reportedly being killed and injured as a result of increased sporadic fighting between and within armed groups and the indiscriminate use of arms between various non-state armed groups.
- Civilians in northwest Syria continue to face risks related to explosive hazards, such as improvised explosive devices (IEDs) and unexploded ordnances (UXOs). This is especially the case for individuals moving back to areas where active fighting occurred in January and February.
- Human rights violations and abuses reported increasingly include, but are not limited to, forced eviction of displaced persons from residential and commercial property.
- The significant weakening of the Syrian Pound is inducing a multitude of problems for civilians, including in relation to basic needs and accessing services. Reportedly, health services and medicine prices have risen significantly.
- The reporting period has been characterised by persisting child protection concerns, aggravated by the COVID-19 pandemic and related mitigation measures.
- Members of the gender-based violence (GBV) sub-cluster continue to report a significant increase in different types of GBV, mainly domestic violence (marital rape, physical and emotional violence, and denial of resources and services).
- Women and girls with disabilities as well as pregnant women are reported to be among the most at risk of domestic violence during this period. Partners continue to receive reports on the use of violence to force pregnant women to abort their pregnancies, similar to other reports shared since March.
- The prevalence of early/forced marriage was reported, incentivised by poverty and lack of livelihoods, price increases and disruption of access to education services. Additionally, several divorces are occurring due to poverty, quarantine measures and resulting psychosocial pressures.
- In some areas of Idleb, GBV sub-cluster partners are reporting families marrying off daughters repeatedly for short periods of time in exchange for money. This negative coping mechanism is accompanied with a complete absence of opportunities for secondary education and access to GBV services in these areas. Consequently, adolescent girls (aged 18 to 19 years) are left on their own with young children.
- Other risks and concerns reported were the lack of WASH services in several areas where people have set up their shelter, or the presence of shelters near landfills or incinerators of medical materials. Children and women are reported to frequent these landfills to search for reusable and sellable materials to generate income.

### Response:

- From 25 May to 7 June, four Protection Cluster members provided general protection emergency response services for civilians mainly displaced from Idleb and Aleppo. Organisations provided 7,303 protection interventions to displaced persons and affected host community members in 12 communities within six sub-districts in Idleb governorate reaching 4,738 individuals (1,436 girls, 349 boys, 2,771 women and 182 men). The main services provided were:

- Psychosocial Support (PSS) and Psychological First Aid (PFA);
- Psychosocial Support for Children;
- Dignity Kits distribution;
- Information sharing about other services;
- Risk Education.
- Protection Cluster members also referred individuals to other basic services and referred children to specialised child protection (CP) Services. The above emergency response activities are in addition to activities included in the Humanitarian Response Plan (HRP) and those reported through the 4Ws each month.

### GBV

- Members of the GBV Sub-Cluster continued providing services while taking into account safety procedures related to COVID-19. Despite the pandemic and mitigation measures, case management services including follow-ups, individual consultations, cash support, dignity kit distribution to women and girls, life skills sessions, recreational activities and trainings for specialised and non-specialised services are still ongoing. Since December 2019 GBV sub-cluster members distributed 69,551 dignity kits. Beneficiary feedback shows that the kits were critical for women and girls to respond to their increased need for personal hygiene products during the COVID-19 pandemic and reported satisfaction with measures taken by the GBV sub-cluster during distributions to mitigate against COVID-19 transmissions.

### Child Protection

- During the reporting period, 4,957 individuals (1,769 girls, 1,660 boys, 1,072 women and 465 men) were reached with child protection emergency interventions.
  - 2,264 caregivers and children (404 girls, 323 boys, 1,072 women and 465 men) were reached through awareness raising on child protection issues including prevention from separation in Harim district in Idlib governorate.
  - Structured activities in Child Friendly Spaces (CFS) were suspended by most child protection partners due to the COVID-19 pandemic. Other activities, such as Child Protection Case Management and Individual Protection Assistance (IPA) continued despite limitations in the referral system. Case management, including family tracing, continued in the reporting period. In high-to-medium-risk cases, child protection partners are continuing to conduct follow-up visits while taking the necessary COVID-19 precautions. Pending finalisation of May response data collection, at least 216 new child protection cases were registered (114 girls and 102 boys). Most cases were registered in the Idlib sub-districts of Dana (22 percent), Maaret Tamsrin (20 percent) and Idlib (11 percent).
  - 2,624 newly reached children (1,328 girls and 1,296 boys) were provided with psychosocial support (structured and sustained) and psychosocial first aid in Harim district.
  - 43 children (19 girls and 24 boys) were referred to specialised services in Harim district.

### **Gaps & Constraints:**

- Access to services for people who moved back to areas in the vicinity of the M4 and M5 highway in northwest Syria remains limited due to several factors, including heavy damage to civilian infrastructure in arrival areas and suspension or relocation of humanitarian services due to the unstable security situation.
- Despite limitations in an increasingly restrictive operational environment and the suspension of CFS, child protection partners have strived to continue delivering services while incorporating where possible COVID-19 prevention messages and messages on childcare in times of isolation and unpredictability. Child protection partners have continued to adapt key core interventions, such as PSS, case management and child protection awareness raising.
- Although GBV prevention and response activities continue to be provided, safety measures related to COVID-19 have reduced access to services to a smaller number of beneficiaries (usage of online sessions, fewer beneficiaries per session), which is affecting the ability to report incidents of violence to which women and girls may be exposed, as well as reducing entry points to obtain the necessary services.
- Activities that continued with COVID-19 countermeasures included specialised services such as case management for high-risk and individual cases and referrals for child protection, GBV and mine action, individual protection assistance and physical rehabilitation. Where feasible, some PSS, and legal awareness and counselling on housing, land and property (HLP) and civil documentation have also continued (in centres, via outreach, and in camps).

### **Shelter**

#### **Needs:**

- According to the assessment of an NGO partner, the rapid onset of the recent escalation of hostilities in northwest Syria further diminished displaced persons' access to sustainable shelter solutions. Over 990,000 displaced people

are reported to have turned to camps for shelter, while nearly 1.5 million displaced people have sought shelter in residential urban areas. The current context of the global COVID-19 pandemic poses additional risks for people displaced in northwest Syria, particularly for those residing in collective shelters.

- According to the same UN partner, 44 percent of displaced people use tents as shelter, some nine percent stay in substandard shelter (most of which are unfinished buildings), and three percent of displaced people have resorted to public buildings such as schools as their only shelter option, thereby disrupting the provision of public services.
- The SNFI Cluster and an NGO partner conducted an assessment on the collective shelter situation in northwest Syria. According to the findings, none of the assessed collective shelters assessed to date achieve the minimum emergency standards across all relevant sectors, and few collective shelters provide suitable shelter solutions for inhabitants. The most prevalent issues were overcrowding and WASH. Profiles of the assessed collective shelters were developed and partners encouraged to conduct their own assessment before intervening. Notably, some partner organisations already planned shelter rehabilitations. A new round of data collection commenced in June for collective shelters not identified in the first round, including in Aghtrin, Badama, Harim, Jandairis, Maaret Tamsrin and Qourqeena sub-districts.
- According to the recent collective centre assessment, 16,428 displaced people were forcibly evicted from 12 collective shelters to camps or tents. Up to 7,549 displaced people living in two collective shelters decided to leave the centres in order to search for better access to humanitarian assistance. 17 collective shelters are at risk of eviction, potentially impacting 651 households (3,332 displaced people). Reasons for eviction include returning buildings to their pre-conflict use, as in the case of 13 collective shelters. Evictions severely impact the most vulnerable, particularly as shelter is even more vital given the ongoing pandemic – in this case, the evictions affect over 130 pregnant and lactating women, 100 women and men with disabilities and 557 female-headed households.

#### Response:

- SNFI Cluster members continue to actively respond to the needs of the recently displaced population and people in protracted displacement, and are working with the CCCM Cluster to identify more land for extending the perimeter of existing camps. In April, some 247,000 individuals from displaced and host communities were assisted with NFI and/or shelter; over 135,000 individuals received NFI kits containing kitchen sets, mattresses and blankets, as well as winter items. Shelter needs of some 110,000 people were addressed with activities including emergency and seasonal shelter assistance and shelter rehabilitation. Of these, over 57,000 individuals were assisted with the provision of emergency shelter, including family tents or shelter kits. Since the start of 2020, 538,031 people were reached with infrastructure rehabilitation, emergency shelter, shelter rehabilitation, transitional shelters and seasonal assistance. Over the same period, 861,904 people were reached with seasonal/supplementary NFI assistance and core NFI distributions.
- The SNFI Cluster is actively coordinating with the Health and WASH Clusters to respond to the needs of the displaced population in the context of the COVID-19 pandemic. The SNFI Cluster is working to mitigate the spread of COVID-19 during distributions, to improve the conditions of inadequate shelters and decongest overcrowded collective shelters. As part of the COVID-19 preparedness and response plan for northwest Syria and in collaboration with SNFI Cluster members, 316 tents were provided to be used as triage stations at health facilities in northwest Syria. The SNFI Cluster has also developed and widely shared its recommendations to mitigate the risks related to the COVID-19 outbreak for shelter and NFI activities. The recommendations have been updated and translated into Arabic.
- Based on findings of the assessment conducted by the SNFI Cluster and an NGO partner, the SNFI cluster encourages its members to consider the following plans when designing programmes: decongesting overcrowded shelters through the provision of emergency shelters or installation of partitions, improving/repairing sanitation services, and improving the capacity of existing collective shelters to store sufficient drinking, cooking and bathing water.
- From 2 to 4 June, the SNFI Cluster in coordination with the SCHF and the elected Cluster Review Committee (CRC) reviewed 31 proposals submitted to the SCHF First Standard Allocation of 2020 with an SNFI envelope of US\$ 18 million. All recommended projects are aligned with the allocation strategy, are in line with SNFI priorities and contribute to cover shelter and NFI needs, including the winterisation approach.
- SNFI continues to provide technical support on site planning, focusing mainly on SCHF approved projects that include site establishment and expansion. The cluster has closely collaborated with organisations to review plans and share recommendations, before proceeding with modifications and recommending releasing tents from the contingency stock. A site planning support group has been set up to assist Cluster members designing new IDP settlements and settlement expansion. Two experienced site planners are available to help Cluster members with site selection, design, complying to Sphere standards, software, etc. The Cluster is also supporting site planning trainings, coaching and additional short training sessions. Training topics have focused on introduction to emergency settlements, person-centred planning, introduction to site assessment and site selection, introduction to software used in site planning, introduction to Standards & WASH, budgeting and timeframe, and housing, land and property (HLP).

#### Gaps & Constraints:

- Difficulties finding a place to rent. Whilst the availability of houses and apartments for rent has improved over the past month, displaced persons reported that the spike in the market has meant that many cannot afford rent. For instance, the average rent in Dana sub-district stood at US\$ 125 per month, with most property owners requesting two or three months' rent in advance. Large deposits are also being demanded by landlords. As a result, many displaced persons are forced to rent cheaper sub-standard and unfinished buildings, or to share one apartment among several families. Landlords have introduced clauses into lease agreements prohibiting tenants from accommodating additional people, and threatening eviction for breaches.
- More funding is required to expand shelters for vulnerable groups.
- Shelter inadequacies require significant capacity and budget to address, particularly in collective shelters. The volatile security situation and shrinking operational areas mean that thousands of families continue to seek safe and adequate shelters in northwest Syria.
- Displaced persons may inadvertently be evicted as a consequence of efforts to scale up humanitarian response to the increasing needs of people displaced in northwest Syria. Humanitarian organisations renting new premises may distort the market as they are able to pay more than displaced persons. Reducing the risk of harm for affected populations is a protection component of humanitarian response, and improved attention is needed in this regard, including due diligence before renting property to ensure that no one is evicted as a result and that prices are in line with the market.
- COVID-19 created additional burdens on Cluster members in order to mitigate the risk of transmission. Application of appropriate risk mitigation measures requires additional time, staff, effort and cost.

## Water, Sanitation and Hygiene

### Needs:

- Continued high needs with regards to life-saving WASH supplies and services for people in northwest Syria. Comprehensive WASH services are needed across all WASH services and supplies, including hygiene kits, jerry cans and water storage capacity.
- In both formal and informal camps, there is vital need to increase safe water supply to mitigate against diarrheal and other communicable diseases, including COVID-19.
- There is a need to increase the operational support to existing piped water systems to handle additional population in communities and in surrounding informal/formal settlements and camps.
- WASH support is needed for the people displaced from the Kafr Nobol and Ehsem sub-districts over the past week, including the surge of displacement from this area since 8 June due to escalations in hostilities.
- The increased demand due to the increased presence of displaced people in communities is reducing the access of host communities to adequate safe water, leading to conflict between displaced and host communities. Increased operational support and system rehabilitation is needed to reduce the risk of conflict.

### Response:

- The ongoing WASH response has reached 1.3 million recently displaced people in 1,125 locations through 29 Cluster members. 80 percent of the locations responded to are camps, 15 percent are communities, 2 percent are collective centres and 3 percent are other locations.
  - 500,069 people received and continue to receive water via water trucking;
  - 604,323 people received solid waste management services;
  - 248,963 people received new latrines (most of the existing public/community latrines are overcrowded due to an inadequate number of latrines);
  - 512,755 people benefited from hygiene kits (102,551 family hygiene kits intended for five people per kit);
  - 363,276 people benefited from water purifying agents (Aqua tablets);
  - 456,740 people benefited from the distribution of jerry cans (91,348 jerry cans distributed, two 10 litre jerry cans per household).
- Cluster members are continuing to scale up the response for the nearly 1 million people displaced since December 2019, including COVID-19 mitigation activities.
  - 69,184 people are expected to receive water trucking, based on Cluster members' plans for displaced people;
  - 88,405 people are expected to receive solid waste management services, especially in locations with large populations of displaced people. This will benefit both displaced and host communities (50 percent host community, 50 percent IDPs);
  - 54,568 people will benefit from new latrines currently under construction;
  - 163,600 people will benefit from the available hygiene kits (32,720 actual family hygiene kits);
  - 125,784 people will benefit from available jerry cans (25,156 jerry cans available, each household usually receives two 10 litre jerry cans).

- The SCHF First Standard Allocation was launched and aims to have funds by end-June. The WASH strategy for this allocation is to select more sustainable projects for the protracted crisis, including incorporating established COVID-19 mitigation activities. The WASH envelope is US\$ 9 million. The WASH Strategic Review Committee has recommended 15 projects to date, with technical reviews expected to be completed by 19 June.

#### COVID 19 Response:

- According to updates from 24 WASH partners in 10 locations to the WASH COVID-19 reporting matrix, 89 percent have changed their response due to COVID-19, 80 percent have increased the amount of water supplied, 83 percent have adapted hygiene promoted activities, 59 percent have increased the amount of soap distributed, and 15 percent have increased the amount of laundry detergent distributed.
- Collaboration between the WASH and FSL Cluster lead agencies continues with actual/planned distribution of 720,000 food parcels in northwest Syria from April to June. This includes adding bar soap(s) to 720,000 food parcels and pasting stickers with COVID-19 prevention measures on 420,000 of them.
- The WASH Cluster lead agency will purchase 1,056,000 soap bars over the next six months, to be delivered to the Corona Awareness Team (CAT) through a WASH partner. Activities related to this batch of soap will be implemented on the ground by a group of 1,600 Community Health Workers (CHW).

#### **Gaps & Constraints:**

- The WASH cluster is working with CCCM and Shelter clusters to ensure joint planning and installation of new camps with requisite WASH services. The immediate gaps in 19 sub-districts for some 143,000 displaced people are as follows:
  - 142,897 displaced people lack water trucking (many more displaced people share existing water supply of host communities and other displaced people);
  - 137,584 people need public latrines rehabilitation or construction;
  - 142,307 people need recurrent solid waste management;
  - 171,520 people need hygiene kits.
- Challenges with regards to transshipments due to COVID-19 have not yet materialised apart from slight delays due to mitigation measures. The latest increase in hostilities has not thus far impacted transshipments.
- The collapse of the Syrian Pound is resulting in vendors and contractors suspending activities, notably with existing water trucking contracts becoming nonviable.

## Logistics

#### **Needs:**

- Organisations responding to the needs of the affected population in northwest Syria require a reliable and consistent transshipment service that facilitates the delivery of life-saving cargo from Turkey into the region.
- To manage the threat of COVID-19, coordination and timely information sharing with partners will be critical to assist with partner operational decision-making and to ensure bottlenecks and the duplication of efforts are avoided.
- Ensuring the safety and health of the staff working at the transshipment points by following WHO guidelines on mitigating COVID-19 risks at transshipment points.

#### **Response:**

- Between 1 and 10 June, the Logistics Cluster coordinated the transshipment of 810 Syrian trucks: 641 through Bab Al-Hawa and 169 through Bab Al-Salam, facilitating the delivery of 18,564 metric tonnes of Food Security, Shelter, WASH, Nutrition, Health and Education sector items. 1,781 trucks were crossed in May.
- On 28 May, the Logistics Cluster held an ad-hoc meeting with all UN agencies operating cross-border to discuss the issue of truck insurance for Syrian trucks on Turkish roads, and to agree on a shared solution. To date, 88 percent of all UN agency Syrian trucks required for transshipment operations are insured on Turkish roads; the remainder are targeted to be insured by 15 June. The Logistics Cluster undertook a test run of the new procedures in direct liaison with border authorities on 8 June.
- The Logistics Cluster is monitoring customs regulations, with particular focus on COVID-19 related items and sharing lists of prohibited and restricted items for import on a bi-monthly basis.
- In accordance with WHO guidelines and local health authorities, the Logistics Cluster has enacted measures at the transshipment hubs to mitigate the risks of COVID-19 to teams on the ground, including new handwashing facilities for drivers and workers, promoting physical distancing, raising awareness through visibility items and a staff rotation

system. The Logistics Cluster has delivered workshops to external partners on safe use and disposal of PPE and how to keep safe and protected against COVID-19 at the transshipment hubs.

**Constraints:**

- Potential future increased lead time for in-transit goods and uncertainty over the availability of medical supplies at local and international markets due to COVID-19.

## GENERAL COORDINATION

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On 4 June, the Humanitarian Liaison Group held its regular monthly meeting to discuss the strategic aspects of the humanitarian response in northwest Syria. The Emergency Task Force continues to meet on a fortnightly basis, focused on the preparedness and response efforts to COVID-19 as well as the wider humanitarian response across sectors. The Inter-Cluster Coordination Group had its regular monthly meeting on 10 June, focusing on the operational aspects of the humanitarian response.

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