HUMANITARIAN SITUATION

Nearly 6.8 million people have been affected by the crisis in Syria, of which 25 percent are women and girls of reproductive (child-bearing) age. A total of at least 1.9 million refugees have fled across Syria’s borders into neighboring countries seeking protection, medical care and other urgently-needed aid (1.7 registered refugees and 205,721 refugees awaiting registration); 78 percent of the refugees are women and children and 25 percent are women and girls of reproductive age. 79 percent of the Syrian refugees, live outside of camps in urban and rural areas amongst host communities while 22 percent are in seven, often overcrowded, camps in Turkey, Jordan, and Iraq. UNFPA and partners are scaling up efforts to achieve universal access to sexual and reproductive health (including family planning), to promote reproductive rights, to reduce maternal mortality and improve the lives of youths and women by advocating for human rights and gender equality and by promoting the understanding of population dynamics.

SYRIAN ARAB REPUBLIC

Due to the escalating conflict, protection for civilians accessing health care, including comprehensive reproductive health services remained an issue of concern in most areas, particularly in Waer and Khalidia districts in Homs governorate. Most women leave the hospital immediately after delivery and the number of women who opt for caesarean sections is far higher than international norms.

Around one million women and girls of reproductive age, of which 40,000 are pregnant women, are internally displaced within Syria staying with host families and communities. There has been an increasing pattern of internal movement observed recently from areas of armed conflict in rural areas of Aleppo, Homs and Damascus towards the cities within the same governorates due to the violence and internal conflict.

The economic conditions of internal displaced persons (IDPs) have been severely affected following the two and half years of the on-going conflict and the deterioration of the value of the Syrian pound, which has led to severe price hikes in staple commodities including medicines and the cost of health services. UNFPA is concerned about women’s ability to afford the costs of reproductive health services including emergency obstetric care services, contraceptives procured from private sector, and the cost of transportation to the health facilities which often must traverse unsafe areas.

JORDAN

A total of 516,990 Syrian refugees (52 percent female and 48 percent male) have been registered or are awaiting registration with UNHCR, the majority age a between 18-35 and 5-11. The last month has seen a marked decrease in the number of arrivals due to the increased number of spontaneous returns from Zaatari, registrations in urban locations and a decreased number of new arrivals. (Source: UNHCR, 15 July 2013)

One year has passed since Zaatari camp opened in Jordan in response to the inflow of refugees from the Syrian crisis. Now, it is home to some 120,000 Syrians and has become Jordan’s fourth largest city with four UNFPA women’ centres, two delivery rooms run by UNFPA, and four women and youth spaces. Humanitarian partners are preparing for the opening of Azraq camp, near Zarqa city, in early September with initial capacity to host 50,000 people and a potential capacity to host up to 130,000 people.
LEBANON

The number of refugees currently receiving assistance through UNHCR and partners is 668,000 Syrian refugees in Lebanon, of which over 576,000 are registered and 131,000 are awaiting registration. The current distribution of the registered population is as follows: North Lebanon: 194,000 (33%); Bekaa: 197,000 (34%); Beirut and Mount Lebanon: 111,000 (18%), South Lebanon: 74,000 (13%).

The volatile security situation in North Lebanon and the Bekaa region, mainly in the Hermel district, has continued to limit humanitarian access to some locations as well as hindering the assessment process and the implementation of assistance.

The Government recently announced that it would impose stricter controls at the border, while ensuring that refugees in need of protection would be permitted entry. Specifically, it has indicated that it will enforce pre-existing requirements more strictly. While the border remains open to refugees, the authorities are exercising more caution in checking documents at the border and are denying access to people without valid passports or ID cards or whose ID cards and passports are damaged and are unable to establish identity. The authorities have indicated that persons will not be permitted entry if their identities are in doubt and/or if the authorities have reason to believe they are not coming for humanitarian reasons. This means that those arriving only with a civil registry document are not permitted to cross unless they are under 14 years of age.

Efforts continue to merge the regional response plan (RRP-5) with the assistance plan of the Government of Lebanon. The Government held another donor meeting on 18 July to seek additional funding in response to the government plan.

TURKEY

A total of 201,067 Syrians refugees are currently hosted through a temporary admission centre to the 15 tented sites in Hatay, Sanliurfa, Gaziantep, Kahramanmaras, Osmaniye, Mardin, Adana and Adiyaman provinces, and at five container sites in Malatya, Sanliurfa, Gaziantep and two in Kilis. During the reporting period, 397 refugees have been admitted to the hospitals along with their 130 companions.

The Prime Ministry’s Disaster and Emergency Management Presidency (AFAD) reported that since the beginning of the crisis, almost 1.3 million consultations were provided to Syrian refugees in the field hospitals in the camps, more than 225,000 referrals to hospitals, of which about 30,000 cases were hospitalized in the state hospitals. Reportedly some 24,000 medical surgeries were conducted and 4,883 newborns in Turkey were recorded. (AFAD: 22 July 2013)

IRAQ

A total of 160,000 Syrian refugees (35.5 percent female and 63.5 percent male) have been registered or are awaiting registration with UNHCR, the majority age being between 18-35. During the period 15-22 August, Kurdistan region witnessed a sudden influx of Syrian refugees, in which 44,000 Syrian refugees crossed the border in less than one week and are awaiting registration.

AT A GLANCE:

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<tr>
<th>Location</th>
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HUMANITARIAN RESPONSE (15 July - 15 August 2013)

SEXUAL AND REPRODUCTIVE HEALTH, INCLUDING FAMILY PLANNING

SYRIAN ARAB REPUBLIC:

18,600 women received reproductive health services, including emergency obstetric care, in Damascus, and Aleppo through the Syrian Family Planning Association, the Syrian Arab Red Crescent and maternal hospitals. In addition, 800 women received life-saving reproductive health services in Damascus, Rural Damascus, and Hama through mobile teams supported by UNFPA.

342,000 intravenous fluids were delivered to Damascus Hospital, the main hospital of the Ministry of Health in Damascus serving the vulnerable internally displaced persons (IDPs).

UNFPA has expanded its “reproductive health voucher” scheme to cover hospitals in Waer. The expansion enables women in Waer to receive safe delivery services, including emergency obstetric care, free of charge. During the reporting period, five women have benefited and had a caesarean-sections free of charge and 1,800 women received reproductive health services in UNFPA clinics.

The UNFPA office in Syria has started the process of conducting studies and operational research in support of monitoring the effectiveness and efficiency of the humanitarian response programme in the affected governorates.

JORDAN

Reproductive health awareness: UNFPA in collaboration with the Jordan Health Aid Society (JHAS) has organized an awareness-rais- ing activity for 24 women at the UN Women site about breast cancer and self-examination. Most of the other awareness sessions have been postponed until the Eftar Eid holiday.

Reproductive health services: During the one-month period, 2,322 women received UNFPA-supported reproductive health services. Of these women, 1,081 women were younger than 24 and 1,154 women were 24 years old and above. A total of 651 women received ante-natal services through UNFPA-supported clinics, 24 women received post-natal care services, 730 women attended clinics for family planning purposes and an additional 570 women had sought cures for infections.
Eight babies were born in the UNFPA clinic in Za’atri Women’s Centre “3”, which has been established to temporarily manage deliveries for non-urgent cases and 17 cases were referred to hospitals in and outside the camp.

New reproductive health clinic: UNFPA in partnership with the International Medical Corps (IMC) is in the process of establishing a unit in Azraq camp that is planned to open in September to provide refugees with essential reproductive health and gender-based violence services.

UNFPA is also in process of opening a new women’s comprehensive site in Za’atri “4”, that is planned to include reproductive health and gender-based violence services.

LEBANON

Provision of rape treatment kits and sensitization on sexual violence: Eight health facilities in Bekaa received the contents of reproductive health kit #3 (rape treatment). The distribution was followed by a meeting where medical staff from each health facility was sensitized on sexual violence, its consequences and treatment. UNFPA provided reproductive health kit #4 (oral injectable contraception) and reproductive health kit #5 for syndromic diagnosis and treatment of sexually transmitted infections (STI) to Humedica, an international NGO providing medical services in Bekaa through a mobile medical unit targeting Syrian displaced persons residing in 35 tented settlements in Zahle and West Bekaa. The kits will support the recipient NGO in the implementation of additional reproductive health services within their mobile medical units including family planning services and counseling as treatment of STI.

Provision of clinical management of rape treatment to a survivor in Beirut: UNFPA in coordination with UNHCR assisted in providing clinical management of rape services to one survivor from the Syrian displaced community in Beirut, where no health facilities are yet designated to treat survivors. UNFPA provided the rape treatment kit that was given to the survivor in a private clinic.

Replacement of expired medicine: two health facilities in the Bekaa received replacement of expired medicines for reproductive health kit #3 distributed in December 2012. One CMR referral hospital in the North (Haykal hospital) received replacement of expired medicines for reproductive health kit #3 distributed in March 2013.

Provision of information material: UNFPA and the Ministry of Public Health delivered treatments for STI and follow-up posters to UNRWA clinics. This was requested by participants during the last two minimum initial service package (MISP) trainings conducted in May 2013 and targeting medical staff from UNRWA clinics.

TURKEY

Procurement: UNFPA delivered ten dish washing units for the newly opened camp in Sanliurfa-Viransehir. In a response to the request made by the Prime Ministry’s Disaster and Emergency Management Presidency (AFAD) in early July to provide the camp with emergency hygiene equipment.

A total of 21,084 hygiene kits have been distributed to the directorates of health in Adiyaman, Adana, Kahramanmaras, Mardin, Malatya, Kilis, Gaziantep provinces through the Turkish Red Crescent Society under the coordination of AFAD.

IRAQ

Reproductive health clinic services in Domiz camp: During the reporting period, a total of 1,322 women received reproductive health services, 1,116 pregnant women received health care services including ante-natal services and 127 women had sought cures for infections. Eight women delivered babies successfully in the reproductive health clinic in Domiz camp and 28 were referred to Duhok hospitals.

GENDER EQUALITY AND WOMEN’S EMPOWERMENT

SYRIAN ARAB REPUBLIC:

Psychosocial support services: During the reporting period, 2,800 women received psychosocial support services and psychosocial first aid (PSS/PFA) in Damascus and Rural Damascus through Syrian Family Planning Association (SFPA) and Syrian Arab Red Crescent (SARC) clinics and mobile teams.

UNFPA delivered 3,600, 5,300, and 1,000 dignity kits to the affected people in Idlib, Deir ez-Zor, and Damascus, respectively. Twenty service providers working in UNFPA, assisted SFPA clinics completed capacity-building sessions on case management of gender-based violence.

The Ministry of Social Affairs with the full technical support of UNFPA will start a new initiative to survey 25 IDPs shelters in Damascus in order to enhance the quality of data collected on domestic violence and other forms of gender-based violence.

JORDAN

Gender-based violence awareness

With UNFPA support, 2,588 women and men benefited from 666 sessions in Maan and Zarqa governorates in Jordan including recreational activities (38), awareness-raising activities (20), reproductive health individual counseling sessions (168), reproductive health group counseling sessions (8) individual psychosocial support sessions (156), group psychosocial support (7), vocational training courses (12) and others. The number covers 1,041 women and 184 men 24 years old and above, 948 women and 191 men under the age of 24 and 340 girls and 100 boys under the age of 18.

The activities took place at the UNFPA/institute for Family Health (IFH) women and girls centres in Cyber City, King Abdullah Park, and Za’atari camp as well as communities and in sites in Maan and Zarqa.

Gender-based violence training

Nine non-protection service providers participated in training courses on the basic concepts of gender-based violence and referral pathways organized by the International Rescue Committee (IRC) in collaboration with the UNFPA in Za’atari as part of the joint gender-based violence prevention project.

Strengthening the capacity of the staff at the Women’s Social Centre in Domiz Camp on “First Response” – on-the-job training for Syrian volunteers in Domiz Camp, 15-17 July, 2013.
LEBANON

UNFPA lays grounds for outreach gender-based violence prevention and response campaign with focus on basic life-skills, problem solving and psychological first aid targeting women: Preparations are under way for the first training of social workers on the provision of trainings on basic life skills, problem solving and psychological first aid, planned for 19 August in collaboration with Institute for Women’s Studies in the Arab World at the Lebanese American University.

Mental health with focus on gender: A total of 29 sessions were conducted in five areas, reaching a total of 127 women. Focus group discussions addressed several issues i.e. the well-being of Syrian refugee families-mainly women and youth-in Lebanon, notably difficulties faced during displacement (shelter, settlement, food aid, sanitation, health services, non-food items), understanding gender-based violence and specific forms of violence faced by women refugees; sexual harassment; pregnancy issues and depression; children’s security; early marriage, etc. Field visits were conducted by UNFPA to monitor the implementation of the focus group discussions; suggestions for measures to improve their quality were discussed with IDRAAC to be taken into consideration. By August 15, a total of 114 focus group sessions were held and a total of 496 women reached.

UNFPA supports the Strategic Gender-Based Violence Task Force rollout of the Gender Based Violence Standards of Operation and the referral pathway information across Lebanon starting with Bekaa to be followed by the North, South and Mount Lebanon. The dissemination process will take place at different levels. UNFPA, in partnership with Heartland Alliance (HA), carried out the following during the reporting period:

- The gender-based violence standard operations procedures (SOPs) dissemination process started on July 17 for the Bekaa area with a workshop for the non-specialized service providers in Baalbek. The workshop hosted 25 persons from 15 different local and international humanitarian service providers. It aimed at introducing gender-based violence basics as well as the referral pathway for Baalbeck hub and other topics focused on an overview of gender-based violence and guiding principles, vulnerabilities and gender-based violence, psychological first aid, clinical management of rape, and the referral pathway. Other agencies participated in the workshops such as the Danish Refugee Council, Handicap International, International Medical Corps and UNHCR as well UNFPA and Heartland Alliance.

- On 12 August, UNFPA facilitated the gender-based violence standard operational procedures (SOPs) validation workshop in Tripoli with the presence of the main actors involved in the referral pathway for the North (UNHCR, Danish Refugee Council, the Lebanese Council to Resist Violence against Woman, Caritas, International Relief and Development). Participants were introduced to the basic outline and content of the SOPs. The referral pathway for Tripoli was also validated and a plan developed for the next steps of the SOP dissemination.

- On 13-14 August UNFPA in collaboration with Heartland Alliance (HA) supported a two-day ToT workshop in Bekaa aiming at a training 25 humanitarian actors on the SOPs and the referral pathway for the Bekaa area who will then carry out further dissemination sessions for local authorities and refugee communities.

IRAQ

Gender based violence services: UNFPA provided first response and listening services to 20 women survivors of violence against women in Domiz camp; eight cases were referred to International Red Cross, Médecins Sans Frontières and the local NGO Haricar for further services such as case management, mental health counseling and legal support.

Gender-based violence training: Twenty one volunteers (women and girls of reproductive age) in Domiz camp received on the job training on gender-based violence and family planning.

UNFPA is in the process of contracting a technical adviser on GBV to provide technical support to gender-based violence prevention and response program interventions in the Kurdistan region with special focus on refugees.

Turkey

Needs assessment: UNFPA carried out a needs assessment in Sanliurfa-Harran and the Container Camp on 30-31 July 2013 in collaboration with AFAD, the Ministries of Finance and Health, civil society participants and a Harran University psychiatrist. The main findings of the assessment shed light on the importance of increasing the capacity of service providers on gender-based violence and reproductive health and of enhancing the quality of reproductive health services, including family planning and maternal care.

Gender-based violence training: Twenty three AFAD camp managers professionals in Gaziantep-Nizip-1 Camp participated in a two day meeting with the subject “Helping the Helpers Training” organized by UNFPA on 1-2 August 2013. The training focused on the provisional of psychosocial support with particular reference on gender-based violence.
**SUPPORTING ADOLESCENTS AND YOUTH**

**SYRIAN ARAB REPUBLIC**

Twenty-two youth health volunteers working in mobile health teams in Damascus, Rural Damascus and Homs were trained on such reproductive health topics as emergency obstetric care and gender-based violence preventive measures using Y-PEER techniques.

**LEBANON**

**Kicking off a series of interventions targeting youth** affected by the Syrian crisis for healthier and more active youth during the reporting period, UNFPA undertook the following:

- Consultant in charge of Y-PEER education training was recruited and preparations for scheduled trainings are underway.
- Preparations were made for awareness sessions for mothers on parenting strategies including the development of material and preparation for refresher sessions addressing social workers; the sessions are planned for the end of August.
- A partnership with Save the Children International was established for a training of trainers addressing service providers (notably the core group of minimum initial service package (MISP) trainers in addition to newly recruited trainers) on the adolescent sexual reproductive health (ASRH) toolkit for humanitarian settings; the training is planned for 26 August.

A total of three out of eight focus group discussion were conducted with the objective of prioritizing topics to be addressed in youth peer education, service provider trainings and youth-friendly services, one session held on July 24 with 12 Palestinian refugees from Syria aged 15-24 years, residing in various Palestinian refugee camps in Lebanon. Two sessions took place on August 14 (one with 13 Syrian refugees youth aged 15-18 years and another for 10 Syrian refugees youth aged 19-24 years).

**IRAQ**

**Establishment of a youth safe space in Domiz camp, “Sardam Youth Center”**: UNFPA established a youth safe space in Domiz camp and six youth volunteers, three males and three females, have been identified to run the activities in the space on a daily basis.

**Kicking off of a project targeting youth** affected by Syrian crisis for healthier and more active youth: UNFPA organized a peer education training course for forty youth both male and female aged 17–25 in Domiz camp; covering gender-based violence, addiction, early marriage, sexual and reproductive health and HIV as well as basic life skills and facilitation skills. The main objective of the course was to raise the awareness of the youth and to promote the concept of volunteerism.

**COORDINATION AND CAPACITY BUILDING**

**SYRIAN ARAB REPUBLIC**

The UNFPA country office conducted a mission to Salamieh district in Hama Governorate to assess the reproductive health services in the district and explore the possibility of implementing a reproductive health service delivery programme with local partners, including the provision of reproductive equipment, medicines, supplies and dignity kits.

**JORDAN**

**Princess Mary of Denmark’s visit to Za’atri camp**: Princess Mary of Denmark, patron of the UNFPA, visited UNFPA’s safe women comprehensive centre in Za’atri 3 and was briefed on the services provided to Syrian women and children. She also visited the Jordan Humanitarian Aid Society’s UNFPA-supported women’s clinics, where she was briefed on the health and counseling services provided by JHAS staff and attended part of a session given to Syrian women on family planning.

Denmark is working to support not only the refugees in the camps, but also the local community in Jordan, who are under significant pressure and are trying to cope with the influx of refugees.

**LEBANON**

On July 29 UNFPA chaired the reproductive health strategic working group meeting with the participation of 18 persons representing 14 local and international NGOs and agencies. Participants were briefed on Ministry of Social Affair services to displaced Syrians, updated on clinical management of rape training and the supply of kits, the minimum reproductive health package for pregnant women, and youth reproductive health interventions.

UNFPA took part in the health coordination meetings as follows:
- On July 25 in Bekaa, some NGOs including Medecins sans Frontieres (MSF) informed the group that some cases of complications of abortion and request of abortion were reported in their supported clinics. It was suggested that agencies share additional data on these cases. UNFPA shared with participants updates on the provision of rape treatment to health facilities, reproductive health updates, distribution of reproductive health kits and planned youth reproductive health interventions.
- On July 31 in Beirut: WHO shared with participants the minimum reproductive health package for pregnant women as per the national reproductive health protocol. WHO suggested launching training on safe abortion and to start awareness raising on this topic.
On August 6 UNFPA attended the Protection Steering Committee meeting where a short presentation on the ongoing youth assessment was provided to the members of the steering committee. Members were briefed about the objectives and methodology of the assessment which is a collaborative work between UNFPA, UNICEF, Save the Children International, and UNESCO.

TURKEY

UNFPA participated in a meeting with the Minister of Family and Social Policies on 30 July 2013 where Woman’s Status General Directorate (WSGD) team presented the team and the UNFPA gender-based violence programme.

IRAQ

UNFPA attended the strategic group for gender-based violence as co-chair for the group. During the meeting there was an update on all activities, harmonization of key messages and the coordination with the General Directorate for Combating VAW as a governmental body to coordinate the work on GBV service provision to Syrian women and girls in Domiz camp and on camp refugees.

A consultancy meeting between UNFPA and reproductive health programme officers was held with the Duhok directorate of health focal point for humanitarian activities to review the plan for the next quarter and to meet the requirements of the Syrian refugees in the camp, including a campaign to raise awareness on reproductive health among Syrian refugees.

CHALLENGES

In Syria: As stocks in the public sector are depleted, UNFPA is concerned about the increasing cost of service provision and securing goods for public health facilities. It is necessary to maintain both public health and alternate services in order to address the expected vulnerability to reproductive morbidity and mortality of women and girls disadvantaged by the crisis.

In Lebanon: The immense and growing strain on Lebanese host communities in the North, Bekaa and the South is contributing to rising tensions between host communities and refugees. The growing risk of violence demands mainstreaming of conflict prevention approaches across all sectors, as well as targeted interventions to strengthen community capacity to prevent and manage conflict.

In Jordan: the lack of security in certain parts of Zaatari camp impedes refugees’ access to services.

In Turkey: the Provincial Director of Family and Social Policies in Gaziantep highlighted the importance of increasing the capacity of social workers and the social services institutions in the provinces on reproductive health and gender-based violence issues.

FUNDING UPDATES

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<th>Lebanon</th>
<th>Syria</th>
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CONTACT INFORMATION
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RELEVANT RESOURCES
www.unfpa.org
www.ocha.org
www.unhcr.org
http://syria.humanitarianresponse.info