HIGHLIGHTS

- 59 people tested positive for COVID-19 in northwest Syria as of 20 August. Response efforts focus on contact tracing, containing the spread of the virus and raising awareness about COVID-19 risks and precautions.
- Increasing hostilities continue to be reported in the Idleb area and northern Aleppo, especially in locations south of the M4 highway. Explosive hazards and tensions between armed groups further undermine the security situation and imperil civilians’ lives.
- COVID-19 and economic deterioration compound existing humanitarian needs across all sectors in all parts of northwest Syria.

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SITUATION OVERVIEW

The fragile humanitarian situation of the 4.1 million people living in northwest Syria continues to be exacerbated by the impacts of the ongoing COVID-19 outbreak, volatile economic situation, insecurity and explosive hazards. After nearly a decade of conflict marked by violence, military operations, multiple displacements and economic shocks across northwest Syria, 2.8 million people rely on humanitarian assistance to meet their basic needs including shelter, health, food and water.

Of the 4,845 tests carried as of 21 August, 59 people have tested positive for COVID-19 in northwest Syria. 46 patients have reportedly recovered – eight in Idleb and 14 in Idlib governorate, and 15 in Al Bab, one in Jarablus one in Afrin and seven in A’zaz districts in northern Aleppo governorate. Preliminary reports are being verified of one death due to COVID-19 in northwest Syria on 20 August. There are 13 active COVID-19 cases in the Idleb area and northern Aleppo governorate. Most of the patients identified presented with mild symptoms, while others were asymptomatic. As of 21 August, seven isolation hospitals were active in northwest Syria and three new treatment centres (called COVID-19 Community Treatment Centres, or CTCs) in Atareb, Daret Azza and Atmeh became operational, bringing the total number of active CTCs to eight. Efforts remain concentrated on contact tracing, interrupting virus transmissions and reducing secondary infections. Health partners continue to raise awareness about COVID-19 precautions among local communities and other stakeholders, emphasising practices to prevent transmissions including hygiene practices, self-isolation and physical distancing. Further transmission risk mitigation measures implemented since the identification of the first case on 9 July include limits on movements, markets, gatherings and commercial activities. In terms of humanitarian assistance,
precautions enacted by humanitarian actors prior to the identification of COVID-19 cases in northwest Syria continue to be implemented and strengthened, to safeguard both staff and local communities. Work is ongoing to intensify interventions to strengthen infection prevention and control at health facilities as means to protect healthcare workers and prevent transmission from healthcare service delivery points, which is of high priority.

Increased levels of military hostilities were observed in northwest Syria, particularly in the vicinity of frontlines in the Idlib area and in areas south of the M4 highway, with more frequent shelling reported since early July. On 18 August, several airstrikes were reported near Sheikh Bahr and Haranbush towns in Idlib governorate. While no injuries to civilians have been reported as a result of these airstrikes, several IDP settlements situated in proximity of the locations were impacted near Haranbush town. In addition to these hostilities, tensions involving non-state armed groups continue to be reported, further undermining the security situation. Concerns about the safety of civilians and humanitarian operations are deepened by incidents involving explosive hazards in northwest Syria. From 7 to 21 August, local sources reported some ten incidents in the Idlib and northern Aleppo areas, involvings several improvised explosive devices (IED), one explosive remnant of war (ERW) and four landmines, in which seven people including two children were reportedly killed and 13 people including three children were reportedly injured. Several other IED and ERW were reportedly dismantled over the same period.

The value of the Syrian Pound (SYP) in informal markets in northwest Syria fluctuated around 2,100 SYP per US Dollar for most of the last two weeks. As a result of the recent instability of the value of SYP and rapid devaluation, the Turkish Lira (TRY) has been increasingly used as a transactional currency in northwest Syria, with basic commodities such as fuel, bread, transport and telecommunications services now priced in TRY. People without adequate access to currencies in use risk being excluded from markets or facing higher prices for the same goods and services because of exchange rate disparities – further marginalising the more vulnerable members of society. Moreover, for humanitarian programmes inside northwest Syria, preservation of the value of assistance becomes more challenging due to fluctuating exchange rates and multiple currency conversions. The devaluation of the SYP intensifies the precarious economic situation and is worsened by the impacts of COVID-19. According to a survey by a UN partner, income loss, price increases, loss of humanitarian assistance and forced business closures were communities’ main concerns about the economic impact of COVID-19 in northwest Syria. 36 percent of community focal points reported that living conditions for their communities worsened since the start of the pandemic.

These circumstances come atop widespread humanitarian need driven by hostilities and displacement, with northwest Syria hosting some 2.7 million displaced people. 220,000 people were recorded to have returned to their homes or previous places of displacement by a UN partner between January and July 2020, mostly to areas around the M4 and west of the M5 highway in the southern and eastern Idlib area – areas that have seen an increase in hostilities in recent weeks. Findings from an assessment by an NGO found that in 72 percent of communities assessed, prevalence of destroyed shelters were reported, compared to 27 percent across northwest Syria, driving overcrowding in available shelters and illustrating the difficult conditions facing returnees. Families in 75 percent of communities in these areas reportedly cannot afford essential food items, and half of the communities have insufficient access to water. In the context of the COVID-19 outbreak, these conditions increase the risk of transmission among this highly vulnerable population. The dire conditions in these areas parallel the extreme needs prevalent across other parts of the northwest, where deteriorating circumstances continue to increase reliance on humanitarian assistance and diminish positive coping strategies. Concerns about weather conditions remain prominent. Needs related to coping with heat and sun exposure are presently increasing, and winter preparation efforts, soon to commence, are expected to further strain people’s finances, especially in light of rising costs.

In this context, humanitarian partners are working to meet the immense needs of people in northwest Syria while adapting to the closure of the Bab Al-Salam border crossing for UN transshipments under UN Security Council Resolution 2533. Efforts are ongoing to increase capacity at the one remaining point of entry for UN humanitarian assistance to northwest Syria, at Bab Al-Hawa, and to address new costs and mitigate risks and challenges associated with the longer distances that need to be travelled within northwest Syria in order to reach people in areas previously served via Bab Al-Salam.

**FUNDING**

By July, the Syria Cross-Border Humanitarian Fund (SCHF) allocated a record amount of $164.6 million to 64 partners implementing 184 projects, making the SCHF the largest fund globally in terms of allocations and contributions. Thanks to the generous contributions made by donors, the SCHF was able to support 2.9 million people with life-saving and basic assistance across ten clusters and for the critical COVID-19 preparedness, prevention and response in northwest Syria. In 2020, assistance through cash and voucher modalities and the number of people with disabilities targeted has increased. A record amount of US$127 million dollars has been generously contributed by 15 donors since the beginning of the year. As of 20 August, the 2020 Syria HRP remains underfunded with 38 per cent of the total requirement funded halfway through the year, similar to the level reported earlier in July. Further funding is urgently needed.

HUMANITARIAN RESPONSE

Camp Coordination and Camp Management (CCCM)

Needs:

- The main priority needs for new arrivals in July were safety and security (22%) and shelter (21%) followed by health (17%) and cash/voucher assistance (17%), as indicated in the CCCM Cluster’s monthly displacement updates. Notably, health has increased as a priority need for new arrivals from 8% in June, to 17% in the July update.
- The issues of over-populated sites and lack of camp management continue to be prevalent concerns, especially in the context of the COVID-19 pandemic where the application of preventive, response and mitigation guidance is essential.
- Most of the displaced families hosted in 4 Reception Centers (RCs) have been there for around eight months already, with no resettlement possibilities due to lack of adequate shelter options. Facilitating the relocation of displaced people from overcrowded RCs to sites where physical distancing and hygiene practices are more feasible is a main priority.

Response:

- Following reports of COVID-19 cases inside camps in north-west Syria, the CCCM Cluster met with the Health Cluster on 11 August to coordinate and consider isolation steps within camps. The discussion focused on possible mitigation measures in both planned and self-settled camps, including involving camp managers in awareness raising sessions, as well as mapping the existing lands available for potential isolation centers.
- A technical meeting was held on 14 August focused on examining the IDP Sites Integrated Monitoring Matrix Plus (ISIMM Plus) questionnaire, which aims to provide a multi-sectoral analysis of the IDP sites in north-west Syria. As part of COVID-19 response and mitigation measures, COVID-19 related questions are integrated into the ISIMM plus questionnaire; with specific points related to awareness raising, the application of social distancing measures, availability of personal protective equipment, sanitation details, distribution options, and monitoring mechanisms at site entrances. The main outputs from ISIMM Plus include the CCCM Multisectoral Service Monitoring Factsheet, and the IDP Sites Profiles.
- CCCM Cluster closely monitors 1,116 IDP sites hosting 1,479,251 IDPs (285,862 families). Of these, 80% are women and children, and 22,719 IDPs are reported to be persons with specific needs.
- In July, 85 sites were newly listed, and 27 sites were inactivated from the CCCM database (ISIMM). More details about the IDP sites in northwest Syria are available via the dashboard.
- CCCM Cluster also shared July updates from its monthly displacement report during the cluster meeting. Over 47,158 recent displacements were tracked in July, noting that individuals may have been exposed to multiple displacements and the reasons for movement may vary. The shelter types for new arrivals were reported as being mainly solid/finished houses and apartments; whereas around 20% went to managed camps.
- The monthly displacement update illustrated that the most congested IDP sites are in Dana. Furthermore, in July, 21,456 IDPs returnees were reported as having returned to the place of origin in north-west Syria. The top three IDP returnee destinations in July included Ariha, Ehsem and Mhambal.
- As of 16 August, 4 functioning RCs have responded by hosting 3,684 IDPs, including the provision of food, shelter and WASH services.
- CCCM Cluster continued to monitor and report on multiple incidents in IDP sites as part of its coordination response. Notably, many fire incidents have been reported, with issues related to electricity being highlighted as one of the causes, as well as the close proximity of some tents leading to the fast spread of the fires.
- Updates were shared with cluster members during the monthly cluster meeting about the Corona Awareness Team’s activities; including developing guidance and resources, key messages, hotlines, and other communication platforms, as well as awareness raising trainings, monitoring practices, and distributing fabric face masks.
- The inputs for the Inter-Cluster Coordination Group’s Readiness and Response Plan was drafted and shared for review with Strategic Advisory Group members. The plan targets 77,000 IDPs with CCCM activities which is 35% of the 220,000 the total planning figures (people who may be at imminent risk of displacement in case of renewed hostilities). The target is calculated depending on the historical percentage of people who seek refuge in IDP sites and current limitations in shelter availability. The CCCM Cluster coordinates with SNFI and WASH Clusters to make sure that suitable lands are identified and IDP site infrastructure is implemented in a timely and coordinated manner.
Gaps & Constraints:

- Continuous displacement has led to a decrease in areas available to accommodate the newly displaced population.
- Although IDP sites are usually a last resort option, there are currently 1,116 IDP sites listed in the CCCM Cluster’s database hosting 1,479,251 IDPs (285,862 families). The majority of sites listed in the CCCM database are self-settled (1,030 sites), compared to 63 sites being planned, as well as 17 Collective Centers and 6 Reception Centers.
- Due to delays and/or contradictions in the information provided by multiple members across borders, a massive data cleaning process and verification is required.
- Housing, Land and Property (HLP) issues and access continue to be some of the challenges that face organizations while establishing or expanding IDPs sites. Of the sites listed in the CCCM database, only 17% of sites were reported as having valid HLP status, compared to 9% that were not valid, and 74% were still pending.

Early Recovery

Needs:

- According to the most recent Socio Economic Overview Report (HNAP, Summer 2020 Report Series, depending on a nationwide demographic household survey conducted in June 2020), 1 in 3 Syrian households in northwest Syria report daily labour (36%) as their primary livelihood activity, followed by private sector employment (19%) and agricultural employment (9%) as the third most common livelihood activity.
- Households who primarily depend on daily wage work – who account for 23% of total households and 36% of those in northwest Syria - report an average monthly income of 120,927 SYP (55 USD), which is lower than the national average of 138,964 SYP (63 USD).
- The most important household barrier to employment or diversifying income was a lack of employment opportunities, as reported by 79% of households, followed by a lack of financing (66%), and lack of skills (48%). COVID-19 is not a significant barrier for 3% of households while security situation is a barrier to employment for 20% of the households.
- A staggering 71% of northwest Syrian households reported that their income was insufficient to meet their needs - a rate which has increased by 10 percentage points compared to January 2020.
- 76% of households reported borrowing money or buying on credit and spending on savings (46%) which can negatively impact the ability to deal with future shocks due to the reduction of resources. 34% of households reported selling productive assets/means of transport which directly reduce the future productivity of households, including that of human capital formation. 2% of the households reported children in the household working also affecting future productivity and are more severe or extreme in nature for the household.
- 81% of males between the ages of 17 and 64 have worked over the March-May 2020 period while only 6% of females have worked in the same period in northwest Syria, which is the lowest in work rates for females in nationwide (22%).
- 35% of individuals aged between 17 and 64 who are not working reported that they were unable to work due to pregnancy or childcare responsibilities. Following a highly gendered pattern, this reason was selected for 43% of women but only 2% of men. Men were most frequently not in work on account of being a student (31%), even though this only applied to men between the ages of 17 and 24. Women had a much higher rate of reporting that they had no skills (19% compared to 6%) and that they were not allowed to work (8% compared to 1%).
- Moreover, according to the most recent Market Network Analysis Report (REACH, May 2020 Report, conducted with 818 interviews with Key Informants (KIs) in accessible locations throughout Idlib and Aleppo governorates, in 17-21 May 2020) 24% of KIs reported fuel markets were unavailable within their communities, followed by hygiene (17% of KIs), fresh food (16% of KIs), and bulk food markets (7% of KIs). The importance of markets varied from markets where only one community reported to buy commodities from, to regional hubs such as Raju, Jandairis, Jarablus and Bulbul, which all supported over 20 communities across all four commodity types. The most commonly reported reason for traveling outside of a community to access a market was lower price (fuel: 62%, hygiene items: 68%, fresh food: 73%, bulk food: 78%). This is underscored by the fact that that over 70% of KIs reported lack of cash or low purchasing power as market access challenges among members of their communities. Other commonly reported reasons for going to markets in other communities included better quality or better selection of goods.
- The market centers has been classified as “important” for a commodity if it supports at least ten surrounding communities. The most important market centers for different kinds of commodities like fresh food, hygiene items, bulk food and fuel in Idlib reported mostly that Ariha is considered an important market hub for fresh food, hygiene items, bulk food and fuel while Jisr Ash Shugur, Mhambal and Idlib are for fresh food, hygiene items, and fuel. The most important market centres in Aleppo reported mostly as Afrin, Jandairis, Sheikh El Hadid, Raju, Bulbul, Suran, Ar-Ra’ee and Aghtrin for all types of commodities like fresh food, hygiene items, bulk food and fuel.
- Over 70% of the KIs reported community members’ lack of cash or low purchasing power as a challenge in accessing markets - whether inside or outside of their own communities mostly in Afrin, Daret Azza, Atareb in Aleppo governorate and Kafr Takharim, Darkosh, Teftnaz, Bennis and Sarmin in Idlib governorate. The other most commonly reported
access issues were lack of transport (34%), long distance (24%), lack of access for persons with restricted mobility (21%) and avoidance of markets due to the fear of COVID-19 (12%).

Response:

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

Gaps & Constraints:

- ERL members in northwest Syria are funded at approximately 4% of total requirement vis-à-vis 2020 HRP requirements (estimation based on June 2020, FTS data).
- In order to reduce the negative impact on the affected population (IDPs, returnees, host communities) and on markets caused by the combination of pre-existing challenges, the COVID-19 crisis and the ongoing economic crisis, increased funding is required on the following:
  o Support to businesses both in urban and rural environments
    ▪ Start-up support through grants or micro-credit assistance
    ▪ Support micro-businesses/businesses to contain the impact of the COVID-19 and the ongoing economic crisis on their activities
  o Creation of short-term work opportunities, particularly through scaling-up Cash for Work modality, possibly, but not exclusively, linked to rehabilitation works improving access to services.
  o Rehabilitation of critical roads and access ways that assure timely and continuous humanitarian supplies to most vulnerable and enhance local economic activity and related access to livelihoods opportunities.
  o Restore, rehabilitate and adapt key socioeconomic services and related infrastructure, including electricity and water networks, sanitation systems, markets, health facilities, educational facilities and essential administrative services, including through cash-for-work (C4W) schemes, business grant schemes supporting entrepreneurial activities, and targeted vocational training linked to C4W/entrepreneurial activities.
  o Continue scaling-up/expanding the local production of personal protective equipment such as fabric masks that would contribute preventing COVID-19 transmissions.
  o Restoration of essential services and basic infrastructure to prioritize activities that would support the preventive and curative health response to COVID-19 in close coordination with other sectors and local governance structure.
  o Collecting daily solid waste in urban areas and inside camps, providing cleaning machines or garbage collection cars, removal of demolitions from roads and sidewalks, cleaning of main and secondary roads and social infrastructures by removing rubble and garbage.
  o Market-based modalities assistance to vulnerable households including assisting vulnerable households with transportation to/from markets and health facilities.
ERL members in northwest Syria, acknowledging the need to face the extraordinary challenges caused by the devaluation of the SYP, continue to express the view/indicate the use of USD as the preferred way to reduce the risk/extent of losses due to exchange rate fluctuations and calls for such liquidity to be made available. According to ERL members, this would help them to continue support beneficiaries and affected people during this critical moment, while also trying to minimize additional negative effects that might further harm the people in need.

## Education

**Needs:**

- An estimated 398,000 school-age children (5 to 17 years old) have been displaced in northwest Syria between December 2019 and February 2020.
- Due to the large influx of displaced families, many schools were converted to temporary shelters, preventing them from being used for educational purposes. 23,419 people reside in 277 schools in Afrin, Al Bab and A’zaz districts in northern Aleppo governorate and Ariha, Harim, Idleb and Jisr-Ash-Shugur districts in 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 had been closed since 14 March in the Idlib area and since 16 March in northern Aleppo governorate and reopened temporarily.
- However, after the first confirmed case of COVID-19 being identified in northwest Syria on 9 July, schools have been closed again from 10 July. Learning has switched to the distance learning modality once more. Education authorities in Idlib had announced that they would assess the situation until 1 August and potentially reopen the schools after an assessment. Schools are expected to be re-opened in the Idleb area for the new school year, but there is still no official statement to that effect.
- On 13 August, the local education authorities in Dana issued a circular allowing non-camp schools supported by humanitarian actors to start in-person education activities as of 15 August, while stating that the resumption of in-person education activities for other schools is voluntary.
- Examinations for grades 9 to 12 began on 4 July and completed on 21 July in the Idlib area and northern Aleppo. Total number of children who received the exams is 24,404 students. 14,697 of these students in Grade 9 and 9,707 students in Grade 12.
- To address the needs, the objectives of the Education cluster are:
  - Providing education personnel and teacher incentives and training
  - Providing learning materials for children and teachers
  - Provision of non-formal education and summer school for out of school children (in classroom or remote/distance)
  - Continuing to support for the safe reopening of schools (repair/expansion of classrooms and school furniture, WASH, hygiene promotion and supplies, school disinfection, etc.)
  - Using a blended approach for students’ learning process, combining face-to-face education with distance learning.
- COVID-19 prevention needs:
  - Cleaning of education facilities that are accessible to children and/or adults again.
  - Clean WASH facilities in schools (in coordination with WASH cluster).
  - Hygiene and basic health sensitisation at home, printed and/or through social media in coordination with Risk Communication and Community Engagement (RCCE) efforts.
  - Continued physical re-planning of school infrastructure, especially in camps, taking into consideration adequate physical distancing and to prevent large gatherings of children.
  - Maintain adjusted modalities for education services (classes etc.) to incorporate physical distancing and prevent large gatherings.
- Continuation of learning needs:
  - Childcare arrangements for children whose parents are healthcare workers (in coordination with the Child Protection sub-cluster).
  - Adaptation of existing curricula and implementation through printed materials and/or social media and self-learning programmes.
Assessment of students’, parents’ and teachers’ access to affordable internet connectivity and internet-enabled devices. Consider paper-based individual home learning assignments based on current curricula as alternative.

Hold meetings virtually to consult with school governance bodies 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 362,441 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.
  - 28,758 children supported with formal and non-formal education in Idleb, Harim, Dana, Atareb, Salqin, Maaret Tamsrin and Qourqeena including children with disabilities.
  - 86,484 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 152,351 children and teachers benefited from distance learning in Idleb and Aleppo governorates as an alternative way to continue education during the COVID-19 pandemic.
  - In Idleb and Dana sub-districts, 171,494 students and teachers have been provided with awareness raising on COVID-19 and received information, education and communication (IEC) and sterilisation materials.
  - 29,099 students, teachers and parents sensitized on prevention of COVID-19.
  - Since February, 228,878 children from displaced and host community populations received textbooks in Idleb and Aleppo governorates.
  - 690 teachers and education personnel provided with teachers’ incentives.
  - 185 teachers and education personnel were trained on literacy, numeracy and PSS and referral mechanisms.
  - 227 families have been provided with tents by Education Cluster members to support the relocation of displaced people sheltering in schools, in order to enable the resumption of learning activities in the affected areas.
  - At least 19,297 children in schools and temporary learning spaces benefited from sterilisation of education facilities as mitigation against the spread of COVID-19.
  - 25,000 masks provided for student exams in Idleb and Aleppo countryside.

Gaps & Constraints:

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

Needs:

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

Response:

- The FSL Cluster established three area coordination groups to enhance the coordination among its members in Idleb, in Afrin and A’zaz-Jarablus-Al Bab areas. These groups will be ad addition to the Livestock Technical Working Group (LTWG), Agriculture Technical Working Group (ATWG), Bread and Bakery Coordination Group (BBCG), and the COVID-19 focal points group. The aim is to maximize coordination, avoid any potential overlapping, and exchange the knowledge, challenges, success stories, and lessons learned.
- Six FSL Cluster members delivered emergency food assistance to 82,107 recently displaced people and returnees between 19 July and 19 August:
  - Five FSL Cluster members distributed 15,203 Emergency Food Baskets to reach 79,694 people;
  - One FSL Cluster members distributed 20,000 USD in Multi-purpose Cash Grants (MPCG) to assist 170 people;
  - Two FSL Cluster members distributed 2,243 cooked meals to 2,243 people.
- The Cluster co-lead agency has prepositioned sufficient food to meet the needs of more than 1.3 million people for more than two months. The Cluster lead agency has more than 220,000 RTEs ready to respond to some 1.1 million people, with stocks strategically positioned in different warehouses managed by Cluster members in northwest Syria.
- The FSL Cluster released the bread and bakery dashboard, which includes actual figures for June 2020 and plans for August, September and October 2020, as well as the number of members currently working, or planning to work, in bread and bakery activities. In addition to the price per tonne of flour and per kilogramme of bread in northwest Syria, the three main points are:
  - In June, some 822,414 people benefited from bread assistance programmes by FSL members across Idleb and Aleppo governorates.
  - 24 FSL Cluster members are reporting on the bread assistance.
  - The plan is to increase the number of people receiving bread assistance to 1.19 million people in August, 1.11 million people in September and 950,000 people in October.
  - A’zaz, Mare and Sharan sub-districts do not have any bread assistance planned.
- The FSL Cluster received an additional US$ 2 million from the SCHF to support bread-related activities.
- Peste des Petits Ruminants (PPR) is globally the most dangerous infection of sheep and goats. The northwest Syria PPR vaccination campaign, implemented by three members since early May, covered 820,926 sheep and goats belonging to 20,155 households in 486 locations in all accessible parts of northwest Syria. This campaign is ongoing to vaccinate an additional 200,000 sheep & goats that arrived in northwest Syria from southern Idleb governorate and from northern Hama governorate in May and early June 2020.
- In June, the Cluster co-lead agency shipped 400 feed roller mills to Harim, Al Bab, Jarablus and A’zaz districts in northwest Syria. The equipment was distributed to 400 farmer groups (4,000 households) that are currently being trained and supported to use feed roller mills for producing animal feed on their farms. By producing their own animal feed, livestock owners no longer need to rely on purchasing expensive, low-quality commercial livestock feed.
- On 8 July, the Cluster co-lead agency transhipped Lumpy Skin Disease (LSD) vaccine for cattle and Enterotoxaemia vaccine for sheep to northwest Syria. The LSD vaccination of cattle is urgent because an outbreak of LSD in Lattakia governorate is also affecting northwest Syria. Enterotoxaemia vaccination of sheep will be implemented according to the seasonal livestock vaccination calendar for Syria.
- Protection of livestock against endemic and epidemic diseases and improved local availability of quality animal feed increases the production of animal source foods for humans (dairy products, eggs, meat). The support provided to animal production is a significant contribution towards reducing human malnutrition, protecting human health and reducing the vulnerability of IDPs and host communities to COVID-19.

Gaps & Constraints:

- A gap of 317,000 people remains unreached by food assistance.
- There is a need to enhance the complementarity between food assistance and livelihood, in addition, to support the livelihood including the income generation activities.
• Several fire incidents were reported in northwestern Syria in recent weeks. These had minor impact on arable lands in the northwest. As of mid-June 2020, nearly 48 hectares planted with wheat and barley were burnt, while fires were neutralized in more than 200 hectares of agricultural fields. 90 percent of these lands were harvested at the time of the fires. Preventive measures and firefighting points established and implemented by farmers, NGOs, civil defence teams and other stakeholders played an important role in preventing major damage.

• FSL Cluster members are applying mitigation measures related to COVID-19. The Cluster is planning to conduct a meeting with COVID-19 focal points to reiterate the messages about the mitigation measures and to make sure that Cluster members have the capacity to continue operating in case of a potential increase in confirmed COVID-19 cases.

Health

Needs:

• There is a crucial need to assure continuity of services in at least 15 strategic primary healthcare centres (PHC) after receiving calls from Cluster members claiming that these vital health facilities may be shut down due to shortage of funds. In parallel, there is a need to ensure that sufficient non-communicable disease (NCD) drugs and supplies are available in northwestern Syria and that beneficiaries have access to these during the COVID-19 pandemic.

• With the increase of leishmaniasis cases, there is a need to provide more supplies and medication for prevention and treatment of leishmaniasis. Recent cases were reported in crowded camps and communities, which risk further spread of the disease in northwestern Syria, particularly during the winter season.

• For COVID-19:
  o Under the Preparedness and Response Plan of COVID-19’s taskforce, there is a need to secure funds for sustainable surveillance and testing capabilities, and laboratory expansion as cases increase.
  o COVID-19 positive cases were reported in northwestern Syria from three clusters of COVID-19, and lately from within camps where self-isolation is not applicable. Therefore, there is a need to increase the efforts under the Risk Communication and Community Engagement (RCCE) pillar focusing on awareness activities and tracing of contacts, in close collaboration with the Early Warning Alert Network and Coordination (EWARN). The role of Community Health workers (CHWs) in tracing suspected COVID-19 positive cases comes as a boost to cover the gaps in human resources reported by Cluster members.
  o There is a need to emphasize to the public to use fabric face masks especially that “adherence to COVID-19 precautionary measures seems to have declined since May due to fatigue of restrictions, perceived lack of existing restrictions and/or economic implications/fear of losing employment”, as per the HNAP COVID-19 bulletin.

Response:

• As per the mandate of the Health Cluster in preparedness and contingency planning, there is continuous work with Cluster members, health directorates in northwest Syria and health authorities in Turkey to identify needs and gaps in health services in general as well during the pandemic of COVID-19.

• 28 PHCs and mobile teams (7 in Idlib, 17 in Afrin and 4 in A’zaz and Al Bab) continue to provide support for child health, reproductive health, management of communicable and non-communicable diseases. There is a need to expand the support to more PHCs in Idlib and western Aleppo governorate as of August 2020.

• In early August 2020, the referral system was expanded to include the A’zaz, Jarablus, and Al Bab area in northern Aleppo in addition to Afrin and the Idlib area.

• As for the response to leishmaniasis in northwestern Syria, 165,000 vials of glucantime were procured to treat the disease.

• The 3 tuberculosis (TB) centres are still functional in northwestern Syria. In line with the integration approach, suspected TB cases from PHCs are being referred to two TB centres in Idlib and A’zaz.

• In order to assure a wide coverage and facilitate the access to TB services in northwestern Syria, a capacity building program for medical doctors working at PHCs was held in July. 52 doctors from 48 PHCs operated by 12 Health Cluster members will be able now to early detect and refer the suspected TB cases to the TB centres.

• As per Q2 Mental Health and Psycho-Social Support (MHPSS) Service Mapping for northwestern Syria, 20 health members are running 157 health facilities with MHPSS Programs. There are 163 trained doctors (4 psychiatrists: 3 males and 1 female), 49 trained midwives, 446 Psycho-Social Workers (PSWs) and 13 Psychologists. The Cluster lead is supporting by providing a weekly “online psychiatrists in capacity building” training via Arabic-speaking psychiatrists for psychiatrists inside northwest Syria and Syrian psychiatrists working for refugees in Turkey in addition to an online training recently held on “Child Psychiatry and another addiction”. Some other training sessions are planned for the next six months targeting all midwives on perinatal depression in addition to Psycho-Social Support (PSS) training for the 446 PSWs including “Basic Child Mental Health” training and “Addiction Management Training”.

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• Mental Health Gap Action Programme (mhGAP) field supervision for six months is ongoing (June until November) for 163 mhGAP-trained doctors across northwest Syria. In July, a total of 305 supervision and coaching sessions were held (physical and virtual supervision visits with strict infection prevention and control measures) by nine supervisors.

• As part of the integration of NCD to PHCs, 185 Package of Essential Non-Communicable Disease (PEN) interventions training held last July for 55 doctors and 51 nurses as well NCD Pharmacy Management Training held for 44 pharmacists and MHPSS Training for 35 PSWs. Also, three Field Monitoring teams have started the “field monitoring visits” to ensure implementation of the created SOPs, algorithms, forms. etc. Also, 85 NCD Kits will be distributed to PHCs by September, however, there is still a need to advocate to support essential NCD drugs.

• A survey on cervical and breast cancer developed by the Sexual and Reproductive Health (SRH) Technical Working Group, as an integrated approach with referral network team (Idleb and Afrin), will be implemented as a pilot project in the PHCs in Harem and Afrin. It will serve to evaluate the availability of services, human resources and knowledge of health members’ staff regarding breast and cervical cancer screening. Also, 2 SRH partners will start soon in Afrin and Al Bab to deliver screening. In Afrin, there will be also treatment services.

• In July 2020, 95% of the planned Emergency Programme Immunization (EPI) sessions were conducted due to the temporary suspension of services after the first COVID-19 case was confirmed in early July. At the end of July, all teams resumed their work. Currently, 132 EPI teams are fully functioning and provided 603 EPI sessions during the last week with cautious application of infection prevention and control measures. The 294 EPI staff members attended a refresher training (210 males and 84 females) in July 2020 on COVID-19 measures.

• A final decision was taken to implement the households Oral Polio Vaccine (OPV) campaign for children below five years old in September 2020 after postponements due to COVID-19 preventive measures. It will be accompanied with distribution of masks to the families of beneficiaries.

• The Cluster lead agency continues to boost the medical supplies in northwest Syria in order to alleviate the needs of essential supplies in the health facilities. The distribution plan includes specialized emergency health kits and supplies:
  o 13 kits of Interagency Emergency Health Kit (IEHK) supplementary medicines modules, serving 130,000 people for 3 months;
  o 120 IEHK basic medicines serving 120,000 people for three months;
  o 8 items of anesthesia medicines;
  o 6 Surgical supply kits, providing 600 surgical and post-surgical care;
  o 5 Trauma kits providing 500 Trauma care;
  o 36 Burn Kits providing 360 treatments for burn cases.

• For COVID-19:
  o As of 21 August 2020, a total of 4,845 samples were tested, out of which 59 returned positive. Of these cases, surveillance and case management teams reported 46 already recovered.
  o The first COVID-19 cases in IDP camps were reported last week. The authorities and the EWARN teams responded by keeping the cases isolated, conducted contact tracing, collected samples from all identified contacts and started active search in the camp and other camps where contacts were identified;
  o As part of the contact tracing, collaboration initiated with the nearest health facilities in order to ensure the reporting of any suspected cases as well case detection (community bases surveillance) increased via CHWs. The positive cases were isolated at a health facility in northwest Syria.
  o The Health Cluster is coordinating relevant humanitarian actors to negotiate with the local authorities in northwest Syria on the importance of isolating positive cases and their contacts following issues faced with some Local Councils in Idleb in this regard.
  o A training of trainers (ToT) for 3 EWARN laboratory staff on laboratory methods for COVID-19 was conducted. The ToT was held in Ankara and was followed by roll-out training for up to 12 lab staff inside northwest Syria.
  o Logistically, in line with boosting of the testing capacity in northwest Syria, 3,000 PCR and extraction kits and 3,000 Universal Transport Mediums (UTMs) with swabs have been provided inside northwest Syria. Also, personal protective equipment (PPE) and infection prevention and control (IPC) materials were distributed to one isolation intensive care unit in a COVID-19 hospital and three COVID-19 Community Treatment Center (CCTC) including: 1,000 disposable gowns, 300 protective suits, full cover, 174 face shields, 137 googles, 39,800 examination gloves, 15,750 surgical masks and 2,860 N95 Masks.
  o Also, following a data collection held via "COVID-19 supplies survey", filled by Health Cluster members, a distribution plan is developed for supplies to serve the COVID-19 health response for 122 health facilities operated by 17 members for a period of one month.

Gaps & Constraints:
• There is a 38% increase in suicide cases in northwest Syria (132 in Q1 vs. 213 in Q2), and lately 3 new cases were reported via social media. This comes at a time when there is a gap in availability of specific MHPSS messages for communities to reduce stress, anxiety and fear related to COVID-19.
• For COVID-19:
  o Following the announcement of positive cases last week in a camp, the Taskforce is coordinating with the CCCM Cluster. An ad hoc Inter-Cluster Coordination Group meeting will be held in the coming week to coordinate inter-cluster response. With IOM, who support several planned camps, there is a collaboration in planned camps to set-up quarantine spaces in addition to implementation of IPC measures and training for staff in camps;
  o There is only one laboratory in Idleb and a new laboratory in Afrin is expected to open next week. The delay is due to unexpected logistical problems involving the transfer of 2 PCR machines that have arrived in Turkey to northwest Syria.
  o There is lack of resources in the camps to conduct the self-isolation and/or to secure the basic needs for the population to minimize the movement from camps to outside. Moreover, referrals to COVID-19 Community Treatment Centres (CCTC) are proving difficult for some people who had contacts with COVID-19 positive patients and are resisting the referral.
  o There is a shortage of fabrics needed to produce fabric masks and a need to increase the availability of protective equipment to serve the full community.

Nutrition

Needs:

• Based on the July 2020 nutrition surveillance report, the proxy prevalence of acute malnutrition across northwest Syria based on community-based nutrition surveillance was 2 percent among children 6-59 months and 9 percent in pregnant and lactating women (PLW).

• The proxy prevalence of acute malnutrition was higher in Idleb compared to Aleppo among children 6-59 months (3 percent vs. 1 percent) and PLW (16 percent vs. 3 percent).

• The proxy prevalence of chronic malnutrition (stunting) among children 6-59 months across northwest Syria according to May 2020 surveillance report was 32 percent and it was higher among boys (34%) compared to girls (30%).

• In Idleb, the proxy prevalence of acute malnutrition was generally highest among those displaced compared to residents in both children 6-59 months and PLW.

• The prevalence of acute malnutrition among children 6-59 months has increased from 1 percent in May 2019 to 2 percent in June 2020. Similarly, the prevalence of chronic malnutrition (stunting) has increased from 19 percent to 32 percent during the same period.

• Exclusive breastfeeding was found to be 36 percent, minimum dietary diversity at 58 percent, while minimum acceptable diet (MAD) was 46 percent.

• While the proxy prevalence of acute malnutrition in children 6-59 months remains relatively low, the high prevalence of stunting in children 6-59 months and acute malnutrition in PLW are of primary concern.

• The proxy prevalence of acute malnutrition among children 6-59 months in the following locations was found to be of primary concern (prevalence ≥5%): Qourqueena (10%), Armanaz (7%), Hazano (7%), and Jisr-Ash-Shugur (5%).

• The proxy prevalence of acute malnutrition among PLW in the following locations was found to be of primary concern (prevalence ≥10%): Aqrabat (35%), Janudiyeh (27%), Qah (26%), Qourqueena (25%), Sarmada (23%), Darkosh (22%), West Idleb (18%), Salqin (17%), East Idleb (15%), Hazano (14%), Armanaz (14%), Milis (14%), Maaret Tamsrin (13%), and Deir Hassan – Darhashan (13%).

• The poor nutrition situation is largely attributed to continued exposure of children and PLW to unsafe living conditions, diseases (including impacts of COVID-19), suboptimal infant and young child feeding (IYCF) practices, high maternal malnutrition, economic downturn, low purchasing power, poverty, food insecurity, family separations and poor care practices, early marriages, and destruction of infrastructure causing limited access to health services, and inadequate sanitation and water supply.

Response:

• Since the start of the year, 1,159,720 children 6-59 months and PLW have been reached with life-saving nutrition services covering 513 communities and 40 sub-districts in Idleb and Aleppo.

• The number of children 6-59 months and PLW reached to date represents nearly 50 percent of the population in need with 15 percent increase in the coverage compared to the last situation update.

• The following numbers of children 6-59 months and PLW have been reached with specialized nutritious supplements – Ready-to-Use Foods (RUF), Lipid-based Nutrient Supplements (LNS), High Energy Biscuits (HEB) or micronutrient supplement:
  o 596,092 children 6-59 months reached which represents 48 percent of those in need.
The second half of 2020 attributed to dysfunctional markets, limited livelihoods opportunities, inflation, low purchasing power, increasing food insecurity, and disruption of access to health and WASH services. An increased number of airstrikes, some resulting in civilian casualties, have been observed in northwest Syria during the first weeks of August. Protection Cluster members have on occasion had to suspend activities due to security concerns and fears amongst people accessing services or participating in awareness-raising sessions.

**Nutrition Cluster COVID-19**

The Nutrition Cluster in collaboration conducted a Mid-Year Review to discuss the implementation progress of the 2020 nutrition cluster HRP, inter-cluster synergies, strategies to improve quality of service delivery in the context of COVID-19 and economic downturn, priorities for the rest of 2020, and draft an action plan to address identified constraints.

**Gaps & Constraints:**

- During the Mid-Year Review, partners reported a number of operational challenges including: shortage of supplies for management of MAM, potential sharing of ready-to-use foods (RUF) at household level, community misunderstandings of the target groups, limited PPE for frontline staff, and referral refusals especially to stabilization centers (SC) due to long distances in some locations.
- A few Nutrition Cluster members have procured light PPE for their non-health staff who are involved in routine 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 proportion of those reached with services for treatment of MAM, prevention of acute and chronic malnutrition, and micronutrient supplementation are 29 percent, 44 percent, and 55 percent respectively of those in need. The low achievements are indicative of limited funding, access constraints and supply shortages especially Ready-to-Use Supplementary Food (RUSF) for MAM treatment.
- The COVID-19 outbreak and economic downturn could potentially cause a further deterioration of the nutrition situation during the second half of 2020 attributed to dysfunctional markets, limited livelihoods opportunities, inflation, low purchasing power, increasing food insecurity, and disruption of access to health and WASH services.
- Limited implementation of a multisectoral response which is crucial in addressing the underlying drivers of acute and chronic malnutrition.

**Needs:**

- An increased number of airstrikes, some resulting in civilian casualties, have been observed in northwest Syria during the first weeks of August. Protection Cluster members have on occasion had to suspend activities due to security concerns and fears amongst people accessing services or participating in awareness-raising sessions.

- Life-saving nutrition services are provided through 120 Rapid Response Teams (RRTs) and mobile teams, 10 Stabilization centers, 165 Outpatient Therapeutic Programme (OTP), and 23 Targeted Supplementary Feeding Programme (TSFP) by 25 Nutrition Cluster members.
- Nutrition Cluster partners provided the following services:
  - 166,256 displaced children 6-59 months and PLW received HEB for prevention of acute malnutrition;
  - 486,119 PLW and children 6-59 months received micronutrient supplementation;
  - 121,828 children 6-36 months received LNS for prevention of acute and chronic malnutrition;
  - 354,876 mothers and care givers were reached with infant feeding and caring practices messages and counselling.
- Out of the 1,159,720 PLW and children 6-59 months screened for acute malnutrition:
  - 4,493 cases of severe acute malnutrition and 12,538 cases of moderate acute malnutrition were identified among children 6-59 months and referred for appropriate treatment;
  - 13,610 acutely malnourished PLW identified and referred for appropriate treatment.
- Nutrition Cluster members provided the following COVID-19 related services:
  - 106,777 mothers and caregivers received information and prevention measures related to COVID-19;
  - 69,324 mothers and caregivers counselled on breastfeeding in context of COVID-19;
  - 33,239 beneficiaries received masks, IEC materials related to COVID-19 (posters, WhatsApp videos, etc.);
  - 1,189 staff of partners trained on COVID-19 IPC measures;
  - 731 staff of partners trained on nutrition programmatic adaptations in context of COVID-19 - CMAM, IYCF-E, Surveillance, etc.;
  - 1,951 staff of partners received PPE tools (e.g. masks, gloves, hand sanitizers, etc.).
- Nutrition Cluster members are implementing the recommended adaptations in the context of COVID-19 which include: continuity of life-saving nutrition services, integration of IPC measures for mitigation of COVID-19 infection in all platforms, enhanced communication on IYCF-E in context of COVID-19, simplified protocol for treatment of acute malnutrition, surveillance, supply pre-positioning to avoid stockouts, etc.
- Nutrition Cluster COVID-19 taskforce meetings are conducted fortnightly to review emerging global evidence and recommendations and discuss northwest Syria experiences and questions raised by partners in relation to the operational guidance. The Cluster also conducts coordination meetings fortnightly.

**Protection**

Needs:

- 208,752 PLW reached which represents nearly 36 percent of those in need.
- Life-saving nutrition services are provided through 120 Rapid Response Teams (RRTs) and mobile teams, 10 Stabilization centers, 165 Outpatient Therapeutic Programme (OTP), and 23 Targeted Supplementary Feeding Programme (TSFP) by 25 Nutrition Cluster members.
- Nutrition Cluster partners provided the following services:
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**Gaps & Constraints:**

- During the Mid-Year Review, partners reported a number of operational challenges including: shortage of supplies for management of MAM, potential sharing of ready-to-use foods (RUF) at household level, community misunderstandings of the target groups, limited PPE for frontline staff, and referral refusals especially to stabilization centers (SC) due to long distances in some locations.
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- The COVID-19 outbreak and economic downturn could potentially cause a further deterioration of the nutrition situation during the second half of 2020 attributed to dysfunctional markets, limited livelihoods opportunities, inflation, low purchasing power, increasing food insecurity, and disruption of access to health and WASH services.
- Limited implementation of a multisectoral response which is crucial in addressing the underlying drivers of acute and chronic malnutrition.
Ground-based strikes and shelling have continued to be exchanged between pro-Government forces and non-State armed groups in Idlib, western rural Aleppo and parts of northern and western rural Hama.

The use of explosive weapons throughout northwest Syria also continues to increase risks related to explosive hazards, such as unexploded ordnance. In the week of 9-15 August, explosive hazard incidents resulting in civilian casualties have been a daily occurrence.

Human rights violations and abuses continue to be increasingly reported by Protection Cluster members.

The protection environment is increasingly affected by the compounding impacts of COVID-19 mitigation measures, the economic downturn, as well as the ongoing armed conflict.

Forced evictions of IDPs from residential, commercial, and public property continue to be reported. These evictions are assessed to be linked to a consistent increase in rental prices due to the SYP devaluation as well as the intention to revert to the original use of public buildings such as schools.

Members of the GBV sub-cluster continue to report a significant increase in various types of gender-based violence (GBV), mainly domestic violence (marital rape, physical and emotional violence, and denial of resources and services). Psychosocial stress, stemming from poverty and lack of employment of heads of household, in addition to extended lockdown/stay at home measures, are factors driving this increase. Women and girls with disabilities and pregnant women are reported to be among the most vulnerable to domestic violence during this period.

Cases of exploitation of women (both financial and sexual exploitation) have been reported in recent weeks. Alleged perpetrators frequently are camp managers and landlords. IDP women are especially at risk of this type of exploitation due to situations of financial vulnerability. Cases such as these are frequently reported in IDP sites exclusive to widowed and divorced women and girls (so-called ‘widow camps’).

The GBV sub-cluster continues to receive reports about families marrying off their daughters repeatedly for short periods in exchange of money. There are also reports of adolescent girls left on their own with children at the age of 18-19. Furthermore, reports are received of continued use of hormonal treatments for young girls to advance puberty in order to enable marriage of daughters in exchange for dowry and/or to reduce pressure on families.

Reports are also received on the use of violence to force pregnant women to abort in order not to deal with an additional financial burden. Moreover, there is an increase in reported divorces that are happening for the same reason, leading to an increase in female headed households.

Issues related to women’s access to health services were observed during the reporting period, as well as a reduced willingness of older persons and persons with disabilities to seek basic healthcare due to fears of contracting COVID-19 or a hampered ability to access health centers. Furthermore, members reported that certain types of medication for pregnant women have become unavailable.

Child Protection sub-cluster members continued to report a persistence of child protection concerns during the reporting period. The impact of the economic deterioration and COVID-19 mitigation measures exacerbates an already dire humanitarian situation for children in northwest Syria, resulting in a steep increase of families resolving to negative and harmful coping mechanisms including child labour, including worst forms of child labour, and child marriage.

Restrictions of movements and forced quarantine measures are impeding access to gender-based violence (GBV) and violence against children survivors’ services. Schools, community centers, Child Friendly Spaces and Women and Girl Safe Spaces were significantly scaled down due to COVID-19 precaution measures. This has also made it more difficult for women and girls to disclose incidents and seek GBV services as well as for children affected by violence to be identified.

Despite limitations in an increasingly restrictive operational environment and suspension of Child Friendly Spaces, child protection partners have strived to deliver, while incorporating where possible COVID-19 prevention messages and messages on childcare in times of isolation and unpredictability. Child protection partners continue to adapt core activities, such as psychosocial support activities and parenting programmes.

Response:

From 3 to 16 August 2020, three Protection Cluster members provided emergency response services to civilians recently displaced from Idlib and Aleppo due to the ongoing hostilities. Cluster members provided 11,650 protection interventions to IDPs and affected host community members in 27 communities within 8 sub-districts in Idlib and Aleppo reaching 7,396 individuals (2,153 girls, 685 boys, 4,175 women, 383 men). The main services protection actors provided are as follows:

- Psychological First Aid (PFA) and Psychosocial Support (PSS)
- Information sharing about other services
- Dignity kits distribution
- Explosive hazard risk education

Cluster members also referred individuals to other basic services, notably to health centers and shelter assistance, and provided Individual Protection Assistance (primarily cash grants for protection outcomes). It should be noted that the
above emergency response activities are in addition to activities included in the HRP which are reported on through cluster 4W IM products a monthly basis.

- Since December 2019, GBV sub-cluster members have distributed 228,675 dignity kits. Based on feedback, those kits where critical in responding to their increased need for personal hygiene products in the time of COVID-19 and satisfaction was reported with measures taken by GBV sub-cluster members during distributions to prevent the spread of COVID-19. Kit contents are being adjusted to meet specific needs related to COVID-19.
- Members of the GBV sub-cluster continue provision of GBV services, both through static facilities and online, which is creating several different entry points for disclosure of GBV and receipt of services.
- From 20 July to 17 August 2020, 3,334 individuals (1,202 girls, 1,665 boys, 266 women and 201 men) have been reached with child protection emergency interventions while 1,438 parents, caregivers and children (415 girls, 556 boys, 266 women and 201 men) were reached through awareness raising on child protection issues with a focus on prevention.
- In the same period, 1,874 children (775 girls and 1,099 boys) received psychosocial support (structured and sustained). Psychosocial support continues to be key in strengthening girls and boys coping mechanisms and resilience.
- 22 children were referred to specialized services (12 girls and 10 boys). Case management including family tracing continues to play a central role in facilitating individual child protection assessments, monitoring of cases and referral to specialized services provided, while taking the necessary precautions due to COVID-19. Between late July and early August, a total of 1,364 new cases were registered (591 girls and 773 boys). 80% of all new cases were identified in Idlib governorate (31% in Dana, 20% Maaret Tamsrin, 11% Kafr Tamsrin, 8% Idlib and 9% other sub-districts together). 20% were identified in Aleppo governorate (55% in A’zaz, 10% Afrin, 9% Al Bab, 5% Jebel Saman, 4% Daret Azza and 17% other sub-districts together).
- The Protection Cluster has initiated a series of community-based Focus Group Discussions, carried out by 10 partners throughout northwest Syria, contributing to the evidence base for the upcoming 2021 Humanitarian Response Plan. Similarly, 71 semi-structured Key Informant Interviews have been held with persons with disabilities within the framework of the Inclusion Technical Working Group.

Gaps & Constraints:
- Protection Cluster members continue to face obstructions in accessing affected populations in some IDP sites. Hampered access to protection services, especially for women and children, is of increasing concern given the compounding effects of the economic downturn, COVID-19, and the armed conflict.
- Increased basic needs across the population due to the currency devaluation and economic downturn hamper acceptance of protection interventions due to people prioritizing addressing basic needs.
- GBV-specialized services remain unavailable in many communities in northwest Syria, mostly due to limited funding. Additional resources are needed to support GBV prevention and response with a focus on vulnerable groups such as adolescent girls, widows, divorced women, persons with disabilities and men and boys who have experienced sexual violence.
- Currently there are 41 functional Women and Girl Safe Spaces across northwest Syria (16 in Aleppo and 25 in Idlib) for a population of 4.1 million individuals. GBV sub-cluster partners have been struggling to sustain the existing spaces due to lack of funding. Several GBV projects and WGSS in northwest Syria have had to close down due to limited funding.
- Lifesaving activities such as Victim Assistance for persons with disabilities resulting from explosive hazard accidents remain underfunded and under-implemented while population needs are growing in light of the escalation of conflict.
- Due to approaching expiration dates of existing grants (August-October) in the coming period, including for 8 projects focusing on implementation of the Protection Cluster Emergency Response model, additional funding is required for protection partners implementing emergency responses as well as regular specialized protection services.
- Activities that continued with COVID-19 countermeasures included specialized services such as case management for high-risk and individual cases and referrals for child protection, GBV and mine action, individual protection assistance and physical rehabilitation. Where feasible, psychosocial support, legal awareness raising, and counseling on housing, land, and property rights and civil documentation have also continued (in centres, via outreach, and in camps).

## Shelter/Non-Food Items (SNFI)

**Needs:**

- As reported by HNAP for July 2020, the top three shelter types for IDPs in northern Aleppo governorate are finished buildings (52%), tents (31%) and unfinished buildings (7%); compared to the Idlib area where the top three shelter types are finished buildings (44%), tents (41%) and makeshift shelters (8%). The quality of makeshift shelters is a concern, and needs attention, especially considering weather conditions like heavy rain and high temperatures.
Notably, in many locations the number of displaced people compared to the number of residents is particularly high, with 75,987 IDPs compared to 37,350 residents in A’zaz in northern Aleppo; and 91,537 displaced people compared to 25,716 residents in Dana in Idlib governorate.

According to HNAP (Summer Report Series), 75% of households have at least one member with a disability. There are infrastructure needs to support households with members who have disabilities, as well as considering the inclusion of persons with disabilities when implementing shelter activities.

Response:

- SNFI Cluster members continue to actively respond to the needs of the newly displaced population as well as protracted IDPs in northwest Syria. In July, 200,556 individuals received NFI assistance in the form of NFI kits, kitchen sets, mattresses and blankets. Some of these distributions were complimented with supplementary NFI items. Shelter needs of around 96,187 people were addressed with activities like provision of emergency shelter (72,393 people) or shelter rehabilitation and repair (23,794 people) during July. This makes a total of 759,006 people reached in 2020 with shelter assistance, including rehabilitation of infrastructure (197,665 people); provision of emergency shelter (431,178 people); shelter rehabilitation and transitional shelters (99,801 people); seasonal shelter assistance (30,363 people). Around 1,536,238 people were reached in 2020 with NFI assistance like seasonal and/or supplementary (337,264 people), and core NFI distributions (1,198,974 people). All figures are based on reporting by cluster members.
- The SNFI Cluster updated its recommendations on COVID-19 in English and Arabic to include a new recommendation from the Cluster to include cloth-masks in NFI kits to mitigate the risk of COVID-19 transmission in line with WHO recommendations. As the average family size is five, it is recommended to include a minimum of five cloth-masks in the NFI kit or provide these masks when distributing with the single NFIs. Local manufacture of face masks within Syria is a further good practice, having the added benefit of creating income generative activities at a time when the devaluation of the Syrian Pound has led to severe economic problems and hardship in accessing basic goods and services. To avoid absorbing medical masks and other PPEs from the Syrian markets, procurement and supply from Turkey might be also a good choice.
- The Shelter/NFI Cluster's Flood Classifications and Effects on IDP Sites in north-west Syria was shared and published on the cluster website. This document examines different levels of floods, including the impact, damage and likelihood; and aims to provide possible flood response interventions accordingly. It also includes technical guidance on developing and planning drainage systems in IDP sites, as well as useful links for further tutorials.
- SNFI continues to provide site planning support through coaching and trainings with the goal of building capacity and facilitating well-planned settlements in northwest Syria. Training topics varied from terrain analysis to children in IDP sites, and Response Planning. The cluster also encouraged its members to start implementing site planning support through coaching and trainings. The training topics varied from terrain analysis to children in IDP sites, and Response Planning. The cluster also encouraged its members to start implementing site planning support through coaching and trainings. The training topics varied from terrain analysis to children in IDP sites.
- The SNFI Cluster team, together with HNAP, conducted two rounds of assessments in April and June 2020 looking at the Collective Shelter Conditions in northwest Syria; with the objective of supporting partners in designing and prioritizing interventions to improve living standards within collective shelters. Alongside the main reports, SNFI has now also created a Photo Gallery on its website depicting the conditions of the assessed collective shelters.
- The SNFI Cluster updated its Readiness and Response Planning. The Cluster also encouraged its members to start designing and preparing readiness plans due to a potential deterioration of the situation in southern Idlib and Jabal Zawiya area that may result in further displacement from these locations toward safer zones. This will create an additional burden on the population and increase overcrowding while the communities are facing a COVID-19 outbreak.
- SNFI Cluster members reported that the projects in northern Aleppo governorate are still ongoing and they were not affected by the frequent IED explosions, mainly in Al Bab, Afrin and A’zaz. Only one cluster members reported that its office was affected by an explosion which broke the glass in the windows, but no casualties were reported. Members were encouraged to engage with the Access Working Group, contact the Cluster, or OCHA, in case their projects are impacted, or if they have any updates to share in this regard.
- SNFI Cluster members are responding to the multiple fire incidents that are occurring repeatedly in IDP sites by providing shelter and NFI support.
- As part of winterization preparations, the Cluster is developing a guidance note to address the needs of vulnerable families (including displaced people, returnees and host communities) during the winter months. The guidance will be published and circulated with members to provide technical recommendations on activities, targeted populations, modalities and costs.

Gaps & Constraints:

- According to a study by HNAP and another NGO partner, facemask usage remains low with only 12% of focal points in northwest Syria reporting that community members wear them, noting that without personal protective equipment distribution, communities often cannot either find or afford facemasks, making it difficult to take this precaution.
• Fuel prices continue to increase and are still changing unsteadily, for example the cost is 4.25 TL per liter of diesel while 3.50 TL for the refined diesel.
• Difficulties continue to find a place to rent. While the availability of houses and apartments for rent has improved over the past month, displaced people reported that the spike in the market has meant that many cannot afford rent. The price of rent is often indexed to the dollar, therefore prices in SYP have significantly increased, putting people at risk of eviction.
• Improving infrastructure in camps and IDPs sites is essential to avoid future floods that happen regularly. These activities include drainage system upgrades and rehabilitating the infrastructure.
• Shelter inadequacies require significant capacity and budget to address, specifically to respond to the inadequacies in collective shelters. As the situation in Syria is still volatile and more people moved to a smaller area in northwest Syria, there are still thousands of families seeking safe and adequate shelters.
• The COVID-19 outbreak created additional burdens on Cluster members to mitigate the risk of transmission. These specific procedures require additional time, staff, efforts and cost in order to ensure appropriate risk mitigations are applied.

Water, Sanitation and Hygiene

Needs:
• The increasing demand is leading to an increase in the prices of soap and detergent for clothes. The increase in price is only for bulk purchases by NGOs, which use these commodities for relief operations. Reportedly, the prices have almost doubled during last three months. Although the retail price for the local population remain the same, the retail market price of soap is expected to increase in the next months.
• As the Syrian Pound is stabilizing against the USD, prices in the local markets are also stabilizing. Despite the stabilization of the exchange rate, the prices continue to remain high in comparison to prices prior to the fluctuation. The diminishing value of the SYP is decreasing the purchase power of local communities, forcing households to re prioritize their needs. As a result, under the same conditions, reliance on humanitarian aid will increase across all sectors in the medium and long term. WASH Cluster member organisations are less susceptible to the fluctuating SYP value as grants are provided in USD.
• Comprehensive life-saving WASH services and supplies are still needed for 370,000 displaced people to ensure coverage. There is a need to increase the operational support to existing piped water systems to handle additional population in communities and in surrounding informal/formal settlements and camps. Attention is needed for ensuring services to returnees.

Response:
• In its overall response, the WASH Cluster has provided safe water supply for over 2.3 million people (infrastructure and water trucking), solid waste management support for some 1.3 million people, and access to sanitation for 458,424 people (infrastructure and latrines). The Cluster has also reached more than 1.7 million people with hygiene kits.
• The ongoing WASH response has reached to 1.3 million recently displaced people in 1,176 locations through 37 Cluster members (82% of the locations responded to are camps, 13% are communities, 2% are collective centers and 3 % are other locations).
  o 529,453 people have received and continue to receive water via water trucking;
  o 631,722 people received solid waste management services;
  o 250,158 people got access new latrines (most of the existing public/community latrines are overcrowded due to an inadequate number of latrines);
  o 512,755 people benefited from hygiene kits (102,551 actual family hygiene kits, each kit being designed for a household of five people);
  o 345,491 people benefited from water purifying agents (Aqua tablets);
  o 456,740 people benefited with the distribution of jerry cans (91,348 jerry cans distributed, two ten litre Jerry cans per household).
• Cluster members continue to respond to people displaced between December 2019 and early March 2020, including with COVID-19 mitigation activities.
  o 83,784 additional people are expected to receive water trucking based on Cluster members’ plans for displaced people;
  o 88,405 additional people are expected to receive solid waste management services – especially in locations with high number of IDPs. This will benefit both displaced and host communities (50 percent host community, 50 percent IDPs).
  o 54,568 additional people benefit from new latrines that are currently under construction.
• 163,600 additional people will benefit from the available hygiene kits (32,720 actual family hygiene kits)
• 125,784 additional people will benefit from available jerry cans (25,156 jerry cans available, each household usually receives two 10 litre jerry cans)

**COVID 19 Response:**
- According to updates from 24 WASH Cluster members in 110 locations to the WASH COVID-19 reporting matrix, 89 percent have changed their response due to COVID-19, 80 percent have increased the amount of water supplied, 83 percent have adapted hygiene promoted activities, 59 percent have increased the amount of soap distributed, and 15 percent have increased the amount of laundry detergent distributed.
- Collaboration between the WASH and FSL Cluster lead agencies continues with actual/planned distribution of soap bars with 720,000 food parcels in northwest Syria from April to October. This is accompanied with Risk Communication and Community Engagement stickers.
- The WASH Cluster lead agency will purchase 1,056,000 soap bars over the next six months, to be delivered to the COVID-19 Awareness Team (CAT) through a WASH Cluster member. 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 establishment of new camps with requisite WASH services. The immediate gaps in 16 sub-districts for 370,000 displaced people are as:
  - 294,597 people need immediate water via water systems and water trucking;
  - 106,589 people need public latrines and sewage network rehab/construction;
  - 40,226 people need recurrent solid waste management;
  - 38,917 people need hygiene kits and hygiene promotion.
- The financial requirement for such humanitarian response is estimated at USD9 Million. An additional cost of USD11 Million is estimated for a six-month response to support the need of an additional 220,000 who may be displaced in case of renewed hostilities.
- No major challenges have been reported with regards to transshipments as the cluster member organizations also use the commercial channels. The Cluster lead agency mostly transshipped life-saving WASH supplies prior to the expiry of previous UN Security Council Resolution on 10 July and has stocks to support the people in need until October 2020.

### Logistics

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

**Response:**
- In August to date, the Logistics Cluster has coordinated the transhipment of 48 Syrian trucks through Bab al-Hawa, facilitating the delivery of 1,065 metric tonnes of Food Security, WASH, Education and Health sector items.
- The Logistics Cluster is working with the relevant stakeholders in the humanitarian community to develop a physical access constraints map of northwest Syria.
- The transhipment hub at Bab al Hawa is being expanded to improve physical distancing.
- The Cluster continues to implement COVID-19 counter-measures at the hubs, including regularly holding workshops on COVID-19 awareness.
- To promote physical distancing, the Logistics Cluster has developed procedures for coordination meetings to continue to be held online. In addition, regular communication of logistics information and updates through a dedicated mailing list continues to be provided.
Constraints:

- Increased lead time for in-transit goods and uncertainty over the availability of medical supplies at local and international markets.
- Road conditions inside certain areas of the northwest are a constraint to truck traffic movements, where road maintenance may be required.

For further information, please contact:
Markus Werne, Head of Office, UNOCHA Turkey, werne@un.org, Tel: (+90) 342 211 8601, Cell +90 535 413 8159
Annette Hearns, Deputy Head of Office, UNOCHA Turkey, hearns@un.org, Tel: (+90) 342 211 8604, Cell +90 535 021 9574

For more information, please visit www.unocha.org | www.reliefweb.int | https://www.humanitarianresponse.info/en/operations/stima