
HUMANITARIAN IMPLEMENTATION PLAN (HIP)

SYRIA CRISIS

The full implementation of this version of the HIP is subject to the adoption of the decision amending Decision C(2014)10012 final and the availability of the relevant appropriations.

AMOUNT: EUR 164 000 000

0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

The violence continues relentlessly inside Syria. More than 16 million people are in urgent need of humanitarian assistance, 12.2 million of whom inside Syria alone. 5.6 million of those are children. In addition, more than 7.6 million people have been internally displaced, of whom around 4.8 million reside in hard-to-reach areas, including at least 440 000 people trapped in areas besieged by either government or opposition forces.

The rapid rise of ISIL (Islamic State of Iraq and the Levant) has further complicated the situation, changing the dynamics and geographical frontlines of the conflict. Widespread retaliatory attacks against civilian populations in areas newly liberated with support of the international coalition are extremely worrying. Likewise, an upsurge in indiscriminate violence in contested areas is having a dramatic impact on civilian populations. Since the beginning of 2015, more than 250 000 persons have been displaced within and across the governorates of Al-Hassakeh, Idleb, Dar'a and Quneitra following violent attacks and aerial bombardments. Many of them have been displaced multiple times, with an unknown number of people living in precarious, temporary arrangements in Aleppo and parts of Rural Damascus. These trends urge the reinforcement of humanitarian contingency planning.

All parties to the conflict persistently have shown an utter disregard for international humanitarian and human rights law, with warring parties blind to the mandatory distinction between civilians and combatants. Violence, including the indiscriminate use of barrel bombs, car bombs, mortars and shelling, continue to cause civilian deaths and injuries.

Health is the most worrying sector in Syria. Facilities have collapsed and the population has almost no access anymore to surgical treatment, post-op rehabilitation, etc. There is a clear lack of drugs and of medical staff in the country. An average of 25 000 people are being injured each month, an increasing number of whom experience complications due to the severe shortage of surgical supplies.

The destruction of water and electricity infrastructure in contested areas is impacting thousands of people (over 700 000 people affected in Aleppo Governorate alone), not only in terms of access to clean water, but also in increasing the risk of the spread of diseases. Similarly, attacks, shelling and bombing have destroyed a number of schools, hospitals and markets, disrupting already scarce basic services needed for peoples' survival.

The capacity of host communities is under immense strain. Reportedly there are increasing restrictions on some roads and access to cities and villages to prevent the arrival of numbers of internally displaced who in some areas outnumber the local population. Providing adequate shelter for this uprooted population is a major concern.

Humanitarian access to people in need in Syria is severely constrained by insecurity, administrative and bureaucratic impediments as well as systematic access denials. There has been an overall decrease in the number of beneficiaries reached through cross-line deliveries, including the denial of life-saving health assistance. Additionally, insecurity and increasing pressures on humanitarian actors to work in and across areas of control under different armed groups are contributing to gaps and delays in humanitarian assistance compared to the rising scale of needs in Syria. Further scaling up of cross border operations is urgently needed to assist the estimated 2 million people in need that can be reached through cross-border assistance deliveries.

In addition to the further rising needs inside Syria, almost four million Syrian people have sought safety in **neighbouring countries** (Turkey, Lebanon, Jordan, Iraq and Egypt). Their governments are facing immense security, social, economic and political pressures in hosting this large number of refugees, with tensions growing towards the refugee communities. As a result, border restrictions have been tightened for persons fleeing conflict and persecution in Syria.

In **Turkey**, the current number of nearly 1.8 million registered Syrian refugees is projected, to rise to 2.5 million in the course of 2015. The large majority of them have found refuge in host communities, with one third (300 000) spread over 25 camps. Insufficient access to health, education, livelihoods, and adequate shelter for off-camp refugees remains of concern, with limited current international assistance and capacity of local actors.

In **Lebanon**, which hosts the largest refugee per capita rate in the world with almost one in four residents being Syrian refugees, the government tightened the previous open-border policy in January 2015. In absence of a clear mechanism to assess the refugees' eligibility according to humanitarian criteria, the borders can be considered *de facto* closed. In addition, refugee registrations have been suspended upon Government request, further aggravating the livelihoods and protection situation.

In **Jordan**, asylum seekers remain stranded at the border with Syria in dire conditions waiting to get access. The number of severely war-wounded refugees that were no longer allowed to enter Jordan unless there was a guarantee that their medical expenses would be covered has almost doubled.

The extra funds under the HIP 2015 (EUR 64 million) will be used to respond to the projected increase in needs in Syria and neighbouring countries and will allow for supporting operations until the first semester of 2016.

1. CONTEXT

The Syrian conflict is having a devastating and lasting impact on Syria and across the region. With the conflict entering in its 5th year, the needs of the affected populations, including 12.2 million people inside the country and almost 4 million refugees, as well as overstretched host communities in neighboring countries, are of an unprecedented scale.

ECHO's Integrated Analysis Framework (IAF) for 2014-15 identified extreme humanitarian needs in Syria and high humanitarian needs in Lebanon, Jordan, Turkey, Iraq and Egypt.

During the last year fighting between NSAGs and governmental forces has continued affecting most of the Syrian territory, especially heavily populated areas. The number of conflict-related deaths has surpassed 220 000 individuals and an estimated one million have been war-wounded. Since 2011 more than 11.6 million Syrians have fled their homes; an estimate that amounts to almost half of the country's pre-crisis population. In 2013, 9 500 Syrians were displaced daily on average, a number that steadily increased to reach 7.63 million of internally displaced persons at the end of 2014. Population internal displacement has taken place in all fourteen Syrian governorates, with many people displaced multiple times. Just over four in five persons are now living in poverty in Syria. Unprecedented balance of payments and trade deficits, a large public debt and budget deficit, soaring inflation, negative savings, low investment, and large-scale unemployment have all produced a massive economic contraction that has left the population bereft and destitute.

Almost all of the 560 000 Palestinian refugees residing Syria are now in need of assistance (UNRWA) and half of them are internally displaced. Palestinians are particularly vulnerable and they often have nowhere to seek refuge. Neighbouring countries have restricted entry and imposed discriminatory measures to Palestinians from Syria.

The situation in Syria is expected to deteriorate further as there are no immediate prospects for a military or political solution to the conflict and the international community is still working on ways forward after the breakdown of the Geneva II process in early 2014. The assumption is that violence and instability will continue to prevail. The apparent involvement of extremist and foreign non-state actors in the fighting in Syria poses a threat to stability in the region and beyond. The international military coalition against the specific threat of the Islamic State of Iraq and the Levant (ISIL) in Syria and in Iraq also poses additional risks to the plight of civilian populations caught in zones of active conflict. Moreover, the dynamics of the conflict within a frame of rapidly changing security conditions, shifting combat frontlines, and extensive aerial bombardment renders access of humanitarian aid and personnel complex and challenging.

As a result, the response to populations' needs has been hindered by the highly volatile security environment, the systematic obstruction of Syrian authorities, as well as the level of fragmentation and ever-changing lines of command among armed opposition groups which impose various conditions to aid agencies and at times prevent aid from reaching civilian populations. More than ever, all available options must be explored to support principled humanitarian operations everywhere inside Syria.

Access to people in need has not significantly improved in spite of United Nations (UN) Security Council Resolution (SCR) 2139 (2014). The fourteenth report of the Secretary General regarding the implementation of Security Council resolutions 2139 (2014), 2165 and 2191 (2014) dated 17 April 2015 relates some improvements in access across borders while aid deliveries across lines remain challenging. Although there have been new openings to increase aid delivery across borders, the scale, scope and outreach of this modality of aid delivery by the United Nations is still insufficient to meet the needs of affected populations.

In addition to the consequences of the conflict in the country, the Syria crisis has morphed into a multidimensional acute and protracted crisis directly affecting several countries in the region – in particular Lebanon and Jordan whose social, economic and structural capacity to deal with the large-scale and prolonged presence of refugees has been stretched to the limits.

The neighboring countries cannot cope with the refugee crisis in the long term without significant support from the international community. This is especially true for Lebanon which hosts over 1.1 million Syrian refugees, and Jordan where Syrian refugees account for 10% of the population on top of an already important presence of Iraqi and other refugees. The two countries now have the highest per capita ratio of refugees worldwide. Such a demographic burden is posing a growing threat to the economic, social and political stability of these states. Turkey is hosting almost 1.8 million Syrian refugees, with an increasingly strong impact on public services and infrastructure. Iraq, in the throgs of its own crisis, is hosting over 248 000 Syrian refugees while trying to cope with 2.8 million new IDPs in the last year; different waves of conflict-affected populations are now in direct competition for meager resources. The refugee situation in Egypt is different from the other countries, as the 134 000 refugees reflect only a small percentage of the total population (85 million people). However, the situation of Syrian refugees is grave due to lack of income, deteriorating living conditions, and the risk of deportation and refoulement that pushes many to adopt negative coping mechanisms, including illegal migration (mostly to Europe, through trafficking networks operating in/from Egypt and Libya).

- Considering the regional dimension of the crisis and its lasting impact, the UN, other international organizations and governments in the region have developed a regional aid strategy that includes humanitarian, development and macro-financial support for both Syrian population inside and outside Syria as well as for neighboring countries and local communities that host large number of Syrian refugees. The importance of strong coordination among aid agencies on the ground must be strengthened, in order to increase efficiency and prevent gaps in the humanitarian response. The Syria Strategic Plan (SRP) has a budget of USD2.9 billion. Following a Whole-of-Syria approach, the Syria SRP integrates humanitarian efforts within the country and across its borders. The 2015-2016 Regional Refugee and Resilience Plan (3RP), with a budget of USD5.5 billion, combines life-saving humanitarian and long-term interventions to help boost the capacities of countries in the region as they continue hosting millions of Syrian refugees. The 3RP aims at providing direct assistance to close to 6 million refugees and host communities. Currently, it is projected that up to 4.27 million refugees would be in countries neighbouring Syria by the end of 2015. The Syria Crisis appeals for 2015 also include programmes of assistance for Palestine refugees in and from Syria with a budget of USD415.4 million.

2. HUMANITARIAN NEEDS

1. Affected people / potential beneficiaries

Inside Syria:

By December 2014, the UN estimate of people in need of humanitarian assistance had jumped from 10.8 million (July 2014) to 12.2 million. This includes 460 000 Palestinian refugees from Syria (PRS) who are in need of assistance according to the United Nations Relief and Works Agency (UNRWA). Similarly some 27 200 Iraqi refugees registered by the UN Refugee Agency (UNHCR) still in Syria are equally affected. In addition to multiple and acute protection concerns, needs range from emergency humanitarian and lifesaving assistance in areas directly and most affected by the conflict, to more sustainable support targeting internally displaced persons (IDPs), host populations and the otherwise most destitute suffering from the collapsing Syrian economy. With limited access and significant restrictions on humanitarian actors to operate inside Syria (lengthy visa procedures, ban on basic data collection, restrictions on coordination, etc.), assessing humanitarian needs is a major challenge.

In neighbouring countries¹²

The 2015-2016 3RP estimates the registration of 4.27 million refugees in Lebanon, Jordan, Turkey, Iraq and Egypt by the end of 2015. Syrian refugees have also been registered in the North Africa sub region albeit in much lower numbers. If current border controls and closures are maintained (i.e. Jordan, Iraq and most recently Lebanon), these numbers are not likely to be reached in full region-wide. At the same time, the end-2015 projections for Turkey were surpassed in first quarter of 2015 following a comprehensive refugee registration exercise conducted by Turkish government authorities.

The breadth of the impact of the Syrian crisis on these countries is also affecting, either directly or indirectly, other refugee populations (i.e. Iraqi, Palestinian, Sudanese, Somali, Eritrean, Ethiopian, etc.). ECHO will aim to support humanitarian interventions targeting all vulnerable refugees irrespective of their country of origin. In the same vein, vulnerable host communities will be included in ECHO actions in the context of the humanitarian response to the Syria crisis as resources allow.

2. Description of most acute humanitarian needs

Inside Syria:

Protection:

The direct conflict-related death toll is estimated at over 220 000 (OHCHR, December 2014). Denials of life-saving humanitarian assistance (e.g., medicines and medical care), indiscriminate

¹ In 2015, unlike previous iterations of the Syria Crisis HIP, support to Syrian refugees in Iraq will be subsumed under the 2015 Iraq HIP.

² Another 23,367 Syrian refugees have been registered across the North African sub region by UNHCR (Morocco, Algeria and Libya)

attacks (e.g. barrel bombings), and continued targeting civilian infrastructure (school, hospitals, markets, etc.) as well as arbitrary and illegal arrests, detention and torture remain of grave concern. Putting an end to grave violations of human rights and International Humanitarian Law (IHL) by all parties to the conflict remains an immediate necessity.

Large segments of the population are severely traumatized by violence experienced, witnessed or feared including killing, maiming, various form of sexual violence, torture, forced recruitment of children into armed forces and groups, and repeated displacement. The mitigation of violence and support in coping with conflict-related and traumatic events is urgently needed. The effects of real or perceived protection threats and their impact on the population's access to livelihoods and services are stark.

Health:

Support to the health sector remains a key priority in Syria. Unfettered access countrywide and through the most direct means possible is needed to bolster the provision and access to high standard health services all over the country despite the collapse of the health care system.

War wounded and injured are in need of quality operative and postoperative care as well as rehabilitation services while the removal of injectable medicines and surgical equipment by the Government of Syria from otherwise sanctioned interagency convoys is a recurrent problem.

The children's vaccination campaigns (including polio and measles) in 2014-2015 have achieved some notable success but with coverage still partial in contested, besieged and hard-to-reach areas. Building upon this relatively positive example, here is a clear and growing need to further pursue the Expanded Program on Immunization (EPI) and in particular for measles. In addition, monitoring mechanism of health situation in the country needs to be strengthened in order to ensure timely and adequate response.

Addressing women's reproductive health as well as treatment for chronic conditions and mental health in a context of widespread shortages of medical personnel and drugs is particularly challenging.

Food and livelihoods:

People's livelihoods and their coping mechanisms have been severely eroded. All Syrian economic sectors have been affected with dramatic macroeconomic consequences and ever-rising unemployment. About 2.96 million persons have lost their jobs during the conflict, and the loss of income has affected the welfare of approximately 12.22 million dependents. Private consumption, a direct measure of household welfare, contracted by 11% in 2014 compared to the previous year, and by 41.7% compared to 2010 levels. In response to nose-diving revenues, the Government slashed subsidies and cut costs across public services. These translated in a jump of 22% in the prices of basic commodities like bread, sugar, and fuel in the last quarter of 2014.

Shortfalls in food production due to conflict as well as market access disruptions and high fuel and transportation costs put additional pressures on prices for food and basic commodities. The 2015 Syria Response Plan (SRP) estimates that 9.8 million are food insecure; of which 6.8 million are estimated to be in severe need. While 4.5 million individuals are targeted for monthly food assistance (4.1 million directly by WFP), regular delivery is affected by insecurity and

frequent movements of population due to conflict. The situation is further aggravated by limitations on access due to bureaucratic impediments, border restrictions and closures and armed conflict. Another major risk is insufficient funding to assist a growing caseload over a prolonged period of time as well as food price increases on international markets.

Water and sanitation (WASH):

The disruption of water services and the use of water as weapon raises the spectre of water scarcity (both in terms of quality and quantity). This is especially true in areas such as Deir-ez-Zor, Aleppo, Idleb, Hama, Dar'a and Rural Damascus. Water shortages are also having a negative impact on food security and health.

Shelter and non-food items (NFI):

The intense use of shelling and heavy weaponry in urban areas has destroyed entire neighborhoods. With fuel price hikes and the constant attacks on infrastructure, the disruption of electricity supply is generalized.

The capacity of communities to host IDPs (more than 7.63 million persons) is exhausted as household savings are consumed over lengthy and multiple displacements. Overcrowding and unhygienic conditions, including in some 900 communal shelters across Syria as well as in camps along border areas require substantial efforts to establish minimum standards.

In Lebanon:

Protection

The Government of Lebanon closed its borders in January 2015 and introduced additional restrictions on refugees. At the same time, the situation for 42 000 PRS who are refused freedom of movement outside camps is dire. Upholding the tenants of Refugee Law while acknowledging the tremendous efforts Lebanon is making to sustain 1.1 million refugees on its soil is essential. Lebanese authorities have defined the categories of Syrians allowed to enter the country, including persons carrying out business and commercial activities, study, medical treatment, transit, and individuals with a Lebanese sponsor, among others. Refugees from Syria are only admitted under exceptional humanitarian grounds. The determination of these grounds, under the authority of the Ministry of Social Affairs (MOSA), remains unclear. UNHCR and partners continue advocating for the inclusion of cases with fear of persecution and acute vulnerabilities.

In May 2015, the Government of Lebanon requested UNHCR to suspend the registration of refugees; which has triggered important protection concerns for those refugees who arrived in the country in 2015 and those whose registration needs regularization and/or renewal. In the first quarter of 2015, UNHCR had registered close to 38 000 Syrian refugees, a 75% drop from the same period in 2014. It is estimated that by the end of 2015 the number of refugees without legal status (either because they entered illegally or because they did not renew their residency) and stateless persons will reach close to half a million. In addition, the attribution of limited legal status to refugees is still unresolved, subjecting refugees to arrest, detention and restrictions on their freedom of movement as well as access to basic services. Advocacy and engagement with the Lebanese authorities should be actively maintained to ensure the application of humanitarian exceptions to those fleeing the violence in Syria, the timely deployment of MoSA teams at

border points, and the need to maintain refugee registration mechanisms that allow for effective refugees' protection and right for assistance in accordance with international standards.

Persons with specific needs, including but not limited to early detection and response to SGBV as well as child protection, are also of concern. The Lebanese Armed Forces (LAF) carry out regular security operations, especially in the Bekaa Valley, in an attempt to dislodge NSAGs from border areas with Syria. As part of these security measures, the LAF conducts evictions at refugees' informal settlements in Bekaa. Since early 2015 close to 6 000 refugees have been evicted from 31 sites and UNHCR estimates that about additional 6 400 persons risk eviction in the first half of 2015³.

Health:

The unprecedented refugee influx in Lebanon is putting severe strain on the already weak Lebanese healthcare system that is mostly privatized and expensive to access. On a monthly basis, more than 65 000 refugees receive primary health care and 4 000 refugees access emergency and life-saving care through secondary health care providers. In a context of reduced funding coupled with the health needs of a growing population, access to health care is inadequate and needs improvement. Restrictions on freedom of movement, narrow coverage of health conditions under existing support mechanisms and particular limitations for unregistered refugees necessitate a critical review of the system.

Food and livelihood

The 2014 multi-sector vulnerability assessment found that three-quarters of households showed some degree of food insecurity, with 13% facing moderate or severe food insecurity. Deteriorating food security levels were observed in 2014 compared to 2013, with 7% less food secure households than in 2014. Akkar region showed the highest percentage of severely and moderately food insecure households whereas Beirut-Mount Lebanon had the highest percentage of food secure ones.

Two-thirds of households experienced lack of either food or money to buy food during the month prior to the survey; which represents an increase of 48% compared to the results of the 2013 assessment. Almost all households facing food shortages relied on less preferred or less expensive food, reduced meal sizes or number of meals per day to compensate for the shortages. Also, 30% of households that experienced lack of food or money for food resorted to other mechanisms; such as reducing education or health expenses, and 12% in emergency coping strategies like engaging children in income-generation activities. Purchasing food was the major food source. Food vouchers were reported as the main food source by 41% of households, significantly more in the Bekaa Valley and Akkar and less common in Beirut-Mount Lebanon and Tripoli areas.

The majority of households (82%) borrowed money or received credit in the three months prior to the assessment, ranging from 88% of households in the Bekaa Valley to 74% of households in Beirut-Mount Lebanon. Main reasons for borrowing money or receiving credit were to buy food

³ LAF follow three main criteria when executing the evictions; namely, the site is located close to the Syrian border, within a 500-metre radius to LAF checkpoints, or in the proximity of supply routes to military facilities.

(73%), to pay rent (50%) and health expenses (31%). About 80% of families had some debt; with half of them having debts of USD400 or more. Both the number of households in debt and level of debt increased compared to 2013.

In general, living conditions of Syrian refugees in Lebanon have deteriorated over the previous year, despite ongoing assistance. Household income and work, mostly restricted to temporary jobs, is insufficient to cover monthly expenses. Savings and available assets are increasingly depleted, forcing families to engage in a variety of coping strategies to meet their basic needs. Food vouchers, and to a lesser extent loans and credits, have increasingly become key livelihood sources for households – indicating their rising dependency on external aid and support.

The number of extremely vulnerable households in need of assistance to meet basic needs (based on the established socioeconomic vulnerability index) is expected to reach 74 000 by end 2014. Funding constraints have so far limited the provision of assistance to a maximum of 15 000 households.

Shelter/WASH

The sheer number of refugees present in Lebanon, and in need of shelter with host communities has exhausted the available supply of housing. Refugees are forced into improvised shelter solutions (such as informal tented settlements (ITS) (15%), garages or unfinished buildings (28%) with no privacy and limited protection to climatic hazards. More than 80% of refugees pay rent. Overcrowding in inadequate shelter solutions is of growing concern also in relation to access to adequate water and sanitation. Minimum Sphere Standards are not being met.

In Jordan:

Protection

The protection space for refugees and asylum-seekers in Jordan has shrunk considerably since 2014. While the return of refugees' Syrian identification documents and paperwork has been a positive development, the challenges posed by the renewal of Ministry of Interior (MoI) identification cards are significant. UNHCR has been instructed by the government to stop the registration of refugees that left the camps illegally. Access to documentation and freedom of movement is becoming increasingly problematic and is having a negative impact on access to basic services and food/livelihoods.

Other protection concerns in Jordan include early marriage, child labour, commercial sex work and other dangerous coping mechanisms. Violence (including gender based violence), within the society and within households, is also cause for concern.

PRS are not permitted to enter Jordan. UNRWA is assisting 14 348 PRS and estimates that at least 20 000 will enter Jordan illegally by the end of 2015. Deportations and refoulement (with some 40% of PRS at risk) and restrictions on freedom of movement are extremely worrying.

Health

The refugee crisis has put enormous pressure on the Jordanian health system. Syrian refugees are granted access to Ministry of Health (MoH) supported services. A minority of Syrian refugees in

Jordan, that are either not registered with UNHCR or are registered refugees without a valid MoI card, are obliged to pay un-subsidized fees at MoH facilities.

In the Za'atari and Azraq refugee camps, primary health care, mental health and secondary health services are well covered. However, gaps in the organization and support to medical referrals and emergency care are widening as humanitarian funding decreases.

Food and Livelihoods

While approximately 16% of the more than 627 280 Syrian refugees live in refugee camps, the remaining 84% reside outside camps in both urban and rural areas throughout the country, a slight increase from the 80% recorded in 2013.

The protracted nature of the crisis is resulting in high levels of economic vulnerability amongst Syrian refugees with two out of three living below the Jordanian absolute poverty line of USD96/month. Average monthly expenditures in refugee households almost double their income; forcing them to seek alternative survival strategies (e.g., remittances) and, in some cases, negative coping mechanisms, such as illegal work, child labour, and early marriages. (UNHCR, January 2015). Rent is the largest expense for refugee households, comprising over half their monthly expenditure. Food is the second largest expenditure, comprising one-quarter of household's monthly expenditure on average.

Overall, refugee households' out-of-pocket expenditure on food decreased between 2012 and 2014. A rising number of refugee families are spending less than USD71/month on food (73.7% in 2014 compared to 67.1% in 2013). Borrowing food and money for food, purchasing food on debt, selling assets, and skipping meals have become increasingly commonplace practices among urban refugee families. The latest WFP Comprehensive Food Security Monitoring Exercise found that 85% of refugees are either food insecure or vulnerable to food insecurity and depend on the WFP voucher to meet their food needs. Following the shift from blanket to targeted food assistance in October 2014, WFP undertook an additional targeting exercise in March 2015 to cover about 430 000 refugees living under the poverty line with monthly food vouchers.

The trend of worsening livelihoods is mainly linked to restrictions on access to the job market, irregular and often illegal employment opportunities, and the imposition of paid basic services such as healthcare. The results are increasing expenditure-income gaps, levels of household debt and aid dependency. Refugees who are unregistered are in a particular situation of vulnerability. Growing indebtedness is also a trend among poor Jordanians, reeling from subsidy reductions and increased prices.

Wash

Jordan suffers from chronic water shortages, particularly during seasons when demand increases. For refugees living within the host community, particularly for those living in informal settlements and sub-standard housing arrangements, access to water, sanitation and solid waste disposal remains problematic.

In the Za'atari refugee camp, continued incremental developments of the water and waste management systems, already in place, will need to continue. As Azraq refugee camp continues to grow in 2015, further WASH infrastructure development will be required.

Shelter and non-food items (NFI)

Competition for limited housing continues to cause inflation in the Jordanian rental market. For vulnerable Syrian, Iraqi and other refugee groups as well as poor Jordanians, eviction is a real risk. Rent costs have been one of the main concerns of Syrian refugee families living outside camps since the sharp increase in rental prices in 2012-2013. In the overcrowded Jordanian housing market, rent costs are high, even if in 2014 they remained relatively stable in the larger cities (e.g., Amman, Karak) and rose slightly in other areas.

As of May 2015, Za'atari refugee camp hosts an estimated population of 85 000 with limited spare capacity both in terms of space and administration. Azraq camp, with an initial service infrastructure for 30 000 people and a maximum planned capacity for 130 000, has a population of 18 000. UNHCR estimates that the maximum manageable population in Azraq should not exceed 55 000 refugees.

In Turkey:

Protection

Protection concerns range from the fundamental need to maintain safe access to Turkish territory, to general cases of psychological trauma, sexual and gender-based violence, early marriage, child labour, unaccompanied and separated children. Half of the refugees are children.

Health

Health concerns related to off-camp refugees include increased risk of communicable and non-communicable diseases and often problematic access to health services including specialized care and medicines for chronic conditions. Despite a decree on free health care for refugees health facilities are known to require payment for services. Language and transportation are also impediments for many refugee families. Even when applied, the decree does not imply gratuity of all services and drugs. Furthermore, care for the chronically ill, access to tertiary health care, physical rehabilitation and post-emergency follow-up treatment is particularly problematic.

Food Security and Livelihoods

While food security is largely assured for Syrians living in camps due to the humanitarian assistance provided by WFP, the Turkish Red Crescent (TRC) and the Turkish National Disaster Management Authority (AFAD), the food security of off-camp Syrians is much less certain. As families are becoming increasingly destitute as their resources get depleted, external support is scarce and access to the job market is uncertain. The administrative regulations applying to the law granting Syrian refugees the right to seek employment are still pending Parliament approval.

Shelter/NFI

Many non-camp refugees are renting accommodation and may face eviction as savings are depleted particularly in light of high rental costs and limited legal services. The government of Turkey estimates that one out of four non-camp refugees live in inadequate conditions or in an open area, and 62% live in overcrowded and poor housing.

In Egypt and other potential affected countries

Since mid-2013, Egyptian authorities have tightened measures to control the entry of foreigners into the country; most notably affecting people coming from conflict-affected Syria and Palestine. With the escalation of the crisis in Libya, these measures have extended to the closure of border points between the two countries leaving stranded an unknown number of people who were seeking refuge in Egypt. Restrictive visa regulations, controls at border crossing points, administrative requirements for residency permits, and other measures to control the entry of foreign nationals have also affected a large number of Syrians and Palestinian refugees from Syria. In a context where many refugees, asylum seekers and migrants face detention, deportation as well as increasing difficulties to make ends meet, Egypt is likely to continue grappling with a growing number of people taking risks to reach Europe via sea, through smuggling and trafficking networks.

The Government estimates that the number of Syrians in Egypt is as high as 400 000. By May 2015, UNHCR had registered 134 329 Syrian refugees. According to UNRWA and the Palestinian Embassy in Cairo up to 6 000 Palestinian refugees from Syria are in the country. Difficult socio-economic conditions and a general deterioration of the security environment due to political instability are having a detrimental impact on Egyptian citizens, refugees and asylum-seekers alike. Of particular concern, a majority of Syrian refugees are unregistered and many for fear of reprisal upon return to Syria. Syrian Palestinians are not permitted to register at all although some assistance solutions in health and food vouchers were have been organized since 204 for the poorest families. In addition, the trafficking and smuggling of refugees and asylum-seekers from and through Egypt remains a serious protection challenge, which in turn may lead to detention, deportations, refoulement or the dangerous passage by sea to Europe.

As a result, the protection of refugees and asylum seekers and the provision of basic assistance for the most vulnerable are overarching priorities for humanitarian organizations working in Egypt today. Prevention of refoulement, redressing and preventing arbitrary detention and ensuring due legal process for crime victims among the refugee population are some of the most urgent issues being addressed by UNHCR, IOM and partners in cooperation with Egyptian authorities. Concerns about conditions of refugees in detention, especially children and women are paramount with cases of restricted access to detention places despite receiving authorizations. Authorities in Alexandria have recently allowed the provision of basic assistance for those in detention through national NGOs/organizations. However, refugees' hunger strikes to protest their conditions continue taking place at Egyptian police stations. In addition, main difficulty facing refugees in Egypt is the lack of livelihood opportunities and a cycle of increasing poverty. The pursuit of durable solutions, expand livelihood activities and other income-generating schemes for refugees and asylum-seekers in Egypt of different nationalities; located in urban settings is an overarching priority.

3. HUMANITARIAN RESPONSE

1. National / local response and involvement

Inside Syria:

The Government of Syria regulates the humanitarian response in country through a number of mechanisms, including the MoU application, specific visa requirements for aid workers, procurement and transportation regulations, to authorization for Humanitarian stakeholders on both temporary and permanent field presences i.e. monitoring visits, opening of sub-offices and hub.

While some line ministries and governorate authorities have offered more flexible operational opportunities, the overall humanitarian aid system remains subject to important, centralized restrictions and controls.

The bulk of the response to the most vulnerable is provided by the Syrian population itself that has shown remarkable solidarity from the very beginning of the conflict. Local councils, civil society organizations and Syrian NGOs are also heavily involved in facilitating humanitarian assistance across borders with neighboring countries.

The Syrian Arab Red Crescent (SARC) plays a central role in the humanitarian response led from Damascus, through its 14 governorate branches, 80 sub-branches and network of volunteers. SARC is the main actor in the distribution of relief assistance, and with WHO the main provider of emergency medical care through mobile and fixed clinics as well as ambulances in affected areas and rural locations. Although reinforced since 2013, SARC's capacities to respond are under constant pressure and the organization relies on a wide network of local charities and associations for the preparation and implementation of relief operations. Syrian authorities have accepted that international actors start operating directly with other local NGOs and CBOs, but scaling-up of both outreach and partnerships is slow and still limited to UN agencies. Capacity building of the local actors requires extensive efforts, especially when it comes to effective and transparent management of the operations as well as capacity to deliver quality services.

In Lebanon:

Amid recurrent political crises, the Government of Lebanon has struggled to play a leading role in the response. The structural difficulties faced by the Ministry of Social Affairs (MoSA) in charge of the coordination of the humanitarian response have entailed a considerable challenge for the development of a strong leadership role

Local authorities have been on the front line of the response despite structural financial difficulties. However, efforts undertaken by the Government to mobilize the international community to enlarge the scope of the response to local communities and support the provision of basic services have so far had limited results.

In Jordan:

The Ministry of Interior (MoI) is responsible for all refugee related issues in Jordan, including those related to PRS. The Syrian Crisis Response Platform and the Jordan Response Plan, intended to merge the UNHCR Regional Response Plan and National Response Plan, are the main coordination, planning and funding appeal document for the period 2015-2016. The

responsibility for Syrian refugees outside the camps lies on the Jordan Hashemite Charity Organization (JHCO).

The Minister of Planning and International Cooperation (MOPIC) approves humanitarian aid projects of humanitarian partners in coordination with relevant line-Ministries. With the launching of the National Resilience Plan (NRP), requirements from MOPIC for approvals have become more restrictive and bureaucratic, resulting in long delays in implementation. The most controversial requirement is the inclusion of Jordanian vulnerable families, as beneficiaries of projects targeting refugees, in a proportion that, in some cases, can reach 50% of the total targeted beneficiaries.

Throughout 2014 and since the beginning of 2015, Jordanian authorities have controlled access to Jordan for Syrians fleeing the conflict. Entry into the country is tightly scrutinized, open only to a small number of refugees after passing multiple security screenings. On the eastern section of the border, Syrians seeking to enter Jordan have been stranded in the no man's land between the two countries at regular intervals since mid-2014. In April-May 2015, estimates of those stranded vary from 1 100 to up to 2 000, with the majority being women, children, and the elderly, many suffering from extreme exhaustion and sickness. Moreover, continuous military operations in southern Syria, triggered an increase in the number of war wounded arriving at the border with Jordan since late 2014. Stringent screening procedures at border points only allowing the entry of small numbers per day and the application of ad-hoc criteria for allowing entry are of clear protection concerns.

Refugees, with the correct paperwork, are given free access to the Jordanian health and education systems.

In Turkey:

The Government of Turkey, primarily through the AFAD and the TRC will continue to manage 25 and potentially more camps that provide basic services to 220-250 000 Syrians out of 1 750 000 estimated in Turkey, at a reported cost of about EUR 650-700 000/day, amounting to over EUR 230 M/year.

While AFAD will likely continue its key role on the behalf of the GoT, the newly formed Directorate-General for Migration Management (GDMM) is envisaged to take over responsibility with regard to registration and other assessment/profiling related responsibilities. In addition, the GoT formally offers free access to its public education and health system for off-camp refugees, albeit with limitations. Municipalities at the province and district level offer key social services for refugees while local communities and associations continue to host most of the off-camp Syrian population, now present in almost all provinces in Turkey. Many Syrian and Turkish NGOs support relief efforts in partnership with international humanitarian aid agencies.

In Egypt:

There are no camps in Egypt; the vast majority of Syrian refugees live in urban settings renting and sharing accommodation. A large number of refugees, particularly those living in the poorer urban areas received assistance from local charities until the wholesale crackdown on charitable organizations during the course of 2013. In 2014, UN agencies gradually restore assistance

programmes and expanded some interventions; although partnerships with international and local NGOs and CBOs as well as reinforcement of key activities of assistance are still required.

For registered refugees, the Government has opened up access to the state-run education and health systems. However, public schools are reported to be over-crowded and whilst health consultations are free, at least 50% has to be paid for medicines together with a percentage of any operating costs.

2. International Humanitarian Response

The 2015-2016 Syria Crisis appeals request over USD8.4 billion to meet the needs of 18 million people in Syria and across the region. The Syria Strategic Plan (SRP) has a budget of USD2.9 billion. Following a Whole-of-Syria approach, the Syria SRP integrates humanitarian efforts within the country and across its borders.

The 2015-2016 Regional Refugee and Resilience Plan (3RP), with a budget of USD5.5 billion, combines life-saving humanitarian and long-term interventions to help boost the capacities of countries in the region as they continue hosting millions of Syrian refugees. The 3RP aims at providing direct assistance to close to 6 million refugees and host communities. It is projected that up to 4.27 million refugees would be in countries neighbouring Syria by the end of 2015. The Syria Crisis appeals for 2015 also include programmes of assistance for Palestine refugees in and from Syria with a budget of USD415.4 million.

The neighboring countries cannot cope with the refugee crisis in the long term without significant support from the international community. Such a demographic burden is posing a growing threat to the economic, social and political stability of these states.

Inside Syria:

In areas of Syria under government control, UN Agencies have better direct access to affected areas than INGOs although consistent access to affected populations remains a significant challenge. UN Agencies can have sub-offices, can operate with local NGOs/CBOs in addition to SARC and can deploy staff members to accompany interagency convoys whereas INGOs cannot. The number of registered INGOs operating in Syria from Damascus is extremely limited relative to the scale and scope of the crisis. And this small group of INGOs only have limited capacity to operate, including a very limited number of international staff.

Questions abound regarding the accountability of remotely managed operations conducted in such a volatile operating environment. Most actors aim to follow the regular project cycle from its assessment phase to post-distribution monitoring with direct access to beneficiaries, however there are significant challenges. Greater emphasis on innovative solutions need to be further developed and negotiated for both Damascus and cross-border operations.

Coordination and sharing of information remains weak and irregular in Damascus and planning is made worse by limited assessment possibilities by humanitarian actors. Overall, adequate qualitative and quantitative data is missing. Joint initiatives between the various agencies and INGOs present in Syria shall be promoted.

The majority of the humanitarian assistance delivered cross-border to mostly opposition-controlled areas is being provided by international and Syrian NGOs. At the time of writing, UN cross-border operations have only just begun, but may increase in scale and scope over time. Coordination of cross-border operations, although well developed in Southern Turkey and to a lesser degree in Jordan, is still not fully harmonised with the IASC transformative agenda and needs to be further reinforced at sector level. The current coordination system in place in Southern Turkey for cross border operations relies on NGOs chairing sector working groups. With the UN Security Council Resolution 2165 and the adoption of the Whole-of-Syria approach in late 2014, the activation of a full cluster system is underway.

Although the level of 2014 humanitarian funding to Syria in 2014 reached unprecedented USD2.2 billion, humanitarian needs have grown extensively due to a marked escalation and protracted nature of the conflict, the failure of basic social services, deepening economic instability, increased vulnerability and poverty of the population.

In Lebanon:

UNHCR is leading the inter agency coordination for Syrian Refugee Response while UNRWA is in charge of the coordination for the assistance to Palestinian Refugees from Syria (PRS). Sectoral coordination relies on working groups (Education, Protection, Health, Shelter, WASH, Food, NFIs).

Under the leadership of the HC/RC a document called “the Lebanon Crisis Response Plan of the 3RP” is being developed. The document which is defined as a 2 pillar-approach (one pillar for refugees and one for host communities) is the strategic framework for the response in Lebanon.

In Jordan:

In 2013 the United Nations created the position of UN Resident and Humanitarian Coordinator (RC/HC) in Jordan.

The Ministry of Planning and International Cooperation (MOPIC) established the Syrian Crisis Refugee Platform (SCRCP) as the new coordination structure for the implementation of the Jordan Response Plan (JRP) that merged the former RRP and NRP starting 2015. Sector working groups to coordinate the refugee response and agree on common strategies are functioning in the areas of Cash Assistance, Education, Food, Health (divided in sub-sectors for Mental Health, Nutrition and Reproductive Health), NFIs, Protection (with sub-sector working groups for Child Protection and SGBV), Shelter and WASH.

UNHCR leads the Inter Agency Task Force (IATF) and the RC/HC the Humanitarian Country Team. Both platforms are inclusive of stakeholders, including donors. The Inter-agency Task Force is the main coordination forum for the refugee response in country. On the other hand, the Cross-border Working Group chaired by OCHA coordinates the delivery of cross-border humanitarian assistance to Syria from Jordan under the framework of UN SC resolution 2165 and 2191 (2014).

In Turkey:

UN agencies have actively supported GoT efforts in the camps, including Shelter, WASH, Health, Food/Livelihoods, Protection, Education and logistics/transportation services. This has been critical to ensure continued services at times higher than with international standards. Furthermore UN agencies along with the European Commission, some EU member states and other international actors are engaged in offering technical assistance to AFAD, GDMM and the line ministries implicated in the response with a focus on resilience and the search for durable solutions.

INGOs have been the forerunners in the international off-camp humanitarian response covering a wide geographic area in partnership with local NGOs in the south-east of the country, but also Istanbul and other big cities. UN agencies and IOM are also incrementally engaging with the response to off-camp refugees.

Inter-agency and sector-based coordination mechanisms have been established under the leadership of UNHCR for the response as of late 2013, each sector being led by designated agencies, a positive development for the response.

In Egypt:

The 3RP - Country Plan for The Arab Republic of Egypt aims to strengthen protection and support for Syrian refugees and host communities. Targeted assistance focuses in the areas of food, health, education, livelihood and basic needs, along with interventions to enhance the outreach to the community and strengthen service delivery systems in governorates most impacted by the presence of refugees (e.g. Giza, Greater Cairo, Alexandria and Qalyubia). Across sectors, the resilience component of the plan focuses on bringing together humanitarian and resilience-based responses to achieve common objectives. Assistance programmes within the 3RP also include non-Syrian refugees and asylum seekers of other nationality groups; such as Iraqis.

3. Constraints and ECHO response capacity

Dire financial constraints emerged in 2014 and are likely to remain one of the characteristics of the response. The humanitarian operation should continue to make efforts to improve cost efficiency. Increased reliance on cost efficient aid delivery mechanisms such as targeted approaches, unconditional cash through a one-card system, improved geographical coordination, promotion of integrated approaches, closer working relationship with local actors or improved channeling of funding to limit costs should be pursued.

The prolongation of the Syrian crisis will increasingly affect the stability of neighboring countries. The international community's response should go beyond addressing humanitarian needs of Syrian refugees to support local authorities and vulnerable host communities. Increasing the involvement of all development actors to the response has become critical. It is important that synergies with development funds are fully exploited to secure rapid impact.

Inside Syria:

Access and the spread of violence and insecurity remains the main constraint faced by humanitarian organizations working in Syria with difficulties to ensure proper needs assessment, aid delivery and monitoring.

The difficulty of establishing a “whole-of-Syria” needs, response and gaps analysis is another main constraint faced by both implementing partners and donors.

ECHO resumed its non-permanent presence in Damascus in early 2014. More regular ECHO presence will be sought to inform ECHO’s understanding, planning, and monitoring capacities as well as to provide more support to partners.

In Lebanon:

Sudden deterioration of the security environment is a permanent concern for the humanitarian community. Recurrent episodes of violence in the north of the country might compromise access to areas hosting a large number of refugees and poor Lebanese communities.

In Jordan:

There has been a noticeable reduction in humanitarian space in Jordan during 2014 with agencies finding it increasingly challenging to secure approval for projects via the MoPIC process.

In Turkey:

The absence of a clear national policy regarding assistance to off-camp refugees has impacted the coherence and pace of a much needed response slowing down the design and implementation of certain sector specific responses notably those borne by UN agencies.

In Egypt:

Borders remain closed with major issues for family reunification. While the growing number of Syrian refugees attempting the perilous journey to Europe by boat face arrest, detention, deportation and refoulement. Generalized absence of protection space for Syrian refugees and PRS including difficulties with access to employment (and risk of exploitation / trafficking), education and health compounded by negative propaganda and perceptions of discrimination within segments of the host community.

4. Envisaged ECHO response and expected results of humanitarian aid interventions:

ECHO's response will not be sufficient to cover all of the most urgent needs in Syria and in the region. Therefore, life-saving activities will be prioritized and partners will be required to clearly define targeting criteria and set priorities so as to ensure that the most vulnerable are assisted first. Contingency planning and preparedness (stocks) will be considered to enable partners to react rapidly to new displacements in 2015.

In addition, ECHO will support protection interventions, including those protection activities that are mainstreamed within other sectors of life-saving assistance, and which aim at addressing specific protection risks.

Inside Syria:

ECHO's response will not be sufficient to cover all of the most urgent needs in Syria. Therefore, health, wash and protection activities will be given the highest priority and partners will be required to clearly define targeting criteria and set priorities so as to ensure that the most vulnerable are assisted first.

ECHO will support in priority actions located in underserved areas from Damascus, cross line or cross border operations as most appropriate. It is expected from partners to provide an all-of-Syria analysis in their proposals and justification, including costing, for the choice of modality.

In the context of a crisis where direct implementation is minimal, particular attention will be paid to the ability and capacity of partners (or its implementing partners) to safely and impartially deliver humanitarian assistance with the appropriate analysis of the needs of the population targeted and control mechanisms in place. Strong emphasis on humanitarian analysis, from assessments to, implementation and monitoring of activities will be considered as a corner stone of ECHO supported operations. This includes as well emergency response capacity, including contingency planning and preparedness and rapid response mechanisms, as well as the trainings put in place to improve the security capacities of the national personnel.

ECHO encourages and will expect partners to participate in all relevant coordination mechanisms and to contribute to information sharing, gap analysis, planning and operations implementation (whether in Syria or from neighboring countries).

Health:

ECHO will focus on improving access to quality health services with a specific attention to war victims. ECHO will consider support to provision of primary and secondary health care as well as treatment for life threatening conditions for conflict affected population. Strengthening of fixed and mobile medical (referral system) units at local level will be set as a priority through the supply of medical equipment, medicines, and vehicles, as well as training capacity.

ECHO will support epidemiological surveillance and Early warning systems, as well as contingency planning for timely reaction in case of epidemic. Response to the needs of displaced people affected by chronic diseases, and provision of rehabilitation services for war wounded and injured people will also be considered.

ECHO is also interested in supporting humanitarian interventions that will significantly increase the availability of reproductive health services to address the needs of women and girls by facilitating access to safe delivery, emergency obstetrical services, family planning and GBV services.

Concerning mental health and psychosocial support, ECHO will support operations that address the special needs of individuals suffering from pre-existing and new mental health conditions including patients in psychiatric hospitals for both health and protection reasons.

Water and sanitation:

ECHO will support projects that aim to ensure adequate and sustained access (in terms of quality and quantity) to safe water. This includes project that will provide proper running of existing

infrastructure (maintenance plan, supply of spare parts and capacity building) and rehabilitation of water supply and sanitation infrastructure damaged by the conflict.

Provision of chemical water treatment of water, basic NFIs and appropriate hygiene promotion are also encouraged.

ECHO will also support WASH contingency plans to cover the needs of sudden and massive displacement or/and in response to any disease outbreaks or shortage in water access.

WASH coordination amongst actors / local authorities and with other Sectors such as Health requires continued improvement to face the developing needs and challenges.

Protection

It is vital to provide efficient protection to civilians, detainees, the sick and wounded, medical and humanitarian personnel and vulnerable or at-risk groups requiring specific attention such as children, the elderly, migrants or persons with disabilities.

ECHO will support protection initiatives designed to address protection risks and violations either directly or in an integrated manner through other programme activities and protection sensitive targeting. Decisions on specific activities to support will be based on a clear analysis of protection threats and vulnerabilities. Possible areas to support include, but are not necessarily limited to: access to documentation and freedom of movement, family separations, as well as assistance to victims of all kinds of violence (including SGBV). ECHO expects that all interventions (no matter what sector) adhere to basic protection mainstreaming principles of safe and equal access as well as appropriate considerations for special vulnerabilities.

Food and livelihood:

ECHO will concentrate on the provision of assistance aimed at restoring and maintaining an adequate diet for populations already in and at risk of food insecurity through in-kind, voucher or cash support as the most relevant and efficient transfer modality.

The size and scale of the humanitarian situation in Syria calls for a strong food security information system (FSIS), necessary for an effective, rapid and coordinated response.

Shelter and NFI

ECHO will support the provision of adequate shelter for all those who are displaced and those whose housing has been destroyed. Activities related to the rehabilitation of existing housing, or other forms of shelter support will be considered.

ECHO could also consider the provision of basic non-food items for households that have fled from their place of origin.

In Lebanon:

ECHO will aim to support humanitarian interventions targeting all refugees in Lebanon irrespective of their country of origin (e.g. Palestinian, Iraqi, etc.)

ECHO also remains committed to monitoring the evolution of the existing tensions between the refugees and the host communities which are exacerbated by the deterioration of the security, social and economic situation and the high burden on public services.

Protection

Registration capacity will need to be maintained and obstacles to registration addressed in a comprehensive manner.

ECHO will prioritize counseling and legal services to refugees. Protection monitoring at borders and possibly check points may help mitigate the risks of abuse as the number of refugees without proper documentation increases.

Identification and services for people with specific needs will remain important as will support to community services targeting women and children including outreach to victims of sexual violence, psychological trauma and distress.

Health

ECHO will focus on secondary health care while encouraging a more cost efficient approach to hospital care, as another EU financial instrument – the Instrument contributing to Stability and Peace (IcSP) - is currently supporting primary health structures to cope with the increased demand particularly for mother and child care services, chronic diseases and reinforcement of the epidemiological surveillance system.

ECHO focus will be on improving the rationalization of health care (building form the access to health care survey and the mapping of the structures).

ECHO is willing to look into parallel systems as a mean to reduce the cost and improve the quality of the current response.

The provision of rehabilitative services and responding to the needs of people living with disabilities and/or special needs are also among the ECHO's health priorities in Lebanon.

Multi assistance package

ECHO will focus its support on most vulnerable refugees to meet their basic needs, defined as the minimum expenditure basket. ECHO is committed to supporting the most cost efficient system to deliver assistance in line with the recommendations for an optimal operational set-up to include using WFP cards, limiting the number of partners and enhanced geographic coordination.

ECHO will therefore encourage support through multi-purpose cash assistance to be channeled through a single modality (i.e. one-card).

Assistance may be extended to non-registered refugees reluctant to register because of protection concerns.

Assistance to new comers remains relevant insofar as partners have the demonstrated capacity to identify and assist new comers in real time. Provision of assistance is conditioned to strict adherence to standard operating procedures developed by the NFI working group. Assistance to new comers will remain ECHO's main channel to respond to large and sudden influx of refugees.

Shelter/Wash

Shelter interventions in Lebanon are complex and challenging. ECHO will continue to focus on supporting the provision of emergency shelter to newly arrived refugee families and weather-proofing and basic WASH interventions in informal tented settlements, unfinished houses and buildings. Repair of substandard shelters and expansion of accommodation capacities at collective shelters may also be considered.

Activities aimed at site improvements (drainage, etc) will be very limited and considered on a case-by-case basis. Multi-purpose cash transfers will also contribute to securing shelters by contributing to rent.

Comprehensive WASH contingency plans should be ready to cover the needs of sudden and massive displacement. WASH related epidemic contingency plans should ensure strong coordination and linkages with the health sector. WASH coordination amongst actors and local authorities requires continued improvement to face the developing needs and challenges. Specific interventions could be supported for season specific needs.

In Jordan:

ECHO will aim to support life-saving humanitarian interventions targeting all refugees in Jordan, irrespective of their country of origin and focusing on the most vulnerable as defined by the Vulnerability Assessment Framework (VAF).

Protection

Protection in Jordan has become both more challenging and vital to the dignity and wellbeing of the refugee population.

ECHO will support protection initiatives designed to address protection risks and violations either directly or in an integrated manner through other programme activities and protection sensitive targeting. ECHO's support will focus on: the right to documentation and freedom of movement for refugees, discrimination, cohesive relations with the host community, family separations, as well as assistance to victims of all kinds of violence (including SGBV). ECHO expects that all interventions (no matter what sector) adhere to basic protection mainstreaming principles of safe and equal access as well as appropriate considerations for special vulnerabilities.

Health

ECHO will continue the provision of health services to the most vulnerable refugees .Special emphasis will be given to expanding access for those who are not receiving curative or preventive healthcare because they are either non-registered, have expired certificates or live in remote areas. The provision of reproductive health services, comprehensive management of

GBV cases, mental health care, the treatment of chronic diseases and support to those either living with disabilities or at risk of developing disabilities are among the main priorities.

Food and Livelihoods

The provision of targeted food assistance for refugee populations will remain a priority. ECHO will encourage the use of the most cost efficient modality based on the results of the cash pilot to be launched before end of 2014. A transition from blanket to targeted food assistance will in any case be essential.

For refugees living in the host community targeted, unconditional emergency cash to allow families to withstand short term financial shocks is a priority. Conditional cash transfers (e.g. cash for work) will also be considered as a commonly agreed upon approach by partners.

Wash

In camps, ECHO will promote effective WASH coordination and technical coherence as well as updated contingency plans to cope with sudden refugee influxes and epidemics. Incremental upgrading of water supply and sanitation infrastructure required to reduce the high costs of water/wastewater trucking could be considered if deemed appropriate. ECHO will as well promote effective community mobilization in camps to enhance operation and maintenance as well as hygiene promotion to minimise the transmission of WASH related diseases.

Support to refugees in the host community will continue to require a highly integrated, flexible and adaptable approach to meet varied and changeable needs. Meeting essential WASH needs requires a wide variety of responses, implemented through different modalities (in-kind, cash, vouchers etc.). The capacity to adapt with the situation is essential, along with the timely prediction of specific seasonal needs (winter/summer).

Shelter and non-food items (NFI)

ECHO will consider supporting shelter needs of refugees living in Azraq and Za'atari camps. This will primarily focus on providing assistance to new arrivals.

Shelter assistance, for refugees living within the host community in rented accommodation, will be provided by regular cash assistance. ECHO will prioritise support to partners who use the VAF and adhere to sectorial working group standards for regular cash assistance.

The provision of NFI for newly arrived refugees and for refugees within the host community, again targeted through the use of the VAF, will be supported through the use of conditional and unconditional cash/vouchers.

In Turkey:

ECHO in Turkey will primarily focus on providing support to most vulnerable refugees namely out-of-camp refugees and new comers.

Protection

ECHO will continue to advocate for a comprehensive protection and assistance strategy to be developed for the Syrian refugee caseload in Turkey. A uniform and systematic registration

system for Syrian refugees that can facilitate common vulnerability assessments, identification and referral mechanisms will be key in this domain.

In the meantime, ECHO may support the establishment or continuity of protection systems for off-camp refugees, at the local level, through services provided through community-centers.

Food Security and Livelihoods

Given its limited funds, the priority of ECHO will focus on off-camp operations. In-kind, cash and voucher assistance for the most vulnerable families and individuals will remain potential modalities for assistance in this sector. ECHO will in any cases promote the use of the most cost efficient modality.

Health

ECHO may support services facilitating access to essential health care including patient referrals, transportation services, translation and legal services, and complementary payments to otherwise free health care for extremely vulnerable individuals. ECHO may also support direct provision of primary health care and physical rehabilitation services through recognized Syrian-specific facilities providing proven quality care.

Shelter/NFI

While the search for durable solutions will continue to be key for ECHO, support to cash and voucher assistance mechanisms will remain potential modalities to facilitate access to adequate housing. Referrals, assistance through community centers, and information-counselling services could constitute “soft assistance” for Syrians struggling with shelter concerns.

NFI support for winter, if not covered by other modalities of assistance such as direct cash assistance, will be another important aspect of the response that may well be pertinent for vulnerable families and individuals among the protracted refugee caseload or new comers. NFI support to new comers for basic needs will also be considered.

Contingency planning in case of massive influx of refugees will be also encouraged.

Inside Egypt and other potential countries:

The needs of Syrian refugees in Egypt and other asylum countries (i.e. Armenia, Morocco, etc.) are covered under this HIP. However, ECHO support will only be considered for emergency priority needs and in comparison with existing identified needs in the countries bearing the largest brunt of the crisis. The decision to support humanitarian operations in these countries will be made on a case by case basis.

Effective coordination is essential. ECHO supports the **Inter-Agency Standing Committee’s Transformative Agenda (ITA)** and encourages partners to demonstrate their engagement in implementing its objectives, to take part in coordination mechanisms (e.g. Humanitarian Country Team/Clusters) and to allocate resources to foster the ITA roll-out.

Partners will be expected to ensure full compliance with **visibility** requirements and to acknowledge the funding role of the EU/ECHO, as set out in the applicable contractual arrangements.

4. LRRD, COORDINATION AND TRANSITION

1. Other ECHO interventions:

The ECHO's Iraqi crisis Humanitarian Implementation Plan 2015 is covering the needs of the Syrian refugees in Iraq as well as the vulnerable population in Iraq.

- Under, the 2014 Children of Peace HIP, ECHO is supporting 2 projects to cover the needs for emergency education of Syrian refugees in Turkey.

2. Other services/donors availability

The EU is one of the leaders of the international humanitarian response with over €3.6 billion of total budget mobilised collectively, including humanitarian aid, stabilisation and macro-financial assistance. [Commission's humanitarian aid: €884 million].

At the Third International Pledging Conference in Kuwait in March 2015, the EU collectively pledged €1.1 billion, with €500 million coming from the EU budget (€200m humanitarian aid, €300m resilience and stabilisation assistance). This means a doubling of the EU pledge (2014: €550m) and a tripling of the Commission's pledge (2014: €165m).

The EU humanitarian assistance channeled through DG ECHO primarily supports life-saving medical emergency responses, the provision of essential drugs, food and nutritional items, safe water, sanitation and hygiene (WASH), shelter, distribution of basic non-food items (NFIs) and protection to help the most vulnerable families (Internally Displaced People, refugees, host communities).

Of the total DG ECHO assistance since the early stages of the Syria crisis, 46.2% has been allocated to needs inside Syria (Damascus based operations: 33.7%; cross-border operations, mainly from Turkey, 12.5%) and 53.8% went to neighbouring countries (Lebanon 25.8%, Jordan 20.8%, Iraq 4%, Turkey 4.9%).

Complementarities between ENI/IcSP supported actions and humanitarian funding in response to the Syrian crisis has been initiated since the very onset of the response and is constantly carefully looked at. In Lebanon and Jordan, for example, these instruments complement humanitarian funding by supporting activities targeting local affected populations and by building local capacities to cope with the consequences of the crisis mainly in the field of education, health and support to livelihoods. The combination of refugee-focused emergency intervention and interventions targeting host communities should ease social tensions and facilitate a transition process.

Since the beginning of the crisis, the IcSP funding totals EUR 87.2 M and the European Neighbourhood Instrument (ENI) funding totals EUR 537 M.

3. Exit scenarios

While it is too early to consider exit scenarios, the move towards strategic division of labour with other instruments (e.g. development) based on a regional strategy will be reinforced. In neighbouring countries where no new arrivals are recorded and the needs of refugees are entering a care and maintenance phase (in camp and outside of camps), a handover of ECHO to development instruments that are better placed to provide long-term development support will be sought.