

INTER-AGENCY REGIONAL RESPONSE FOR SYRIAN REFUGEES

Egypt, Iraq, Jordan, Lebanon, Turkey

19 - 25 September 2013



This update provides a snapshot of the inter-agency regional humanitarian response in full coordination with host Governments and 126 partners across the region. Published weekly on Thursday, the next update will be available on 3 October 2013.

REGIONAL HIGHLIGHTS

- The backlog of Syrian refugees awaiting registration is cleared in UNHCR Jordan's Amman and Irbid registration centres, where Syrians can now register upon first contact the same day.
- WFP is transferring to electronic vouchers in the region for the distribution of its food assistance. The e-voucher modality is already in use in Turkey and is currently piloted in Lebanon. WFP plans for a similar limited launch in Jordan next month and to expand to Iraq and Egypt in 2014.
- UNICEF and its partners have initiated a psychosocial support programme in Egypt. Close to 200 children received support in the form of referrals to education, health services and child protection case management in the two weeks of 6-19 September.
- World Bank has released its [Economic and Social Impact Assessment \(ESIA\)](#) of Lebanon to identify and quantify the effects of the neighbouring conflict. The Government of Lebanon has consistently upheld an open-border policy towards Syrian refugees.

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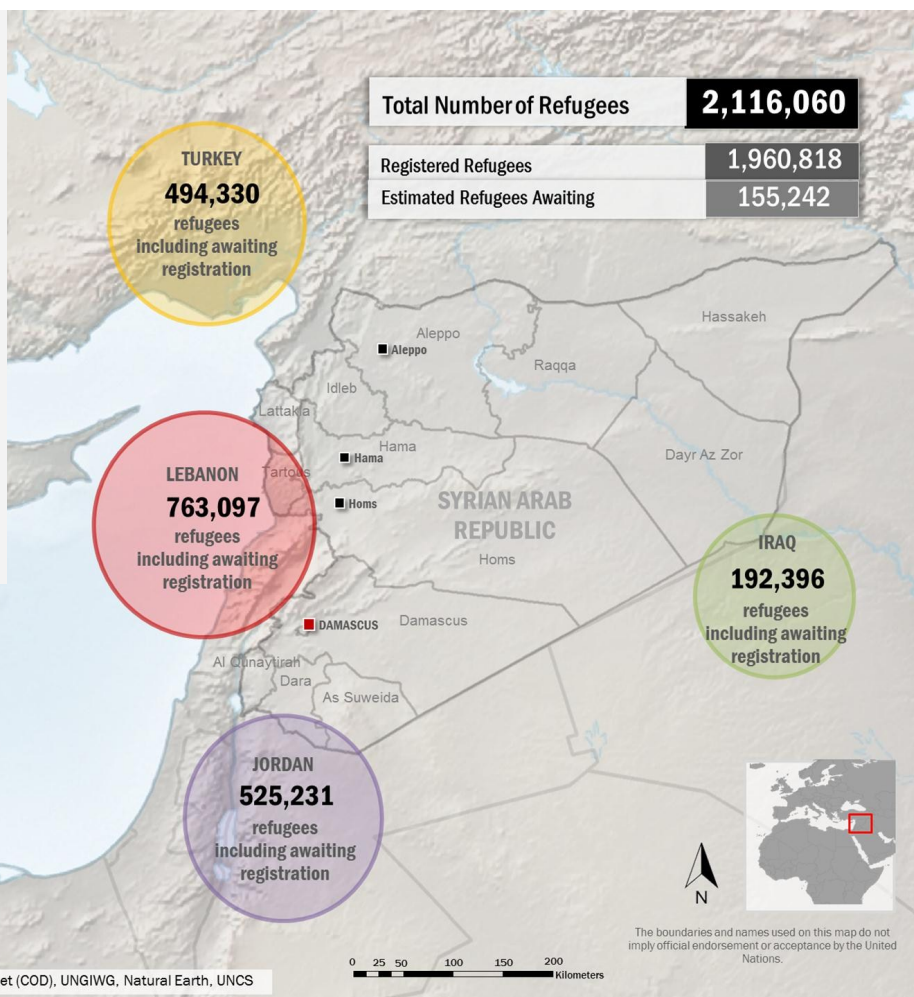
2.1 million refugees fleeing Syria have sought protection in neighbouring countries

US\$ 1.65 million distributed in cash assistance in August in Jordan

80,000 pairs of shoes will be distributed by UNICEF to Syrian refugees in camps in Turkey

60,000 new arrivals in the Kurdistan Region, northern Iraq since 15 August.

30,482 children and youth in this latest influx have been vaccinated against measles



Cash-based interventions crucial mechanism to meet basic needs of non-camp refugees

- Despite the massive presence of 29 refugee camps in Turkey, Jordan and Iraq, over 75 per cent of Syrian refugees are living outside camps in towns and villages amongst host communities. This largely invisible urban population are harder to reach and face additional challenges such as high rental prices, rising costs of living and limited livelihood opportunities.
- Cash-based interventions have been consistently flagged as a critical need to allow non-camp refugees to meet their basic needs in a dignified manner, ensure protection and prevent families from slipping into destitution.



Young Syrian refugees outside their new home in Mafraq city, Jordan. Three-quarters of the Syrian refugee population in Jordan live outside camps in host communities. UNHCR | J. Kohler

- Jordan - cash assistance for Syrian refugees in urban areas began in March 2012 and the programme has scaled up from 2,000 to over 50,000 beneficiaries over the past 12 months. Currently, UNHCR assists 13,141 Syrian families (50,427 individuals) in urban areas, amounting to 1.169 million JOD (US\$ 1.65 million) distributed in August. This represents an average of 89 JD per month per case with each case averaging 3.8 persons.
- Iraq - the first phase of UNHCR's cash assistance project to assist non-camp Syrian refugees in the Kurdistan Region, which began in May, was completed in two instalments in August. The objective of the project is to assist refugees to meet their basic needs including rent, transportation for education, food and medical treatment that are not covered for urban refugees in the on-going emergency response interventions. A total of 700 extremely vulnerable Syrian refugee families (3,437 individuals) living in urban communities of Erbil, Dohuk and Sulaymaniyah were assisted with US\$ 214,116 in cash assistance. An additional 251 individuals have been identified for cash assistance in Anbar, Baghdad, Kerbala, and Najaf, while the assessment of another 151 is ongoing in the central region of Iraq. In addition, 51 extremely vulnerable households including urban Syrians were identified and provided with cash between June and August, with \$42,650 distributed.

WFP rolling out electronic food vouchers to enhance programme quality

- WFP is transferring to electronic food vouchers - also referred to as e-vouchers or e-cards - across the region. E-vouchers function like pre-paid debit cards and allow beneficiaries to spend the balance of assistance in multiple visits. This offers beneficiaries who often have limited food storage capacity with greater flexibility over food purchases and a greater sense of normalcy. E-vouchers are more secure than in-kind food assistance or paper vouchers as they require a personal identification number (PIN) to access assistance and can be canceled if lost or stolen, hence lowering costs incurred as a result of losses.
- E-vouchers negate the need for beneficiaries to come to distribution sites as the card will be automatically recharged monthly through the partner bank. Given that WFP has already been forced to delay or cancel voucher distributions as a result of security concerns in Lebanon and Egypt, e-vouchers allow WFP to provide consistent food assistance while ensuring the safety of beneficiaries, as well as that of WFP and partner staff.
- WFP already uses e-vouchers in Turkey and is currently piloting the assistance modality in Lebanon, where WFP's agreement with its partner bank is finalized and e-cards have been distributed to some 1,900 beneficiaries in Nabatieh. WFP Beirut has trained partners on the technical implementation of the e-card programme as well as its implications on monitoring activities.
- WFP plans for a similar limited launch in Jordan next month, as well as plans to expand to Iraq and Egypt in 2014.

IMC: Regional prevention and response to address gender-based violence

- International Medical Corps (IMC) employs multi-sectoral integrated model for gender-based violence (GBV) prevention and response, which calls for holistic efforts to provide a range of services through direct delivery and coordination. Interventions in the region are focused largely in the key sectors of health and psychosocial support. IMC works with various sectors to mitigate risks of GBV in service delivery, and apply a community-based approach through support and management of community and women centres. Priority is given to basic services and support in the emergency context.



IMC-supported primary health care clinic in Lebanon. OCHA | Devi Palanivelu

- Turkey - a GBV team is already on the ground to start implementation of activities. In collaboration with IMC's Health and Mental Health and Psychosocial Support (MHPSS) teams, GBV cases will be case managed and referral pathways established, including for core services for GBV survivor, will be available. Capacity building will be done to the main service providers and close collaboration with the local Turkish authorities will be strengthened. Activities targeting women will be done through existing community structures.
- Lebanon - two community centres have been set up by IMC's MHPSS team in the central Bekaa and the North. The centres began services in June and focus on providing needed activities and services to the displaced Syrian population as well as the host community. Services include protection, GBV education and psychosocial support services. The community centres act as a safe space for the surrounding community; beneficiaries will be able to access important information on mental health support and/or treatment, engage in recreational activities intended to improve psychological and emotional well-being, and vocational training. The centres are offering a protected and safe environment for GBV survivors. Trainings have been conducted with a local partner on GBV Case Management in Emergency and on Clinical Care for Sexual Assault Survivors.
- Iraq - IMC has completed two GBV training sessions in Domiz camp – one for staff regularly working in the camp and a second for camp residents. The GBV and psychological first aid trainings covered topics including definitions of violence; causes, consequences and prevention of GBV; concepts of gender and gender equality; and national and international frameworks that address GBV. The 14 Syrian refugee participants that took part in the second training sessions will form two teams and serve as community outreach workers within Domiz, visiting GBV survivors and at-risk women throughout the camp. IMC has developed an identification and assessment form which community outreach workers will use when working with GBV survivors in Domiz camp. Activities within the camp will commence soon.
- Jordan - IMC currently provides GBV case management services to survivors inside and outside Za'atri Camp, where the majority of cases reported were particular to minors. Referral mechanisms are in place, in particular with IMC's primary health care clinic.

UNFPA: building capacity in gender-based violence prevention and response

- Jordan - UNFPA and the International Rescue Committee conducted a number of GBV trainings focusing on risk identification, available services and referral pathway for a total of 100 participants this week in Za'atri camp. The four trainings lasted one day each and targeted respectively 16 youth committee members, 66 participants from health committees, six female-headed households, and 12 community outreach volunteers. In Ma'an, UNFPA and Un Ponte Per (UPP) trained six Syrian volunteers on the basics of community based protection and guidance for refugees. In Ma'an and Zarqa, UNFPA and UPP carried out 27 sessions for 114 beneficiaries, including psychosocial support, legal aid, recreational activities, and awareness activities. In Zarqa, 50 women and men participated in alphabetization courses, computer literacy courses, and life-skills activities.

Lebanon: World Bank assessment to inform strategy for managing the social and economic impacts of Syria conflict

- The World Bank has conducted a [Economic and Social Impact Assessment \(ESIA\)](#) at the request of the government of Lebanon to identify and quantify the effects of the conflict in Syria. More than 760,000 Syrian refugees have sought protection in Lebanon.
- The assessment was completed in collaboration with the Government of Lebanon, the United Nations, the European Union, and the International Monetary Fund, and provides a snapshot of the period 2012 to 2014 offering a comprehensive estimate of the overall impact of the crisis along with detailed analysis of the consequences for certain key sectors.
- The ESIA will complement the humanitarian efforts underway and serve as a guide for government policy decisions and the basis for coordinating global support.
- The demand on Lebanon's public services has surged along with the population as a result of the neighbouring crisis at the same time as government revenues are expected to drop by US\$1.5 billion due to interrupted trade and an erosion of business and consumer confidence.
- The rapid growth of the population has a number of potentially negative social consequences, including increased competition for jobs and overwhelmed healthcare and education systems. In addition, services including electricity, solid waste management, transportation and the water supply will need additional investments to meet the needs of the Lebanese population and the refugees.



Syrian refugee children in front of a collective shelter in Aarsal, Lebanon.
UNHCR | S. Malkawi

The regional response for refugees fleeing Syria is the coordinated effort of 126 participating organizations, including 84 appealing:

ActionAid | [Action Contre la Faim](#) | Adventist Development and Relief Agency | [Agency for Technical Cooperation and Development](#) | The Lebanese Association for Development | [Lebanese Association for Human Promotion & Literacy](#) | Amel Association | [ARRD – Legal Aid](#) | Associazione Volontari per il Servizio Internazionale | [CARE International](#) | Caritas | [Caritas Lebanon Migrant Centre](#) | Catholic Relief Services | [Centre for Victims of Torture](#) | Cooperative Housing Foundation International | [Children without Borders](#) | Comitato Internazionale per lo Sviluppo dei Popoli | [Danish Refugee Council](#) | Finn Church Aid/Act Alliance | [FAO](#) | Fundacion Promocion Social de la Cultura | [GVC/Muslim Aid](#) | Handicap International | [Heartland Alliance International](#) | Institute for Family Health/Noor Al Hussein Foundation | [International Catholic Migration Commission](#) | International Medical Corps | [IOM](#) | International Orthodox Christian Charities | [International Relief and Development](#) | International Rescue Committee | [INTERSOS](#) | Islamic Relief Worldwide | [JEN](#) | Jesuit Refugee Service | [Jordan Health Aid Society](#) | LDS Charities | [Lebanese Red Cross](#) | Lutheran World Federation | [Madrasati Initiative](#) | Medair | [Médecins du Monde](#) | Mercy Corps | [Movement for Peace](#) | Nippon International Cooperation for Community Development | [Norwegian Refugee Council](#) | Operation Mercy | [Oxfam GB](#) | Première Urgence – Aide Médicale Internationale | [Qatar Red Crescent](#) | Questscope | [Refugee Education Trust](#) | Relief International | [Restart](#) | Rene Mouawad Foundation | [Royal Health Awareness Society](#) | Safadi Foundation | [Save the Children International](#) | Save the Children Jordan | [Social Humanitarian Economical Intervention for Local Development](#) | Solidarités International | [Terre des Hommes](#) | Terre des Hommes Italia | [Terre des Hommes Lausanne](#) | German Federal Agency for Technical Relief | [Un ponte per](#) | UNDP | [UNESCO](#) | UNFPA | [UN-Habitat](#) | UNHCR | [UNICEF](#) | UNODC | [UNOPS](#) | UNRWA | [UN Women](#) | War Child Holland | [WFP](#) | WHO | [World Rehabilitation Fund](#) | World Vision | [YMCA](#) |

Humanitarian response partners are invited to contribute to this report. For more information or to be added to the distribution list, please contact [Anna King](#), UNHCR Regional Reporting Officer | kinga@unhcr.org