

2016

HUMANITARIAN RESPONSE PLAN

— JANUARY-DECEMBER 2016 —

DEC 2015



**SYRIAN ARAB
REPUBLIC**

ESTIMATED PEOPLE IN NEED

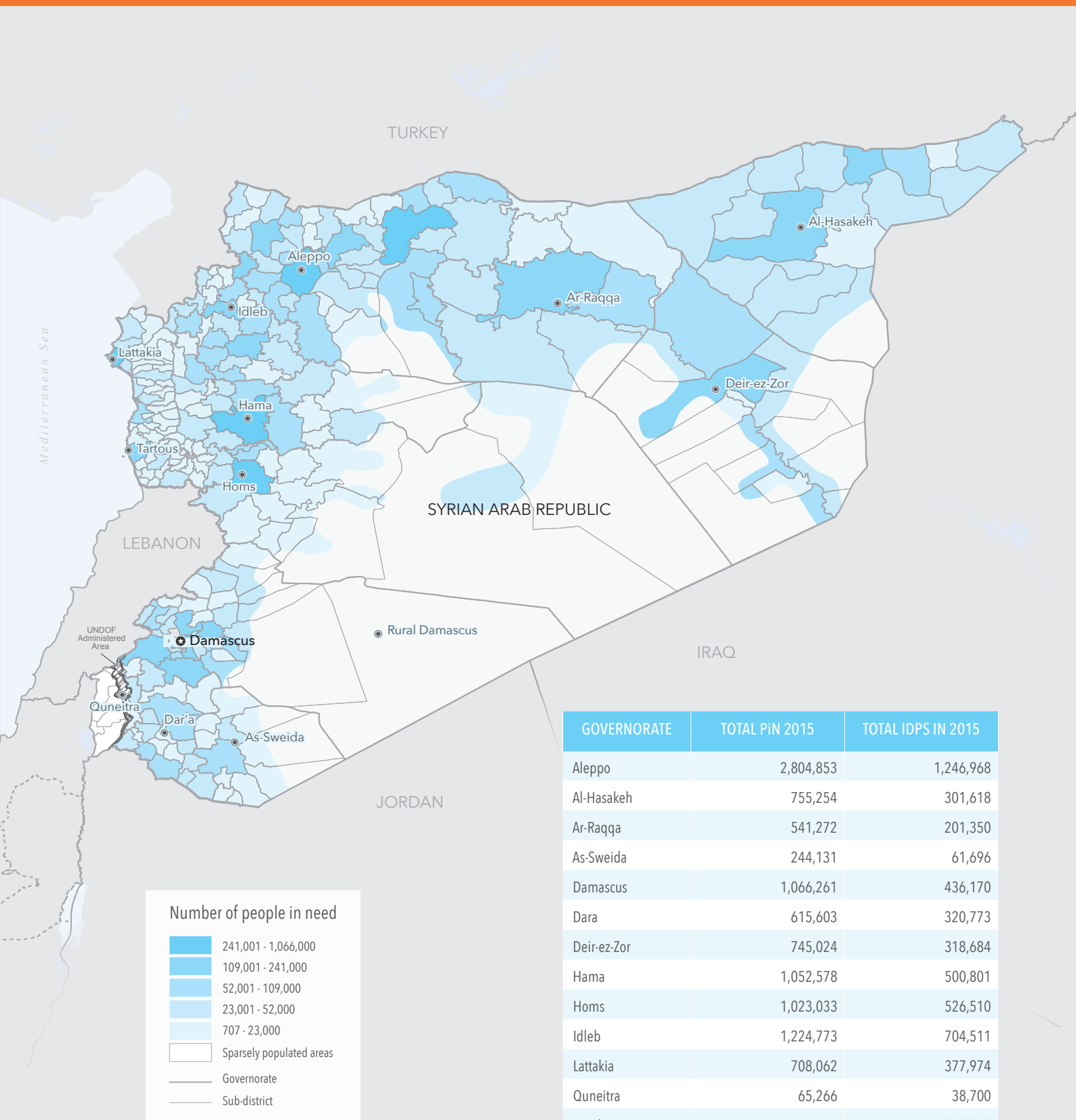
13.5M

PEOPLE TARGETED

13.5M

REQUIREMENTS (US\$)

3.18Billion



The Government of Syria does not recognise the boundaries of the maps included in the 2016 HRP.

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

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THE HUMANITARIAN RESPONSE PLAN

AT A GLANCE

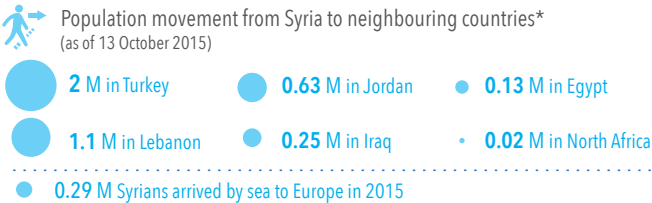
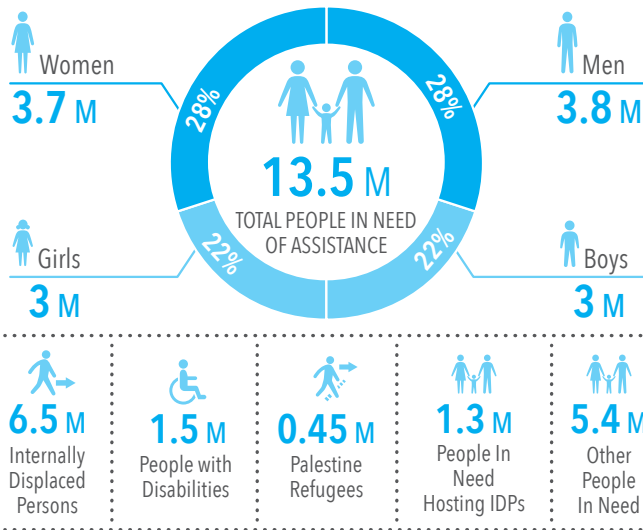
PEOPLE IN NEED



13.5M

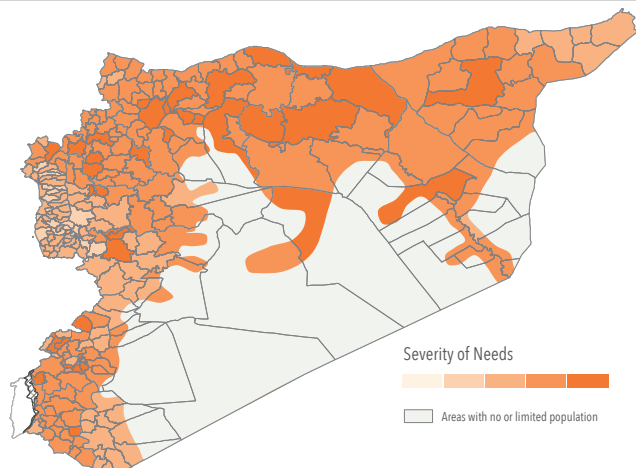
estimated number of people in need of some form of humanitarian assistance

8.7 M are in acute need of multi-sectoral assistance



*The Refugees response is covered by the 3RP.

MULTI-SECTORAL CONVERGENCE OF SEVERE NEEDS



PEOPLE TARGETED



13.5 Million

REQUIREMENTS (US\$)



3.18 Billion

STRATEGIC OBJECTIVE 1



Support saving lives, alleviate suffering and increase access to humanitarian response for vulnerable people and those with specific needs

STRATEGIC OBJECTIVE 2



Enhance protection by promoting respect for international law, IHL and HRL through quality principled assistance, services and advocacy

STRATEGIC OBJECTIVE 3



Support the resilience of affected local communities, households and individuals within the humanitarian response by protecting and restoring livelihoods and enabling access to essential services and rehabilitation of socio-economic infrastructure

2016 RESPONSE STRATEGY

- Prioritisation based on severity of needs
- Improvement of humanitarian access
- Flexibility of humanitarian programming
- Focus of multi-sector programming for the most vulnerable groups
- Emergency response preparedness
- Protection mainstreaming
- Strategic use of country-based pooled funds

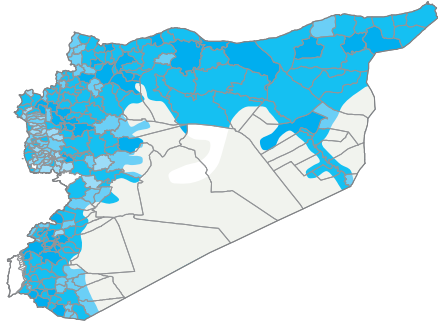
UNDERLYING PRINCIPLES

In addition to these strategic objectives, the HRP will reinforce the response capacity of national humanitarian actors¹, ensure appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people and apply 'do no harm' principles throughout the response

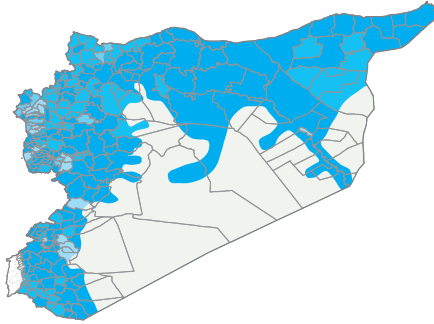
1. The Government of Syria only recognises national humanitarian actors as NGOs it has registered, approved, and accordingly notified the United Nations. This applies to all references to national humanitarian actors throughout the HRP.

Severity scales are a tool used by humanitarian actors at sector and inter-sector levels to estimate the severity of needs at sub-district level. Needs severity is measured by triangulating the following criteria (1) scale of needs, (2) coping mechanisms (3) access to and availability of aid.

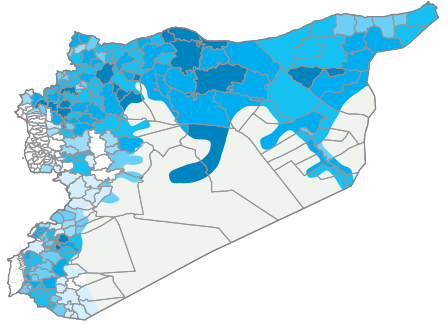
PROTECTION



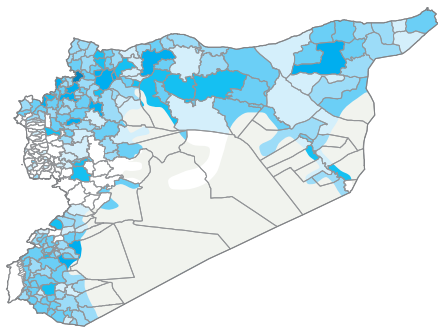
FOOD SECURITY



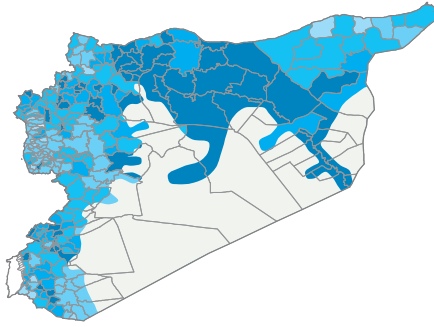
HEALTH



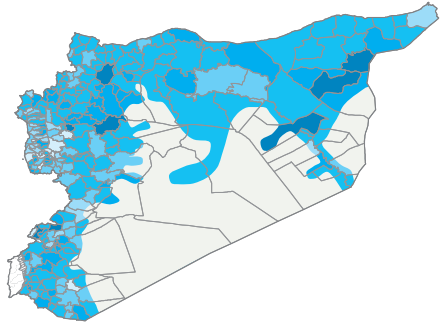
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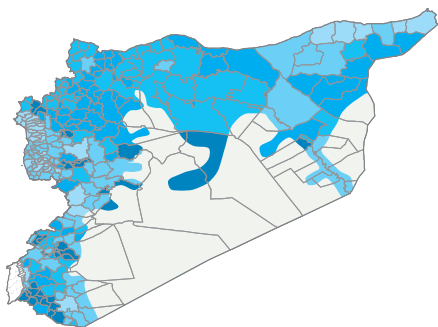
EDUCATION



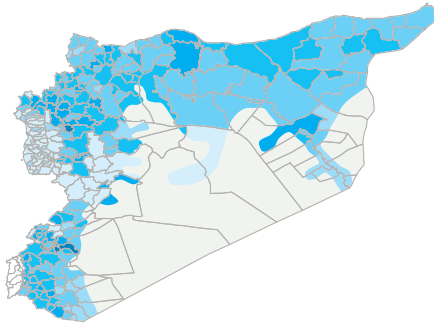
WASH



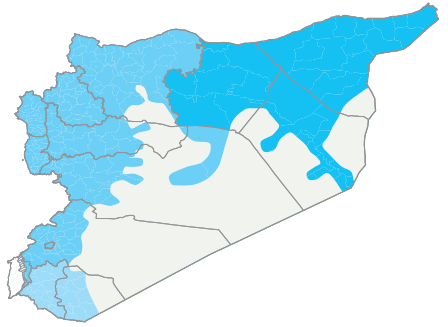
EARLY RECOVERY AND LIVELIHOOD



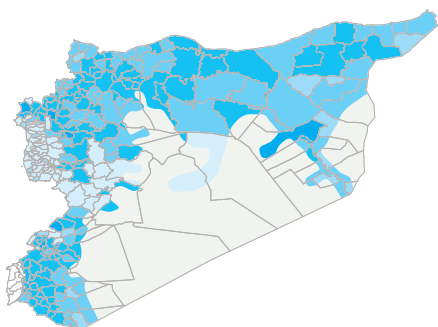
NFI



NUTRITION



SHELTER



Severity of needs



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SUMMARY OF NEEDS, TARGETS & REQUIREMENTS

| SECTOR | TOTAL PIN | PEOPLE TARGETED | BREAKDOWN OF PIN | | BY SEX & AGE | | Children | Education Personnel | Boys, Girls (6-59 months) | Pregnant and Lactating Women (PLW) | REQUIREMENTS |
|---|--------------|-----------------|------------------|------------------|--------------|-----------------------------|----------|---------------------|---------------------------|------------------------------------|--------------|
| | | | IDPs | Host communities | % Female | % Children, Adult, Elderly* | | | | | Total |
| Protection | 13.5M | 7.2M | | | | | | n/a | n/a | n/a | 235.9M |
| Camp Coordination & Camp Management | 6.5M | 3.2M | 6.5M | | 49.3% | 40.6 59.6 | | | | n/a | 25.4M |
| Coordination and Common Services Analysis | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a | n/a | 58.6M |
| Early Recovery and Livelihoods | 9.2M | 3.6M | 3.6M | 5.6M | 49.39% | 40.6 53.5 5.9% | 1.46M | | | n/a | 148.4M |
| Education | 5.7M | 4.6M | | | | | 5.4M | 0.3M | | n/a | 200.2M |
| ETC | n/a | n/a | n/a | n/a | 50% | n/a | n/a | n/a | n/a | n/a | 1.3M |
| Food Security and Agriculture | 8.7M | 7.5M | 4M | 4.7M | n/a | 36 60 4% | 2.7M | | | n/a | 1.2B |
| Health | 11.5M | 11.5M | 4.5M | 7.0M | 51% | | 4.5M | | 1.5M 1.4M | n/a | 437.2M |
| Logistics | n/a | n/a | n/a | n/a | 63.8% | n/a | n/a | n/a | n/a | n/a | 15M |
| Nutrition | 3.1M | 1.9M | | | n/a | | | | 0.9M, 0.9M | 0.3M | 51.1M |
| Shelter & NFI | 2.4M 5.3M | 1.2M 5.3M* | 3.7M | 2.6M | 50% | 41 53 6% | | | | n/a | 523.1M |
| Water Sanitation & Hygiene (WASH) | 12.1M | 14.1M 7.3M | 4.3M | | 50% | 44 48 % | | | | n/a | 250M |
| TOTAL | 13.5M | 13.5M | 6.5M | 7M | 52% | 40 52 8% | | | | n/a | 3.18B |

OVERVIEW OF

THE CRISIS

By any measure, the humanitarian situation has worsened since the beginning of 2015. As 2015 draws to a close, humanitarian and protection needs have reached a record high and continue to grow at a staggering rate.

An estimated 13.5² million people, including six million children are in need of some form of humanitarian assistance and protection. 6.5 million people, including 2.8 million children, are displaced within Syria and 4.2 million are registered refugees in neighbouring countries and North Africa. On average, since 2011, 50 Syrian families have been displaced every hour of every day. The pace of displacement remains relentless. Well over 1.2 million people have been displaced so far this year, many for the second or third time. Increasing numbers of civilians are fleeing and are prepared to risk their lives to reach Europe.

Since the beginning of the crisis in 2011, Syria has witnessed significant challenges in the humanitarian and security situation across the country, an increase in the targeting of civilian infrastructure, and a marked increase in internal displacement. Human rights violations and abuse occur in the context of widespread insecurity and disregard for the standards of international law and international humanitarian law (IHL). The crisis is characterized by the current absence of effective protection for a significant number of civilians.

In addition, attacks against schools, hospitals, water networks, electricity plants, places of worship, economic assets and other civilian infrastructure continue unabated.

A number of drivers, including insecurity, unilateral economic and financial measures imposed on Syria, the deepening economic decline, and reduced availability of basic services have contributed to the exacerbation of the humanitarian situation over the past year.

Economic woes have been aggravated by soaring food and fuel prices, and disrupted markets, exhaustion of savings, contributing to the extreme vulnerability of people from all walks of life, including increased reliance on negative coping mechanism. Winter is likely to exacerbate the humanitarian situation across the country. The upcoming summer season is also likely to exacerbate vulnerability, particularly with regards to water-borne diseases and possible outbreaks. As families exhaust their savings and resources, they are forced to pawn their future to survive.

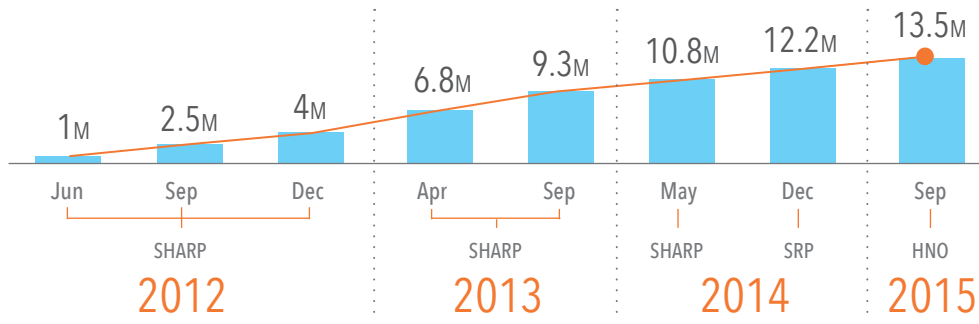
BY THE NUMBERS (2016 HUMANITARIAN NEEDS OVERVIEW (HNO))*

- An estimated 13.5 million people in Syria, including six million children, require humanitarian assistance and protection.
- 8.7 million people have acute needs across multiple sectors.
- 4.5 million people in need in hard-to-reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN.
- It is estimated that upwards of 250,000 people have been killed, including tens of thousands of children and youth.
- Almost 70 per cent lack access to adequate drinking water amid continuing water cuts.
- One in three people are unable to meet their basic food needs, with an estimated 8.7 million people in need of a range of food security-related assistance.
- 2.4 million people lack adequate shelter.
- Over 11 million people require health assistance, including 25,000 trauma cases per month.
- 1.7 million IDPs are living in camps and collective centres.
- An estimated 86,000 children aged 6-59 months suffer from acute malnutrition. A further 3.16 million children under the age of five and pregnant and lactating women (PLW) are considered at risk.
- Over 2 million children and adolescents are out of school. 1 in 4 schools are damaged, destroyed or occupied.
- Four out of five Syrians live in poverty. Competing over limited resources might create tensions in areas of displacement
- Since the onset of the crisis the average life expectancy has fallen by 20 years.
- Nearly one in three Syrian households is now indebted, due mainly to food costs.
- Lack /loss of civil and personal documentation are a key concern.
- Up to 95% of Palestine Refugees who remain in Syria are in continuous need of humanitarian aid.
- One in four children at risk of developing mental health disorders
- Three in five locations affected by child labour, including in its worst forms.
- 1.5 million people with disabilities.
- An estimated 300,000 women are pregnant and need targeted support.

2. * The 2016 Humanitarian Needs Overview (HNO) has been developed by UN agencies and partners and underpins the 2016 HRP. The Government of Syria has expressed its reservations over some of the HNO findings. This applies throughout the document.

Protection risks faced by particularly vulnerable segments of the population continue. Over two million children and adolescents are out of schools and those currently in schools are increasingly being withdrawn or dropping out to act as breadwinners, thereby placing an increasing number of girls at risk of early and forced marriage and other forms of exploitation and leaving boys vulnerable to child labour, recruitment and exploitation. Insecurity has become pervasive in many areas, increasing the risk of gender-based violence, especially for women and girls. Hundreds of thousands of Palestine refugees continue to live in a state of profound vulnerability across the country. Explosive remnants have left entire neighbourhoods at risk.

Graph: Increase of People in Need (2012-2015)



The crisis requires an urgent political solution. Pending such a solution, humanitarian actors will continue to work together to extend a lifeline to the most vulnerable people in Syria while aiming to enhance protection and strengthen individual- and community-level resilience across the country. The humanitarian community will endeavour to use all modes of humanitarian delivery to access the most vulnerable groups and the most severely affected areas through the most direct routes.

Humanitarian actors – in particular, Syrians themselves – are making remarkable efforts to deliver assistance, reaching millions of people per month despite significant operational constraints and major funding shortfalls. Despite donors' generosity, as of 6 December, the 2015 Syria Response Plan only received \$1.17 billion (41 per cent) of its overall funding requirements.

In the absence of a political solution, in 2016 these efforts will require even more support, including longer term and flexible financial commitments, if the humanitarian community is to continue to save lives, alleviate suffering, enhance protection, particularly for the most vulnerable, and provide opportunities for greater resilience.

KEY RESPONSE ACHIEVEMENTS BY SECTORS (Jan-Oct 2015)

- 6 million people reached monthly (on average) with food assistance (in kind and Cash/ Voucher) and 880,000 people reached with agriculture/livelihood support.
- Over 8.1 million people provided with adequate drinking water
- Over 4.8 million people received non-food items
- Over 2.6 million people reached by protection responses
- Over 550,000 trauma cases supported by the health sector
- 1.9 million targeted by early recovery and livelihood activities, including SWM
- Over 1.6 million people reached with nutrition interventions
- 1.5 million children and adolescents reached with education interventions
- Support to over 157,971 deliveries by skilled-birth attendants
- 2.9 million children under five vaccinated against polio
- 450,000 Palestine refugees provided with humanitarian assistance

STRATEGIC

OBJECTIVES

In accordance with international law, the United Nations renews its commitment to deliver humanitarian aid and implement the response plan with full respect to the sovereignty of the Syrian Arab Republic and in accordance with General Assembly Resolution 46/182.

In addition, the United Nations is committed to the implementation of Security Council Resolutions 2139, 2165 and 2191. The UN and its partners will also continue to advocate for greater respect for international law, international humanitarian law and international human rights law with relevant stakeholders.

The 2016 Syria Humanitarian Response Plan (HRP) has been developed in consultation with the Government of Syria and sets out the framework within which the humanitarian community will respond to large-scale humanitarian and protection needs in Syria throughout 2016 on the basis of the prioritisation undertaken within and across sectors. The HRP also presents urgent funding requirements to meet the ever-growing needs. The plan is based on ample data on needs. It is anchored by three strategic objectives, focusing on saving lives and alleviating suffering, enhancing protection and building resilience. These objectives are interlinked, and protection is mainstreamed and mutually supportive. Progress made towards attaining one objective is often dependent upon incremental steps towards achieving another. Achieving these objectives, through humanitarian activities under this plan, is contingent upon the availability of sufficient resources and the existence of an enabling operational environment.



1 Support saving lives, alleviate suffering and increase access to humanitarian response for vulnerable people and those with specific needs

Civilians are increasingly affected by the length of the crisis. The scale and scope of life-saving needs continue to increase. Lack of access to many affected people in need remains one of the main impediments to addressing needs which requires increased innovation and flexibility to reach affected people in 2016.



2 Enhance protection by promoting respect for international law, IHL and HRL through quality principled assistance, services and advocacy

Civilians continue to bear the brunt of the crisis. Recognising that the imperative of protecting people lies at the heart of humanitarian action in the country, this plan integrates protection across all sectors in a manner consistent with the IASC Principals' statement on the centrality of protection. While the Government of Syria bears the primary responsibility for protecting its citizens, in 2016 the humanitarian community will place a stronger focus on ensuring that protection is more consistently embedded in all response design and implementation by all sectors, including monitoring of the response.

Risk mitigation, increase in the response capacity of humanitarian actors, along with principled advocacy with all relevant stakeholders and duty-bearers will be priorities.



3 Support the resilience of affected local communities, households and individuals within the humanitarian response by protecting and restoring livelihoods and enabling access to essential services and rehabilitation of socio-economic infrastructures

Humanitarian actors will incorporate resilience within humanitarian programming, in order to increase people's capacity to confront and withstand continuous shocks and shore up livelihoods whenever and wherever possible.

In addition to these strategic objectives, the HRP underscores the humanitarian community's joint commitment to support and reinforce the response capacity of national humanitarian actors, strengthen appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people and apply 'do no harm' principles throughout the response. Indicators developed against the strategic and sector response plans objectives will be used to measure the implementation of these principles.

Humanitarian actors working under this plan (UN, IOM, INGOs, NGOs) remain committed to providing needs-based assistance, in accordance with the humanitarian principles of neutrality, impartiality and independence and to providing assistance without discrimination to people in need.

The United Nations Resident and Humanitarian Coordinator for Syria leads and coordinates humanitarian action inside Syria. His work is complemented by the Regional and Deputy Regional Humanitarian Coordinators for the Syria Crisis and Humanitarian Coordinators in neighbouring countries to implement the Whole of Syria (WoS) approach which is the framework for humanitarian action. OCHA, in line with its global mandate, supports the humanitarian leadership in ensuring the effective coordination of the response inside Syria.

The WoS approach benefits from sectors/cluster coordination at both hub and WoS level, and is supported by NGO coordination mechanisms.

RESPONSE

STRATEGY

This Humanitarian Response Plan is complementary to the humanitarian response provided by the Government of Syria (GoS) and other international organisations such as the ICRC and IFRC. It puts forward the collective vision of the international humanitarian community and its national partners for responding to the assessed humanitarian needs in Syria in 2016. As part of this plan, the humanitarian community aims to assist up to 13.5 million people estimated to be in need of some form of humanitarian assistance. The most vulnerable in areas where needs are highest, including in hard-to-reach and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN, requiring assistance in multiple sectors, will be the first priority. Specific targets are identified for each sector.

The humanitarian situation in Syria is extremely fluid and multi-faceted, requiring a mix of rapid and context-tailored response modalities, using the most direct and effective modalities to deliver assistance. To better prioritise responses in 2016, all sectors have established needs severity scales to guide response design and geographical focus. The sector and inter-sector severity scales also help determine where sectoral needs are priorities and where they converge for multi-sector programming.

A coherent humanitarian response that minimises gaps, avoids duplications, maximises the humanitarian community's ability to respond through the use of available capacities based on complementarities while respecting organizational mandates and approaches is crucial to ensure the central character of protection of civilians in the humanitarian response. This will necessarily require cooperation between humanitarian and development partners. To this end, the Protection sector will be providing technical guidance to sectors, in addition to discharging its other responsibilities.

The following areas of work were priorities in 2015 and will be strengthened in 2016:

Improving Access

Access challenges are the main impediment to the delivery of humanitarian assistance. They will be addressed by advocacy; more granular cross-hub access analysis and reinforced security risk management; principled advocacy on regulatory frameworks, and humanitarian principles; the strategic use of pooled funding; and by reinforcing the response and monitoring capacities of national partners, who typically operate more flexibly in areas of difficult access.

Against this backdrop, preserving and where possible expanding humanitarian access will require increasing acceptance for humanitarian action, in line with the relevant provisions of GA resolution 46/182, as well as effective cooperation with international and national NGOs. Humanitarian actors remain committed to providing principled humanitarian assistance by adhering to the key humanitarian principles of humanity, neutrality, impartiality and independence, prerequisites to increased acceptance by all stakeholders. (see 'Access' chapter for further details)

Improving access through more granular analysis, risk management, advocacy, strategic funding, and capacity building.

Flexible Programming and Delivery

Several reviews have pointed to the need for improved programming flexibility. In 2016 this will require capitalising on the operational hubs, within the framework of the WoS approach, to decide on the most appropriate combination of channels at any given moment so as to ensure the most effective access to people in need, particularly the most vulnerable, including through regular programme and cross-lines from inside Syria, as well as through cross-border assistance³ from neighbouring countries.

Programming tailored to access and need severity; improved timeliness of the response.

Programming will be based on needs' severity and also be tailored to the different response contexts in Syria, distinguishing between hard-to-reach areas or highly volatile areas – where interventions tend to be irregular and often limited to a few partners in specific sectors and focused on the delivery of supplies – and more regularly accessible and secure areas – where there is generally greater scope for sustained resilience-focused support. Sector and inter-sector coordination structures will ensure that operations in more accessible areas systematically embed resilience approaches, i.e. that they increase people's capacity to confront and withstand external shocks such as job loss, restoration of productive assets and

3. Reference to cross-border and cross-border activities by humanitarian actors in the HRP does not imply a change in the official position of the Government of Syria on the issue of cross-border.

infrastructure damage. In many urban contexts humanitarian needs are particularly high, given high population density and dependence on public infrastructure. Programming decisions by humanitarian actors will therefore be informed by the specific challenges concerning access, assessing needs, targeting and delivering in urban and rural environments.

Response Preparedness

Despite resource, access and security constraints, humanitarian actors strive to strengthen preparedness and rapidly respond to sudden-onset large displacements that characterised much of 2015. Emergency response preparedness (ERP) measures in the Syria context include the identification and training of national humanitarian actors on rapid need assessments, including in hard-to reach areas, on emergency distribution and monitoring; pre-positioning of items or agreed local procurement; the establishment of standard operating procedures for deployment of rapid relief teams; mobile programming in volatile areas; identification and negotiation of alternative access routes. In terms of financial resources, emergency allocations of pooled funding will continue to be used as an effective method of rapidly disbursing funds to new emergencies. However, as funding for ERP measures was generally insufficient in 2015 additional support is required.

Reinforcing Capacities of national humanitarian actors

Humanitarian actors will reinforce the response capacity of national humanitarian actors and closely engage them in the articulation and operationalisation of principled response strategies with the aim of improving assistance delivery modalities and identifying beneficiaries, while enhancing the effectiveness of actions and the overall appropriateness of the humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people. SARC, national NGOs, other national humanitarian actors, and INGOs with staff in Syria often have wider coverage and also operate more closely with affected people, and more quickly and freely in areas of difficult access. They are therefore crucial for improving both the quality of programming and expanding humanitarian coverage and community outreach. Reinforcing the capacities of national humanitarian actors is therefore a priority of the wider humanitarian community. Capacity development will focus on increasing operational response capacity and quality (i.e. risk and needs assessment, programming and monitoring approaches); humanitarian principles and humanitarian access; and specific areas where needs have dramatically increased outstripping existing pre-crisis capacity, for example GBV, nutrition and health. Partnerships will be as important as training in order to capitalise on the different strengths of each agency and to learn from each other. Increased outreach in Arabic will be key for ensuring that national partners are effectively engaged. Capacity development providers will be prioritized when possible. Training will also be coupled with mentoring and provision of 'hard ware', and will be better coordinated within and across hubs so as to ensure sharing of materials and best

practices. Capacity reinforcement will be pursued via remote delivery channels or in-presence. International humanitarian actors remain committed to the duty-of-care principle vis-à-vis their national partners.

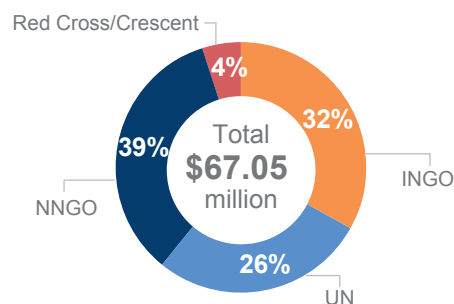
Country-based pooled funds responding to the Syria Crisis (as of 25 November)

Three country-based pooled funds support the response in Syria and in the region: the Syria Emergency Response Fund (ERF) aims to prioritize funding to NGOs and areas with difficult access in Syria. The portion of the Jordan ERF fund corresponds to the funding allocated for cross-border activities in Syria. The Turkey-based Humanitarian Pooled Fund (HPF) supports the cross-border response, with a focus on reinforcing the capacity of national partners, particularly in hard-to-reach areas.

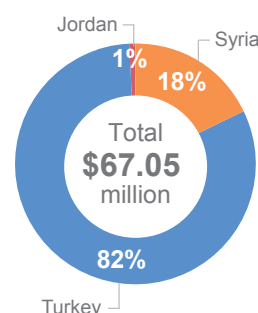
Funding of projects by partner type per country (million USD)

| | Syria | Turkey | Jordan |
|--------------------|--------------|--------------|-------------|
| UN | 7.81 | 9.5 | 0 |
| INGO | 1.59 | 19.12 | 0.43 |
| NNGO | 1.34 | 24.8 | 0 |
| Red Cross/Crescent | 1.2 | 1.26 | 0 |
| Total | 11.94 | 54.68 | 0.43 |

Allocation of pooled funding by partner type



Allocation of pooled funding by country



Convergence of needs and joined up programming

8.7 out of 13.5 million people in need – two out of three – are estimated to be in need of humanitarian assistance in more than one sector. Some of the groups will be prioritised as entry points for coordinated programming in 2016:

1. IDPs living in damaged and unfinished buildings, in planned and transitional IDP camps, collective centres and spontaneous/self-established camps
2. Children and adolescent attending schools and temporary learning spaces, as well as children out of school and subject to negative coping strategies
3. People living in sub-districts highlighted in the inter-sectoral severity ranking as having severe and acute convergence of needs across multiple sectors or more than two sectors, particularly those living in hard-to-reach and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN and urban areas.
4. People living in areas at risk of disease outbreaks and/or malnutrition.
5. Palestine Refugees

Sector and inter-sector coordination mechanisms in all hubs will work towards systematically triggering multi-sector responses, based on agreed intervention criteria and operating procedures.

Strategic use of country-based pooled funds

In line with this response strategy, allocations by the country-based pooled funds in the region will be further prioritised: (a) increasingly to support the humanitarian response of national humanitarian actors; (b) fund responses in areas with significant access restrictions and high vulnerabilities; (c) provide support to multi-sector or joint programming, and; (d) facilitate timely response to rapid onset emergencies.

Cash Programming

The crisis has had devastating effects on the country's economy, reducing household purchasing power and affecting local markets. The challenges individual households face are complex, with limited access to income-generating opportunities as well as physical and financial access to markets and financial transfer and savings mechanisms.

Cash-and market-based programming avoids doing harm to local systems that support livelihoods, and provides dignity and continuity for communities' way of life by offering affected people the flexibility to choose how to meet their own needs. Markets are integral to many aspects of Syrian life, and therefore must be considered when implementing a quality multi-sector humanitarian response. Cash-based programming can also significantly contribute to the achievement of other humanitarian objectives such as increased protection of affected children and affected youth from economic exploitation.

Cash-based programming including the use of cash transfers and vouchers as a modality is used by partners in Syria to support communities with access to food, services, livelihoods, non-food items, emergency obstetric care, including safe deliveries. Mechanisms vary from direct cash and paper voucher distribution through to partnerships with local businesses and e-voucher systems.

Cash-based programming in the Syrian context presents particular complications. In 2016, information sharing and coordination between partners and sectors at hub and WoS level will be fundamental to implementing well-designed and targeted cash-based responses at scale. Improved preparedness, monitoring and evaluation at hub and WoS level is imperative to ensure that relevant data is collected and analysed and that lessons learned, including risk mitigation, are applied appropriately.

CROSS-CUTTING ISSUES

Protection

For the purpose of this plan, 'protection' refers to the protection of all affected civilians including men, women, children, and other groups with specific needs from violence, exploitation, discrimination, abuse and neglect.

The Government bears the primary responsibility for protection of its citizens. In the course of implementing protection activities, the UN will work with the government to develop national institutional capacity to uphold humanitarian norms and principles.

The humanitarian community will place a stronger focus on ensuring that protection issues are more consistently embedded in response design and implementation by all sectors, including promoting the "do no harm" principle, monitoring and programming. Advocacy with all relevant stakeholders on protection issues will be a key pillar of the response.

More efforts will also be made to systematically mainstream GBV⁴ and SEA risk mitigation measures into all sectors of the humanitarian response.

a. Ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people

Various initiatives are on-going to increase affected people's participation in needs identification, programme design and implementation through effective feedback and complaints mechanisms. Some partners, for example, conduct post-distribution surveys with their beneficiaries to ascertain levels of satisfaction with aid received, monitor volunteer performance and prevent aid diversion. In addition, some partners have established hotlines to facilitate beneficiary feedbacks. Organisations further

4. For the Syrian Government, "gender-based violence means the preventions and response to violence against women, violence against girls and violence against boys"

maintain various social media accounts in Arabic to ensure communities have access to real-time information on what the international humanitarian community is doing.

The humanitarian community is concerned with any perception of discrimination from affected people in accessing humanitarian assistance, given as it is often a challenge in operations worldwide. Women and girls have reported fearing violence and abuse in camp settings, at distribution and service points, when using WASH facilities. The prevention of sexual violence and exploitation during the provision of humanitarian assistance remains a commitment from all partners working under this plan. To address these and other concerns, humanitarian actors are encouraged to establish or strengthen awareness of code of conducts for their staff and partners in the field, roll out training on prevention and protection measures and establish reporting and complaints mechanisms.

Gender

There are disparities between women and men due to socio-economic vulnerabilities, lack of decision-making power and lack of access and control over resources. In some areas women and girls face increased restrictions on their mobility due to insecurity and lack of male family members who can accompany them to services. Moreover, the humanitarian situation has an impact on existing gender roles, influencing vulnerable groups' (such as the disabled, the elderly, and chronically ill) access to assistance due to physical, social and cultural barriers. Ensuring that humanitarian assistance identifies the distinct needs and concerns of women, girls, boys and men is vital in order to have a more efficient impact on their lives. Programming should adapt to the particular vulnerabilities of individuals and communities to reduce risk of exposure to violence and strengthen resilience.

- As a matter of principle, humanitarian actors working in the various hubs are committed fully to incorporate gender in planning and response. Sector and OCHA gender focal points have been established and trained on gender issues by an Inter-Agency Capacity Building Gender Advisor (GENCAP) to support gender mainstreaming in each hub. They will assist sectors and partners in ensuring full commitment to gender in the humanitarian response in the following ways:
- Strategic planning: gender inequality in accessing services and the distinct needs of women and girls, as well as men and boys, are considered throughout the Humanitarian Planning Cycle (HPC) in each sector section.
- Assessments: Assessments tend to have a disproportionate number of male assessors compared to females, affecting their quality. Creative strategies will be established to ensure meaningful consultation with women and girls so that their needs and concerns are articulated and

addressed in the response. More advocacy and awareness-raising will be done to increase the number of women as assessors, key informants and experts.

- Operational planning: Project review and prioritisation will ensure gender considerations are taken into account, including through the use of the IASC Gender Marker. There will be increased targeting of activities to reach the most vulnerable groups across all sectors, including ensuring equal access for men and women to assistance, employment, capacity building and cash-for-work programmes.
- Data collection, use and analysis: Sector data is disaggregated by sex and age. Building on progress in 2015 in breaking down data by sex and age, there will be increased efforts by assessment leaders, sector coordinators and partners systematically to collect, use and analyse data that is disaggregated by sex and age and incorporate it into planning and implementation.

Resilience

Five years into the crisis, Syrians have been calling for more sustainable solutions to support their livelihoods and generate income. Affected people have exhausted their resources and remain with little or no opportunity to re-build their livelihoods. Host communities are also overstretched, putting significant stress on basic services as a result of increasing demands. Unemployment has skyrocketed while towns have been abandoned due to the limited availability and high cost of commodities, soaring fuel prices, damage to infrastructure, insecurity, and the closure of markets. It is estimated that one in three inhabitants of urban areas is an IDP. Of particular concern is the situation and coping capacity of children and youth, many of whom have lost opportunities for education, protection, participation and the perspective of a dignified future.

To address these challenges in 2016, a multi-sector resilience-building approach is needed. With a view to reducing dependency on aid, avoiding exploitative economic practices, reducing vulnerabilities and inequalities, and alleviating the impact of displacement, resilience will be built at the community, household and individual level and will be integrated across sectors. While maintaining a humanitarian focus, programmes will emphasise the restoration of livelihoods, maintaining public and social services (such as health and education), economic recovery, fostering social cohesion and protection, and providing sustainable habitat. Rehabilitating services and infrastructure, especially in locations under pressure from IDP flows, will ensure access to recovery opportunities for households and communities. Food assistance for the creation of community assets and restoration of productive assets and agriculture are key elements that will improve livelihoods. Other measures to promote resilience and reduce vulnerability will include

strengthening the capacity of civil society and national services delivery institutions, promoting grass-root economic activity– also through the local procurement of emergency supplies-, enhancing the sustainability of service systems, and providing capacity building and opportunities for the future of children and youth - in line with the No Lost Generation initiative. Capitalising on Syrian resources, reviving local economies, engaging with the private sector, and relying on Syrian knowledge will be integral to the successful implementation of these programmes.

NO LOST GENERATION (NLG)

The NLG initiative was launched by a consortium of partners in 2013 to focus attention on the plight of children affected by the crisis in Syria. By articulating real concerns about the possible 'loss' of a whole generation of children, adolescents and youth to the effects of violence and displacement, the initiative put education and child protection at the centre of the response in Syria, and across the five refugee hosting countries (Turkey, Lebanon, Jordan, Iraq and Egypt).

Some 6 million children are estimated to be in need in Syria, and those living outside are more and more vulnerable., The next phase of the NLG aims to renew focus and efforts in ensuring a protective environment in which children and youth can heal, learn and strive again to realise their full potential. These investments are required if we are to count on a generation of children in Syria who can rebuild their country, play a positive role in society and contribute to a prosperous future for the country.

The second phase of the NLG will focus on three inter-related pillars: Education, Child Protection, Adolescents and Youth. The 3 pillars will be guided by four interdependent strategies:

- i) Scaling up the supply of and access to services;
- ii) Strengthening the quality of these services;
- iii) Increasing demand for services, and addressing barriers to access to services; and
- iv) Advocating for and supporting legal and policy reform to strengthen the existing national education and child protection delivery systems.

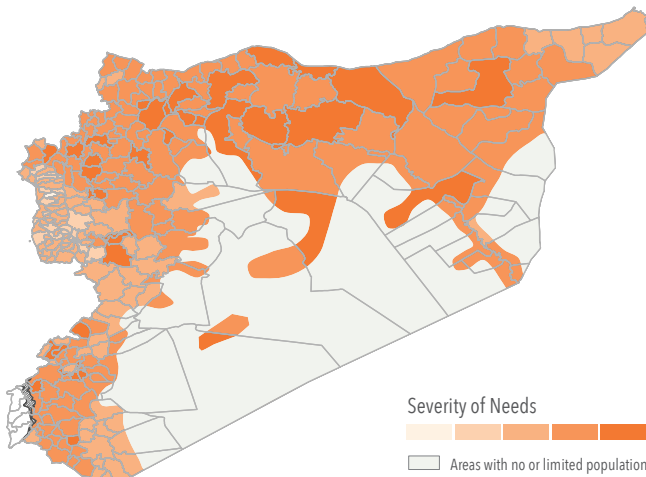
OPERATIONAL

CAPACITY

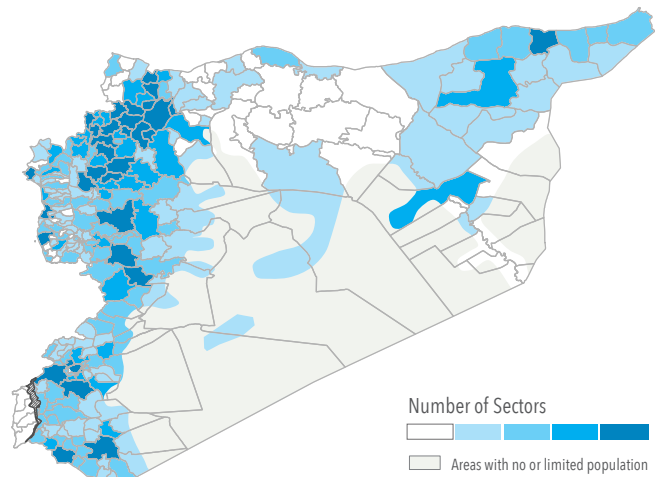
The humanitarian response in Syria is a complex operation with humanitarian assistance and protection services delivered to millions of affected people mainly from multiple UN hubs from within Syria, as well as from Turkey, Jordan, Lebanon and Iraq. Since the inception of the WoS approach, significant progress has been made regarding information exchange and operational coordination, reducing overlap in coverage and facilitating response by the most direct and effective modalities of assistance.

Despite maintaining a strong presence throughout the country and markedly improved coordination and information sharing, significant gaps still remain in coverage throughout the country, particularly in hard-to-reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN. Beyond security-related access constraints, administrative procedures and the variable institutional capacity of national humanitarian actors impact upon the operational reach and effectiveness of actors delivering humanitarian assistance to people across Syria.

Severity of Multi-sector Needs



Multi-sector Operational Presence (Sept. 2015)



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

The maps above cross-reference the severity of needs across sectors and the operational presence of the sectors as of September 2015. They demonstrate that many areas assessed to be most in need are also those that are the most difficult to reach and areas where high needs are well-covered show lower overall severity.

HUMANITARIAN

ACCESS

In 2015, some progress was made in addressing some administrative constraints on effective humanitarian response. There was a marked increase in the numbers of visa approvals for UN and INGOs and in Syrian NGOs authorised by the Syrian government to partner with UN agencies. One additional INGO was also approved by the Syrian government to operate in Syria and some agencies reported improvements in the custom clearance procedures. Cross-border clearances and other administrative aspects were negotiated with host countries and advocacy was undertaken with concerned stakeholders on the principles of humanitarian action and their relationship with humanitarians.

However, throughout 2015, safe, unimpeded and sustained humanitarian access in Syria remained a significant challenge for humanitarian actors, due to a confluence of factors including widespread insecurity, bureaucratic procedures, the closure of many key border points and access routes, and limited partnerships. In parallel, humanitarian space has shrunk in areas where terrorist groups listed under UNSCR 2170, 2178 are present.

The situation in the most affected governorates and the resulting increase in explosive remnants continue to affect civilians, humanitarian outreach and the safety of humanitarian actors, resulting in decreased humanitarian presence in the areas of highest need. Civilian facilities and other public infrastructure, particularly health facilities, schools, places of worship and markets continue to be targeted.

It is anticipated that heightened insecurity will increase the dependence on remote management, necessitating improved risk analysis, sharing and management measures, as well as flexible operational modalities, including reinforcing the capacity of national humanitarian actors.

While humanitarian actors continue to reach millions of people in all sectors throughout the country through flexible modalities of aid, of particular concern is the situation of the 4.5 million people in need of humanitarian assistance and protection in hard-to-reach areas, including 393,700 people in fifteen locations listed in UNSCR 2139, 2165, 2191, as updated by the UN. Despite their best efforts, in the first eight months of 2015, humanitarian actors have been able to reach only a small fraction of people in need in these areas.

Against this backdrop, preserving and where possible expanding humanitarian access will require increasing acceptance for humanitarian action, in line with the relevant provisions of GA resolution 46/182, as well as effective

cooperation with international and national NGOs. This will require advocacy with all relevant stakeholders to increase the operational space of humanitarian agencies, particularly for international and national NGOs.

Joint actions by humanitarian actors working under the HRP:

- Advocate with all relevant stakeholders at all levels to facilitate humanitarian access and protect affected civilians in line with their obligations under international law, IHL and HRL as well as the provisions of UNSCR 2139, 2165, 2191.
- Commitment by humanitarian actors to provide quality principled humanitarian assistance by adhering to the key humanitarian principles of humanity, neutrality, impartiality and independence, which are prerequisites to increase acceptance by all stakeholders. This includes renewed efforts to raise awareness on humanitarian principles with all relevant stakeholders.
- Maximising opportunities for increased access, such as through a greater support to the humanitarian aspects of local agreements with relevant stakeholders which should increase prospects for national reconciliation; and through continued strengthening of efforts in operational hubs and at WoS levels to ensure the most appropriate, safe and timely modality of assistance is used as and when access opportunities shift.
- Strengthening accountability frameworks for humanitarian actors that aim to link principles of due diligence, performance and capacity assessment throughout the project cycle.
- Strengthening engagement with and capacity building of national humanitarian actors as they have the most opportunities for accessing people in need.
- Increasing the operating space and improving the legal framework for humanitarian partners through advocacy with the GoS, governments of the neighbouring countries and other stakeholders.
- Advocate for strengthened needs analysis to ensure that the humanitarian response is tailored to local contexts.
- Strengthening risk management measures by using context-specific approaches to reduce risk with a focus to 'stay and deliver'.
- Where appropriate, advocate for the establishment of mobile and flexible programming, including carefully-designed cash programming and rapid response teams, to allow for more varied and timely humanitarian assistance.
- Advocacy with donors for flexible and access-conducive

RESPONSE

MONITORING

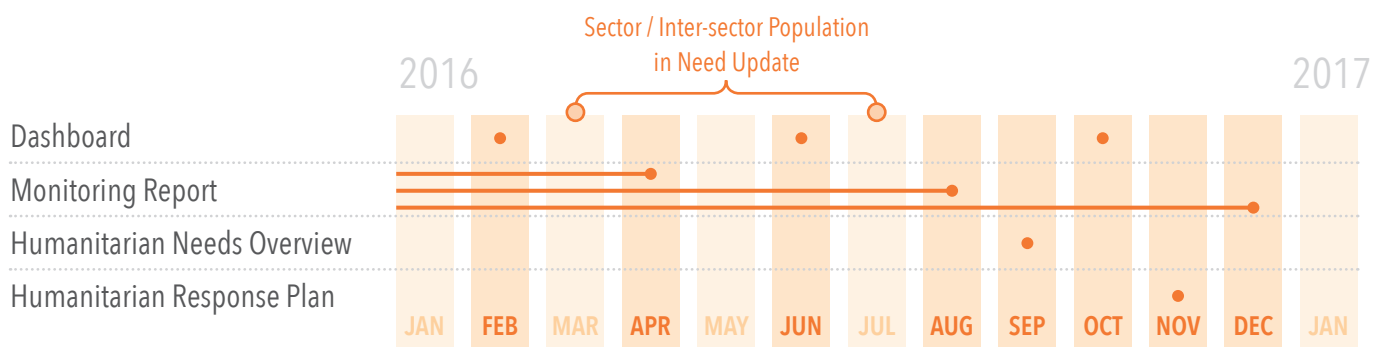
Throughout 2015, the WoS approach has enabled humanitarian partners to develop a common and more in-depth understanding of needs and response across the country. Information management, analysis, and monitoring have been substantially strengthened within and across sectors, despite the constraints posed by the operational environment. Systems established in 2015 to improve the regularity, complementarity and timeliness of needs monitoring as well as programme delivery will continue to be enhanced for more targeted operational planning and deeper contextual analysis in 2016.

Following the investments made on strengthening coordination and information management capacities throughout 2015, the humanitarian community has recognised a need to invest in improved response monitoring. To this end, operational partners demonstrated increased commitment to utilising reporting systems that track data at the lowest administrative level possible, including data disaggregated by sex and age, thereby permitting evidence-based prioritisation. Timely identification of emerging programming gaps and overlap will facilitate strategic reorientation. Refined indicators will enable more meaningful sector reporting and multi-sector analysis at both the output and outcome levels. In 2016, humanitarian actors will continue to focus on: (i) increasing the coverage and quality of information through increased synergies between information initiatives from the different hubs including urban centres' needs assessments; (ii) producing more regular updates of needs at the sector and inter-sectoral levels; (iii) continuing efforts to strengthen tracking of population displacement.

In areas with access constraints, assessment and monitoring is difficult to undertake via traditional methods, so innovative approaches to response monitoring will be used. Third party and peer-to-peer monitoring has been progressively incorporated into monitoring systems to enhance available information and analysis. Community feedback will be more systematically included into response monitoring processes.

Aligning to IASC norms for HRP monitoring, humanitarian actors will aim at frequently analysing and aggregating information in Periodic Monitoring Reports (PMRs), which provide an overview of trends and will be used to adjust needs, targets and funding required. Sectors will also produce sector-specific response monitoring products and reports. Analysis of population movements, needs and a re-evaluation of severity compared to response will take place prior to the PMR reporting to feed into decision making and response adjustments. Humanitarian leadership will review the direction of the overall response based on monitoring information. The United Nations will discuss the findings of the PMRs with the Government of Syria.

ILLUSTRATIVE CALENDAR FOR THE 2016 HUMANITARIAN PROGRAMME CYCLE



PART II: OPERATIONAL RESPONSE PLANS

-  Protection
-  Camp Coordination & Camp Management
-  Coordination
-  Early Recovery and Livelihood
-  Education
-  Emergency Telecommunications
-  Food Security and Agriculture
-  Health
-  Logistics
-  Nutrition
-  NFI Shelter and NFI
-  Water, Sanitation & Hygiene (WASH)



PEOPLE IN NEED

13.5M

PEOPLE TARGETED

7.2M

REQUIREMENTS (US\$)

235,979,938

OF PARTNERS

49

PROTECTION OBJECTIVE 1:

1 Increase the protection of affected people at risk from the consequences of the crisis through sustained advocacy, risk mitigation and enhanced protection responses.

RELATES TO S01 , S02

PROTECTION OBJECTIVE 2

2 Strengthen the capacity of national community-based actors to assess, analyse and respond to protection needs.

RELATES TO S01 , S03

PROTECTION OBJECTIVE 3

3 Girls and boys affected by the crisis, with a focus on those most at risk in prioritised locations, have access to effective and quality child protection responses in line with the Child Protection Minimum Standards in Humanitarian Action

RELATES TO S01 , S02

PROTECTION

Protection sector analysis

Protection and community services are complementary in Syria. Affected people face protection⁵ risks in their daily lives with diminishing capacity to mitigate these risks. Targeting civilian areas and facilities, human rights violations, access constraints, and violations of international law persist unabated. As the crisis continues, vulnerabilities based on gender, age and other factors, such as disabilities, intensify. Community resilience is being tested due to disruption of livelihoods and psychosocial distress resulting in harmful coping strategies. This includes the worst forms of child labour, early and forced marriage and risk of sexual exploitation. People living within Syria experience complex protection needs. Lack/loss of civil documentation is a challenge in 91 per cent of 262 surveyed sub-districts in Syria. Child recruitment is a prominent concern in 42 per cent of 262 sub-districts, with children being recruited at an increasingly younger age. Explosive remnants are a concern in 39 per cent of 262 surveyed sub-districts, where a significant number of children live in affected areas. 11 of 14 Governorates raise GBV as a concern. Psychosocial distress as a result of the crisis is reported at a significant scale. Palestine refugees continue to face severe protection risks, with over 95 per cent dependent on humanitarian assistance. Solutions to the crisis in Syria cannot be attained only through the implementation of the mandate of the humanitarian actors. Only an end to the crisis will preserve lives and safeguard the safety and dignity of affected civilians. Therefore, better coordination of provision of services and assistance, information management, analysis and regular and timely advocacy messages are essential in line with the sector strategy.

Protection sector response strategy

In 2016 the protection sector will seek to expand the protection presence and coverage through community activities, mobile response capacity and where possible, strengthening the ability of duty-bearers to respond to protection needs including through advocacy. Underpinned by five objectives, the sector aims to increase the protection of affected people at risk from the consequences of violence, including through the provision of quality child protection responses, GBV services and reducing the impact of explosive remnants. In 2016, humanitarian actors working in the sector will be required to scale up in areas of existing operations, to provide more comprehensive responses, and seek opportunities to access underserved populations. The protection sector will support partners strategically to expand programming and improve the quality of services.

Sustained advocacy on protection needs, international law, and increased access and services underpins the operations of the protection sector, as well as the promotion of “do no harm” principle in all aspects of humanitarian action. Increasing coordination between response hubs as well as relevant stakeholders is critical so the protection sector can ensure understanding of the needs and gaps, and a coherent response. In 2016, the sector aims to build on achievements relating to collective information gathering and sharing, analysis and advocacy.

Prevention and Risk Mitigation

In 2016, a stronger emphasis will be placed on actions designed to prevent and mitigate protection risks to support the resilience of communities. This will be done through community-based case management and outreach initiatives that empower at-risk groups and strengthen positive coping

5. For the purpose of this plan, ‘protection’ refers to the protection of all affected civilians including men, women, children, and other groups with specific needs from violence, exploitation, discrimination, abuse and neglect. The Government bears the primary responsibility for protection of its citizens. In the course of implementing protection activities, the UN will work with the government to develop national institutional capacity to uphold humanitarian norms and principles.

PROTECTION OBJECTIVE 4

4 Survivors of GBV have access to quality comprehensive GBV services and measures are in place to prevent and reduce risks of GBV

RELATES TO S01 , S02 

PROTECTION OBJECTIVE 5

5 Reduce the impact of explosive remnants through risk education activities

RELATES TO S01 , S02 

mechanisms. Engagement with duty bearers provides an opportunity to advocate on reducing threats and create safe access to referral pathways. Support will be provided to national authorities to increase capacity to provide civil documentation.

Response by humanitarian actors working on GBV and health will enable survivors to have safe access to services. Community awareness on issues relating to domestic and community violence will be promoted and GBV increasingly mainstreamed across sectors to mitigate the risks women and girls face. Child Protection actors will continue to expand and diversify programming in order to prevent and respond to specific vulnerabilities, including child recruitment, child labour and family separation. This will be achieved through ongoing community-based child protection activities including psychosocial support. Age- and gender- appropriate programming and communication for development initiatives will improve the impact of programming for affected people. The No Lost Generation Initiative provides the overall strategic framework to inform the child protection response. Education activities on explosive remnants targeting both males and females of all ages where risks exist including hard-to-reach areas will be critical in reducing injuries and fatalities.

Recognising the great risk to civilians, the UN will submit proposals for consultation to the Government of Syria in order to find ways to reduce exposure to risks of Explosive remnants.

Expand services and mobile response

In 2015, 158 out of 217 surveyed sub-districts in Syria identified the lack of availability or unreliability of basic services as an impediment to accessing community services. To support community service centres, community learning, safe spaces and information dissemination, the protection sector seeks to increase investment in mobile and outreach activities to improve case management and awareness raising capacity. These activities will be directed at vulnerable groups such as affected adolescent boys and girls and will involve working with volunteers and community outreach workers. Mobile teams will deploy to assess protection risks and vulnerabilities of recently displaced

persons and/or provide information and counselling services, including for women and girls whose mobility has been reduced by extremist groups. In hard-to-reach areas or locations listed in UNSCR 2139, 2165, 2191, as updated by the UN, humanitarian actors working in the sector will seize every opportunity to deliver services and monitor needs, including those provided through local agreements or cross-line missions. Case management of survivors of violence including child protection cases (e.g. UASC, children at risk and/or survivors of violence) and survivors of sexual violence is a critical pillar of the protection response. In 2016, initiatives such as livelihood support and community-based reintegration programmes for children formerly associated with armed groups and working children, and those in need of psychosocial support, will be up-scaled.

Supporting national humanitarian actors

The protection response strategy will continue to stress cooperation with national humanitarian actors and enhancing community and institutional capacity in both organisational and technical skills. Syrian actors, supported by all hubs, partnership initiatives and remote management, are the main providers of the protection response. Given the limitations of remote management and remote capacity building, the response strategy will explore innovative approaches to programming and capacity building in a remote context. This includes the use of telecommunications and mentorship programmes. Partnerships between technical INGOs and national organisations will be critical to expanding risk education.

Sector gaps and challenges

In 2016, the sector continues to have gaps that it will seek to address. To date, partners have had limited capacity to engage in protection assessments although progress is being made. Given the emphasis on civil documentation and housing, land and property, more partners with the appropriate legal and technical expertise are required. There continues to be a clear gap in partners working on issues related to GBV, including support from international partners to work with national humanitarian and community actors, particularly on long-term capacity-

building initiatives to develop expertise. Access continues to be a challenge for the delivery of protection responses. In 2016, the identification and engagement of new partners is required to ensure expanded coverage and diversification of programming. For organisations operating from Damascus, regulations that would allow for partnerships and assessments can significantly expand the response capacity outside of urban areas.

Linkages with other sectors

Protection, child protection and GBV are increasingly being mainstreamed throughout the humanitarian response, with

the development of Syria-specific tools and the roll out of new guidelines. The protection sector will continue to work closely with the CCCM and Education sectors, to support risk education and protection response in schools, in addition to Early Recovery and Livelihoods sector on vulnerabilities.

Cooperation between actors working on GBV and health and food security and livelihood services will continue, as well as support to health-protection advocacy. The Sector will continue to work with food security and livelihood (FSL) to promote livelihoods and with child protection to support risk education.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | | BY SEX & AGE | |
|------------------------|----------------|------|-------------------------------|--------------|----------------------------|
| | Total | IDPs | Host and non-Host communities | % female | % children, adult, elderly |
| PEOPLE IN NEED | 13.5M | 6.5M | 7M | | |
| PEOPLE TARGETED | 7.2M | N/A | N/A | | |
| FINANCIAL REQUIREMENTS | \$ 235,979,938 | | | | |

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Line ministry (only for Damascus-based agencies): Ministry of Social Affairs

PEOPLE IN NEED


6.5M

PEOPLE TARGETED


3.2M

REQUIREMENTS (US\$)


25,447,375

OF PARTNERS


13

CCCM OBJECTIVE 1

1 Enhance capacity to provide life-saving multi-sectoral assistance to IDPs residing in IDP sites

RELATES TO SO1 , SO2 

CCCM OBJECTIVE 2

2 Disseminate timely information on sudden mass displacements.

RELATES TO SO1 , SO3 

CCCM OBJECTIVE 3

3 Promote participatory management of IDP sites and improvements in the quality of basic services in IDP sites.

RELATES TO SO1 , SO2 

CCCM OBJECTIVE 4

4 Strengthen the resilience of household and communal coping mechanisms in IDP sites.

RELATES TO SO1 , SO2 

CCCM OBJECTIVE 5

5 Enhance capacities in camp/collective centre and protection mainstreaming in IDP sites for national humanitarian actors.

RELATES TO SO1 , SO2 

CAMP COORDINATION & CAMP MANAGEMENT



CCCM Sector Analysis

There are an estimated 6.5 million Internally Displaced Persons (IDPs) residing in Syria.⁶ 37 per cent of IDPs live in either camps or collective centres⁷. Often IDPs are displaced multiple times. In a six month period (April to November), the CCCM sector tracked some 700,000 Syrians either as newly displaced or re-displaced. Tracking displacement has been a key step towards providing life-saving assistance to the newly displaced IDPs.

In keeping with the trend of the previous four years, IDPs seek refuge in camps and collective centres only as a measure of last-resort⁸, after they have exhausted all other preferable choices, such as staying with friends and families or in rented accommodation. Also, IDPs move to camps at the start of their displacement and move out once they have identified another alternative. For this reason, camps function as reception/transit centres when sudden displacements occur and as a last-resort for the most vulnerable IDPs. Currently, there are 1.74 million IDPs in camps and collective centres (516,000 women, 519,000 men, 344,000 girls, and 363,000 boys). Of these, 197,762 IDPs are living in 145 informal self-settled camps and are receiving some regular humanitarian assistance⁹. These are primarily located in Harim district of Idleb and Azaz district of Aleppo governorate. The rest of the IDPs are scattered in an estimated 3,030 collective centres, of which only 935 received consistent multi-sectoral assistance in 2015.

Due to the lack of access and shrinking humanitarian space in northern Syria, very few NGOs are able to provide camp management services. The majority of the IDP sites are either self-managed by the IDPs themselves or by the owners of the land where the IDPs are settling. Due to their informal nature, the basic infrastructure in these sites remains poor.

Camp Coordination & Camp Management Sector Response Strategy

In the Syrian response, the Camp Coordination and Camp Management (CCCM) response strategy for 2016 focuses on three critical areas: 1) promoting good management of IDP sites, including both camps and camp-like setups, and ensuring that they are in line with humanitarian principles and internationally agreed norms and standards; 2) streamlining the provision of multi-sectoral life-saving assistance to IDP sites (collective centres, self-settled IDP camps, planned IDP camps, and transit centres); and 3) coordinating the collection of accurate data of displacements and IDP movement trends so as to inform the humanitarian response.

Members of the CCCM cluster strive to provide consistent life-saving multi-sector services to IDPs living in collective centres, planned and transitional camps, spontaneous/self-established camps and transit camps. The cluster/sector advocates for inclusive and participatory management of these sites to ensure appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people. Furthermore, the cluster tracks large-scale displacements enabling timely life-saving assistance from all other sectors.

As camps and collective centres are utilised only when IDPs have exhausted all household assets, it is vital that camps and collective centres remain a central focus for humanitarian response across all sectors, with special attention given to WASH, NFI/ Shelter, and Food Security. To marshal these resources effectively and make the response more accountable, the CCCM sector will continue its efforts to establish IDP committees to manage IDP sites and oversee the provision of basic services. The CCCM sector has set two targets for the HRP response plan. The first is to double the number of IDPs provided with multi-sector life-saving support in IDP sites (SO1.1.2).

6. Syria Humanitarian Needs Overview (HNO) 2015, pg 25.

7. WoS Assessment (WoSA), 2015

8. Ibid.

9. ISIMM September 2015

and to double the amount of IDPs residing in camps with participatory management structures (SO3.1).

To this end, the sector's priority is to reach more collective centres throughout Syria with multi-sectoral support, considering that only 925 of an estimated 3,030 collective centres received aid in 2015.

Ensuring that the humanitarian response in IDP sites is channelled through representative participatory management structures (like IDP committees) is also key to ensure that the response provides principled quality service tailored to the needs of the beneficiaries. Women and children constitute the majority of camp and collective centre residents (70 per cent of residents) but the specific needs of girls, boys, and women are often subsumed in those of the household. Of particular concern is that adult and adolescent women feel unsafe, a situation the CCCM sector plans to continue to improve in 2016. Focus Group discussions revealed that many women in camps with poor lighting were subjected to more incidents of sexual harassment and, in general, felt less secure in their camps. The CCCM sector will seek to address these issues in 2016, primarily by engaging women directly in camp management structures, but also by setting aside more funds for critical site improvements, privacy partitions and safety patrols.





Linkages with other sectors

Due to its cross-cutting nature, the CCCM sector closely coordinates with the WASH, Health, NFI/Shelter, and Food Security sectors. This coordination enables the CCCM sector to highlight gaps in coverage, alert members in the area, and mobilize resources to address needs. Through this coordination the CCCM sector has been able to cover 75-80 per cent of the needs in accessible IDP sites for each of these sectors.

The IDP movement-tracking efforts of the sector remain critical in informing the efforts and responses of the other respective sectors/clusters. The CCCM will expand its role in coordinated IDP movements tracking and informing the sectors response and the humanitarian community on the numbers and the locations of the IDPs, with an emphasis on sudden-onset displacement.

Children make up nearly 40 per cent of the population living in IDP camps. The CCCM sector will continue to engage with other sectors to ensure that the modalities they are using (such as hygiene promotion, outreach, information sessions, and infrastructure) are tailored to the needs of children. The sector will also redouble its efforts to engage with the education sector to design appropriate teaching initiatives for the camp residents.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|------------------------|---------------|------------------|---|---|
| | IDPs | Host communities | % female | % children, adult, elderly |
| PEOPLE IN NEED | 6.5M | N/A |  |  |
| PEOPLE TARGETED | 3.2M | N/A |  |  |
| FINANCIAL REQUIREMENTS | \$ 25,447,375 | | | |

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Line ministry (only for Damascus-based agencies): Ministry of Foreign Affairs and Expatriates

PEOPLE IN NEED



Humanitarian partners

PEOPLE TARGETED



Humanitarian partners

REQUIREMENTS (US\$)



58,673,597

OF PARTNERS



Humanitarian partners

COORDINATION OBJECTIVE 1

1 Provide effective coordination support at hub and WoS levels, facilitating a timely and evidence-based response informed by enhanced needs assessment and information management with a focus on strengthening the response capacity of national humanitarian actors.

RELATES TO SO1 , SO2 

COORDINATION OBJECTIVE 2

2 Maintain coordination and operational capacity for UNRWAl-led programmes targeting Palestine refugees.

RELATES TO SO1 , SO3 

COORDINATION OBJECTIVE 3

3 Enhance security risk management measures to ensure the safety and security of UN personnel and continuity of humanitarian programme delivery

RELATES TO SO1 , SO2 

COORDINATION AND COMMON SERVICES



Coordination and Common Services Sector Analysis

The response in Syria is facing growing needs, operates from multiple geographical hubs and is conducted by a very large number of humanitarian actors. Coordination support and streamlined provision of common core support functions is critical to ensuring a principled, transparent and efficient response to the Syria crisis. The United Nations Resident and Humanitarian Coordinator for Syria leads and coordinates humanitarian action inside Syria. His work is complemented by the Regional and Deputy Regional Humanitarian Coordinators for the Syria Crisis, and Humanitarian Coordinators in neighbouring countries to implement the WoS approach which is the framework for humanitarian action. OCHA, in line with its global mandate, supports the humanitarian leadership in ensuring the effective coordination of the response inside.

Coordination and Common Services sector response strategy

Building on achievements made in 2015 to institute a more responsive humanitarian coordination system ensuring coherence and transparency while facilitating a timely and needs-based response, capacity in 2016 will continue to be mobilized to ensure effective sector and inter-sector coordination both at the hub and WoS levels.

NGO fora have been important in supporting the articulation and implementation of the WoS approach, by facilitating coordination, representation and participation of the NGO community in the HPC and encouraging a principled and effective response.

The CCS Sector will prioritise improved collaboration among humanitarian actors in key elements of the response, including the Humanitarian Programme Cycle (i.e. needs assessment, strategic planning, implementation, resource mobilization, monitoring and accountability), and information management. In line with IASC guidelines, operational coordination mechanisms will be streamlined to

strengthen operations, enhance advocacy and to facilitate safe, secure and timely access to people in need through the most effective routes. The IASC mandated coordination structures will further link up closely with coordination platforms regrouping specific constituent groups (NGOs) and assisting with outreach to and reinforcing the capacity of implementing partners.

In the past 12 months, the WoS approach has enabled humanitarian partners to develop a common and more in-depth understanding of needs across the country. Information management, analysis, and monitoring have been strengthened, despite the constraints posed by the operational environment. In 2016, continued efforts to track IDP movements will be prioritised to enable a more effective response to the largest displacement crisis the world is facing. Furthermore, building on the efforts undertaken to strengthen localised needs assessments and analysis of needs in urban centres, additional efforts will be undertaken to expand city profiles.

Country-based pooled funds remain valuable instruments to enable humanitarian organisations (particularly national NGOs) to leverage access and deliver assistance using the most appropriate and expedient modality.

They remain flexible and well-suited vis-à-vis the operational complexity and scale of crisis in Syria, both present and foreseeable; and represent a useful tool to empower the Humanitarian Coordinators to prioritize funding on the basis of the specific context and priorities. In 2016, the Syria ERF, the HPF and the portion of the Jordan ERF dedicated to the response in Syria will disburse funds in line with the programmatic framework of the Humanitarian Response Plan (HRP) to enable the delivery of humanitarian assistance in Syria.

In response to priorities indicated by national NGOs, facilitation of training and technical support is critical to enabling continued and enhanced delivery of humanitarian assistance and protection responses for crisis-affected people. Reinforcing the response capacity of national humanitarian

actors and more closely engaging them in the articulation and operationalization of appropriate and principled response strategies will be prioritised in 2016 and will serve to improve assistance delivery modalities and targeting, while enhancing the effectiveness of actions and ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people.

UNRWA continues to provide dedicated coordination to ensure effective support to Palestine refugees. The deteriorating security situation in Syria has created additional risks to UNRWA personnel and Palestine refugees receiving assistance. Maintaining operational integrity while reducing the risk faced by staff and beneficiaries has required UNRWA to take risk mitigation measures including substantial investment in security infrastructure, personnel and equipment. UNRWA requires ongoing emergency funding to ensure the adequate staffing of its humanitarian response through the deployment of specialist emergency staff to implement, manage and monitor activities at the field and coordination levels.

With an increasingly complex security situation manifested in the form of heightened risks for UN staff and assets, as well as rising transactional costs in delivering aid to affected people due to access constraints, there is need for adequate security

support for UN Hubs and sub-offices inside Syria. UNDSS is responsible for providing oversight and operational support for the security management system in Syria, and plays a crucial role in supporting UN operations, particularly in hard-to-reach areas. In parallel, with its common service support function in line with the evolving needs of the UN Country Team in Syria, UNDSS will continue to undertake awareness and training sessions (SSAFE, Defensive Driving, etc) for UN agencies' staff and humanitarian actors.

Linkages with other sectors

The Coordination and Common Services Sector is linked directly with each sector and serves the Humanitarian Country Team (Syria), the Humanitarian Liaison Group (Turkey), and the Cross-Border Task Force (Jordan) as well as the Strategic Steering Group and relevant inter-sector/cluster groups at the hub and WoS levels in providing strategic leadership and overall coordination of humanitarian relief activities across all sectors targeting people in Syria as delivered by the UN and its operational partners. Operationalisation of response in geographic/thematic areas where needs converge will be a priority to be pursued with partners in 2016.

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PEOPLE IN NEED

 9.2M

PEOPLE TARGETED

 3.6M

REQUIREMENTS (US\$)

 148,470,742

OF PARTNERS

 17

ERL OBJECTIVE 1

1 Improve access to essential services and restore socio-economic infrastructure using labour-intensive schemes for the affected people and institutions.

RELATES TO SO1 , SO2 

ERL OBJECTIVE 2

2 Strengthen the coping mechanisms of affected people and vulnerable groups through the rehabilitation and restoration of disrupted livelihoods complemented by social protection schemes.

RELATES TO SO1 , SO3 

ERL OBJECTIVE 3

3 Promote social cohesion and local participation for more resilient communities.

RELATES TO SO1 , SO2 

EARLY RECOVERY AND LIVELIHOODS



Early Recovery and Livelihoods Sector Analysis

Five years into the crisis, Syria continues to experience massive destruction of its socio-economic infrastructure. The resulting hardships are perceived in every aspect of life. Basic social and municipal services are very hard to maintain and electricity supply has decreased, affecting investments, services, production and manufacturing. Inflated prices and fluctuating exchange rates, depleted resources and savings, and lack of income-generating activities have weakened the purchasing power of people in Syria, who suffer from a climbing unemployment rate and increasing loss of livelihood opportunities. The number of female-headed households and other vulnerable groups, such as persons with disability and youth at risk, has risen significantly.

Response Strategy

The early recovery and livelihoods sector aims to contribute to the resilience building of affected people and communities so as to overcome the crisis' negative consequences and maintain a decent standard of living. It ensures a response that provides affected people, including IDPs, host communities and Palestine refugees, with: (1) sustained and enhanced service delivery and basic community infrastructure; (2) creation and stabilisation of basic livelihoods and social protection for socio-economic recovery; (3) promotion of social cohesion and communities' engagement to strengthen the resilience of affected people and mitigate the effects of the protracted crisis.

The sector response strategy works in three strands:

Under the objective of improving access to essential services and restoring socio-economic infrastructure using labour-intensive schemes for the affected people and institutions, the early recovery and livelihoods sector will continue its efforts in solid waste removal and debris management. ERL will maintain its investment in rehabilitation and reconstruction of damaged basic social and

municipal services/infrastructure including agricultural irrigation networks, water, drainage and sewage networks, electricity networks and power stations, markets, primary and maternal healthcare centres, nurseries and schools. In parallel, the sector plans to implement renewable energy solutions such as solar lighting and heating, fuel briquettes and biogas to reduce the reliance on the unstable supply of fuel, thereby enhancing the resilience of affected people. In most of these interventions, the sector will follow labour-intensive approaches to create job opportunities and will continue to work closely with national humanitarian actors under a national framework to empower local capacity and sustain quality public services.

In support of the ERL's second objective of strengthening the coping mechanisms of affected people and vulnerable groups through the rehabilitation and restoration of disrupted livelihoods and social protection schemes, the sector strategy emphasises socio-economic recovery and provision of support for the sustained livelihoods of affected people. There will be a particular focus on vulnerable groups such as female-headed households, people with disabilities, youth and Palestine refugees. The sector will support reviving local markets and SME through micro-financing mechanisms in order to restore affected businesses such as the textile and sewing sector, repairs and reconstruction sector, food processing and many other small/medium businesses and self-reliance activities – including seed funding for youth social and business entrepreneurship. Moreover, in areas most affected by the crisis, the ERL sector will enhance local labour capacity to re-enter the labour market at the grassroots level. Moreover, in areas most affected by the crisis, the ERL sector will enhance local labour capacity to re-enter the labour market at the grassroots level through vocational training, job placement, assets replacement and other support mechanisms. Extending support to social protection schemes through cash transfers for particular groups facing increased levels of risks, such as families with vulnerable children, will also be considered a priority to ensure a minimum living standard and enhanced social inclusion.

In order to promote social cohesion and participation for more resilient communities, the ERL sector plans to empower affected local communities and institutions to cope with the consequences of the on-going crisis while developing the capacities of NGOs/CBOs to engage in emergency responses. Early recovery and resilience building initiatives will be designed in an inclusive participatory manner to promote social cohesion and foster local reconciliation through communal and inter-communal activities engaging both IDPs and host communities in the process. Knowledge and experience sharing have proven to be a successful partnership tool focusing on peer-to-peer collaboration and twinning activities, and will be considered as a model to be adopted so as to achieve specific and measurable goals in particular programmatic areas in the most affected governorates. Participation of affected local communities and affected people is of paramount importance in ensuring ownership and better identification of needs, as well as in the subsequent development and implementation early recovery activities. Engaging with youth and empowering them to participate in this phase is critical to bolstering the resilience of their communities and mitigating potential tensions. If engaged early in the process of local level response to needs and priorities, youth can play a major role as agents of change inducing positive solutions to rising tensions.

Linkages with other sectors

In order to ensure achievement of the overall strategic objectives of the HRP, the early recovery and livelihood sector designs its response based on a high level of communication and collaboration with other sectors. This collaboration is best manifested in three thematic areas: promoting local production and encouraging local procurement supported by business revival activities in cooperation with the Shelter/ NFI and child protection sectors; maintaining and restoring public health services in collaboration with the health sector; and rehabilitation of damaged infrastructure, such as schools and health facilities, in cooperative programming with the education and WASH Sectors. Participating in all inter-sectorial, inter-agency meetings and other relevant inter-agency processes is essential to ensuring appropriate linkages and establishing working relationships with the rest of the sectors. The ERL sector focuses on developing the capacities of NGOs and national humanitarian actors to bridge the gap between humanitarian assistance and more sustainable actions for recovery and reconstruction.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|------------------------|----------------|------------------|--------------|----------------------------|
| | IDPs | Host communities | % female | % children, adult, elderly |
| PEOPLE IN NEED | 3.6M | 5.6M | | |
| PEOPLE TARGETED | 1.4M | 2.2M | | |
| FINANCIAL REQUIREMENTS | \$ 148,470,742 | | | |

CONTACT

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 Line ministry (only for Damascus-based agencies): High Relief Committee

PEOPLE IN NEED

 5.7M

PEOPLE TARGETED

 4.6M

REQUIREMENTS (US\$)

 200,239,557

OF PARTNERS

 45

EDUCATION OBJECTIVE 1

1 Scale up safe and equitable access to formal and non-formal education for crisis-affected school aged girls and boys (5-17 years)

RELATES TO S01 , S02 

EDUCATION OBJECTIVE 2

2 Improve the quality of formal and non-formal education for school aged girls and boys (5-17 years) within a protective environment.

RELATES TO S01 , S03 

EDUCATION OBJECTIVE 3

3 Strengthen the capacity of the education system and communities to deliver a timely, coordinated and evidence-based education response at national and sub-national levels.

RELATES TO S01 , S02 

EDUCATION



Education Sector analysis

The protracted nature of the Syrian crisis has weakened the capacity of the education system to address critical education needs in the country. Five years into the crisis, 5.7 million children and adolescents (in and out of school), and education personnel, including over 44,500 Palestine refugees, are in need of education assistance. Schools and educational facilities continue to be attacked and suffer damages as a result of attacks, while students face severe risks by simply attending school. The total economic loss due to the dropout from basic and secondary education is estimated to be USD 10.67 billion, equivalent to about 17.6 per cent of the 2010 Syrian GDP.

Education Sector response strategy

During emergencies, education provides stability and structure, and helps bring a sense of normalcy to the lives of children and adolescents. Education saves and sustains lives and protects children and adolescents against exploitation and harm by providing them with the necessary skills and structured learning routines to survive, cope and face adversity.

The overarching goal of the Education Sector is to ensure access to safe, equitable and quality education for children and adolescents affected by the crisis in Syria and to strengthen the capacity of the education system and communities to deliver a timely, coordinated and evidence-based education response. In line with the No Lost Generation Initiative (NLG), the INEE Minimum Standards for Education and the fourth Sustainable Development Goal, the education sector partners will support scaled up equitable access to formal and non-formal education, especially for the most vulnerable girls and boys in hard-to-reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN.

Access to Education

Access strategies will include small-scale rehabilitation of damaged schools and establishment of other safe temporary/

alternative learning spaces, the provision of emergency gender-sensitive WASH facilities, and the procurement and distribution of basic school furniture. Quality non-formal learning initiatives such as Accelerated Learning Programs (ALP), catch-up classes, remedial and literacy and numeracy classes will be expanded. The response will also focus on provision of pre-primary education and Early Childhood Care and Education (ECCE) services and technical and vocational training. Social protection services will be supported through school feeding programs and the facilitation of school transportation to and from hard-to-reach and insecure areas. The education sector will also promote Back-to-Learning (BTL) and awareness-raising campaigns and the mobilisation and engagement of parents, families and communities in the education of their children. A communication strategy will be developed to restore the civilian character of schools and reduce their use as collective shelters and for other purposes than education.

Quality of Education

The education sector partners will intensify their efforts to improve the quality and relevance of education through particular attention to the teaching force. Professional development will be provided to teachers, facilitators, volunteers and school staff on child-centred, protective and interactive methodologies, classroom management and psychosocial support (PSS). Teaching staff will be also trained and supported to deliver on formal curriculum, self-learning materials, remedial and accelerated approaches and life skills. Support to teachers will be systematised through emergency incentives/allowances and adequate resources. Part of ensuring quality education is the continued distribution of textbooks and teaching and learning materials (e.g. school-in-a-box). The roll out of self-learning programs will not only cater to hard-to-reach out-of-school children, but also will constitute a key investment in supporting quality learning.

Education System Strengthening

Sector coordination capacity will be strengthened at both the national and sub-national levels. M&E systems will be improved to better inform targeting and programming, and policy frameworks will be developed to ensure that the education of children and adolescents is accredited and certified. Data collection, analysis and reporting related to formal and non-formal education will be improved, including tracking of out-of-school children, school-based assessments (including learning) and rapid assessments. Efforts will be made to standardise and harmonise basic learning training packages and other relevant education tools. Preparedness and contingency planning will be considered beyond traditional emergency repositioning of supplies through capacity development for partners to respond to immediate education needs in the fluid context of Syria. An advocacy and communication strategy will be developed to address critical policy gaps, outlining key challenges and recommendations.

Linkages with other sectors

The Education Sector will focus on inter-sector and inter-agency collaboration to boost complementarity, maximising the use of limited resources and improving response effectiveness and quality. National partners and humanitarian actors will continue to play a crucial role in addressing the needs of children and adolescents affected by the crisis in Syria. Schools will be used as an entry point for delivering other humanitarian responses. Existing cooperation will be strengthened and opportunities for collaboration between Education and other clusters/sectors will be explored and encouraged, including crosscutting issues such as gender and inclusive education.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|------------------------|----------------|------------------|--------------|-------------------|
| | IDPs | Host communities | % female | % children, adult |
| PEOPLE IN NEED | 5.4M | 0.3M | | |
| PEOPLE TARGETED | 4.5M | 0.04M | | |
| FINANCIAL REQUIREMENTS | \$ 200,239,557 | | | |

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 Line ministry (only for Damascus-based agencies): Ministry of Education

PEOPLE IN NEED



Humanitarian partners

PEOPLE TARGETED



Humanitarian partners

REQUIREMENTS (US\$)



1,339,640

OF PARTNERS



Humanitarian actors

ETC OBJECTIVE 1

1 Provide common security telecommunications, voice and data connectivity services to humanitarian actors.

RELATES TO S01 , S02 

ETC OBJECTIVE 2

2 Lead inter-agency emergency telecommunications coordination and information sharing to support the operational needs of humanitarian actors.

RELATES TO S01 , S03 

ETC OBJECTIVE 3

3 Build capacity of humanitarian actors and strengthen the ability to ensure safety of staff and assets in the field.

RELATES TO S01 , S02 

ETC OBJECTIVE 4

4 Provide targeted assistance to national NGOs that demonstrate a need for telecommunications assistance beyond their organizational capacity

RELATES TO S01 , S02 

EMERGENCY TELECOMMUNICATIONS



Emergency Telecommunications Cluster analysis

Telecommunications infrastructure throughout Syria has suffered significant damage due to the on-going crisis and indiscriminate destruction. In addition to damaged infrastructure and regular power outages serve to add to the downtime of communication systems in Syria. Lack of reliable telecommunications services hampers the ability of the humanitarian community to perform their work in the field. Coordination and delivery of common telecommunications services at hubs in Syria, Jordan, and Turkey is vital to ensuring that the humanitarian community can perform essential lifesaving work whilst maintaining the safety of staff and assets in the field.

Emergency Telecommunications Cluster response strategy

The overarching goal of the Emergency Telecommunications Cluster is to ensure that humanitarian actors have access to telecommunications services that allow them to perform their work in common operational areas whilst also having communication systems in place to enhance the safety and security of the humanitarian community.

In the context of the Syria crisis where the humanitarian response spans the neighbouring countries, strong coordination is very important. The coordination provided by the ETC helps to remove duplication by encouraging humanitarian partners to share technical infrastructure in common operational areas where it is feasible. For example, a telephone system (PBX) in a hub can be shared by multiple humanitarian agencies to avoid the need of each agency having to deploy their own. In areas where there is limited access to telecoms infrastructure, this coordination is particularly important to increase the availability of services to humanitarian partners.

Recognising the integral role of national humanitarian actors in the humanitarian response, the cluster will provide support by helping them with their communication technology needs through advice, information sharing and online training as identified by humanitarian actors.

In consultation with humanitarian partners, the following areas have been identified as focus areas of the ETC response strategy in 2016:

WoS:

- Maintain and expand common ETC services in operational hubs
- Training, coordination and information sharing amongst humanitarian partners

Syria:

- Expand VHF radio network coverage in common operational areas (Aleppo, Qamishli, Tartous and Homs), subject to the importation of telecommunications equipment into Syria
- Deploy radio operators at inter-agency radio rooms in common operational areas (Damascus, Aleppo, Qamishli, Tartous and Homs)
- Launch a seed funding initiative to assist national humanitarian actors with their communication needs

Turkey:

- Provide dedicated ICT helpdesk support at the inter-agency hub in Gaziantep
- Strengthen UHF radio network coverage to assist humanitarian missions in south-eastern Turkey.

Linkages with other sectors

As a support cluster, the ETC uses technology to enable humanitarian partners stay connected, and it provides systems that improve the safety and security of staff and assets in the field. In this way, the ETC is indirectly linked with all sectors.

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PEOPLE IN NEED


8.7M

PEOPLE TARGETED


7.5M

REQUIREMENTS (US\$)


1,235,603,095

OF PARTNERS


40

FSA OBJECTIVE 1

1 Provide emergency response capacity, life-saving, and life-sustaining assistance to the most vulnerable crisis-affected people, including people with specific needs.

RELATES TO SO1 , SO2 

FSA OBJECTIVE 2

2 Support livelihoods of affected communities and households by increasing agricultural production, protection of productive assets, and restoring or creating income-generating activities to prevent negative or irreversible coping mechanisms.

RELATES TO SO1 , SO3 

FSA OBJECTIVE 3

3 Improve the capacity to deliver essential services to affected local communities and support the rehabilitation of productive infrastructures

RELATES TO SO1 , SO2 

FSA OBJECTIVE 4

4 Improved quality of the response based on evidence, capacity building and strong coordination with the Food Security and Agriculture Sector and cross-sectors

RELATES TO SO1 , SO2 , SO3 

FOOD SECURITY AND AGRICULTURE



Food Security and Agriculture Sector analysis

Food security refers to the availability of, access to, and utilisation of food. Food insecurity is manifested by food consumption gaps, low dietary diversity and negative coping strategies, among other indicators. Sector assessments conducted in 2015 show that food insecurity has reached alarming heights in Syria. Key factors contributing to food insecurity in Syria include, but are not limited to: crisis, displacement, depletion of productive assets, lack of agriculture inputs, dampened purchasing power, fragmented markets and infrastructure, lack of employment opportunities, rising prices of food, fuel and agricultural inputs, and soaring inflation. An estimated 8.7 million people are in need of a range of food security related assistance. The most vulnerable groups are internally displaced people and returnees, households dependant on gifts, assistance and unskilled labour, small-scale farmers and herders, female-headed households, people with disabilities, and Palestine refugees. Rural households exhibit a higher prevalence of food insecurity compared to urban households, and one in three Syrians has fallen into debt as a consequence of their inability to purchase food. Of the 8.7 million people in need, at least 6.3 million people (category one) have food consumption gaps, suffer from significant loss of livelihood assets, and are resorting to negative or sometimes irreversible coping strategies (such as selling of assets). The remaining 2.4 million people (category two) are able to maintain minimally adequate food consumption only by engaging in negative coping strategies, and if not assisted will quickly slip into the first category. The assistance provided by sector partners in 2015 contributed significantly to mitigate the people's needs and the number of people in need would have been much higher without such assistance.

Food Security and Agriculture Sector response strategy

The sector in total targets 7.5 million people (with an estimated 3 million people receiving support from all sector objectives). The sector aims to ensure adequate food consumption for the most affected people, reducing

the number of people adopting negative coping mechanisms while supporting early and medium-term recovery of critical agricultural/livelihood assets and essential services related to food security. In doing so, the sector aims to contribute to the overall goal of food security, whereby food is available in sufficient quantities at both the household and community levels; affected people have access to food through regular assistance, purchase or production; and food consumed has a positive nutritional impact on the targeted population.

Sector Objective 1: Provide emergency response capacity, lifesaving, and life sustaining assistance to the most vulnerable crisis affected people, including people with specific needs. *Relates to Strategic Objective 1*

This objective targets a total of 7.5 million people, and will be pursued in two ways. First, the sector will aim to meet the immediate food needs of 1.2 million vulnerable people during cyclical or large-scale displacements by providing emergency (up to 2 weeks) and/or short-term (up to 3 months) life-saving food assistance, with adequate emergency response capacity (contingency planning) in place. Second, the sector aims to provide longer-term life sustaining food assistance to 6.3 million people (including Palestine refugees) through regular distribution cycles. The modality of this assistance – whether in kind, cash, voucher or a mix – will be determined according to different contexts. The response includes three types of packages: (i) emergency food assistance (2-4 weeks) would include up to 2100 kcal per person, per day (ii) short term food assistance (for up to 3 months, based on needs) for which at present, the recommended value of the food assistance is within a range of 70 per cent – 77 per cent of the 2100 kcal but can be up to 100 per cent based on the needs in a specific area and operational context; and (iii) longer-term food assistance (more than 3 months) will also seek to meet no less than 70 per cent – 77 per cent of the daily kcal needs but specific needs in specific areas should be considered to determine the most ideal value for this, with the possibility of topping up to 100 per cent of kcal needs for the most vulnerable people

or for those with specific nutritional needs as supplementary support. To ensure harmonisation, the sector will work with partners in determining the most appropriate food baskets and reference basket for cash/voucher value based on emerging needs and fresh evidence in various operational contexts.

Geographical targeting (assuming access and insecurity patterns remain the same) will focus on the current severity ranking at the sub-district level (based on the percentage prevalence of people in need across urban, peri-urban and rural areas). However, given the volatility of the situation, it is expected that severity patterns will change over time, so partners will continue to adapt their geographical targeting as per emerging needs and access. At the household level, targeting will be along three approaches: (i) the sector will target new IDPs on a short-term basis (2 weeks to 3 months, based on needs) and then assessments to determine those most in need of food assistance will extend food assistance to those IDPs who meet the vulnerability criteria: (ii) for resident/host/non-IDP people, a harmonised vulnerability analysis accounting for both household and socio-economic criteria will determine those most in need of food assistance; (iii) all Palestine refugees will be targeted.

Sector Objective 2: Support the livelihoods of affected communities and households by increasing agricultural production, protection of productive assets, and restoring or creating income generating activities to prevent negative or irreversible coping mechanisms. *Relates to Strategic Objective 3*

This objective targets a total of 4.3 million people and seeks to increase food production, increase productive assets and create livelihood opportunities for targeted people. The objective will be achieved through the provision of appropriate inputs for agriculture, backyard food production, productive asset building, veterinary support, and income generating activities focused on food processing and production (such as flour mills). The modality of assistance – whether in kind, cash, voucher or a mix of modalities – will be based on varying contexts. For agriculture support, seeds for production of cereals, legumes, tubers and vegetables will be provided along with other inputs (equipment, fertilizer and pesticide) as a harmonised package for winter and spring. Livestock assistance (e.g. provision of live animals for asset building, feed or veterinary support for asset protection) will also follow sector guidelines on recommended ‘packages’ to be distributed. Synergies will be explored with the nutrition sector, supporting household food production and promoting nutrition-sensitive agriculture in ways that facilitate a diversification of the diet. Geographical targeting (assuming access and insecurity patterns remain the same) will depend on the agro-ecological or rainfall zone, and according to the severity ranking at the sub district level based on the percentage prevalence of people in need in the sector. There will be a specific focus on rural communities for certain activities. Targeting at a household level will include two groups: host communities (who meet the selection criteria for the various activities) and IDPs (for select activities). For residents/host communities, criteria will

be based on factors such as land ownership/access to land, livelihood dynamics, and asset ownership. To avoid creating any ‘pull factor’, IDPs will be provided with easily transferrable assistance (e.g. small livestock). Targeted people’ willingness to undertake the investment (including attending trainings) and the availability of/access to labour will play a critical role in receiving assistance.

Sector objective 3: Improve the capacity to deliver essential services to affected local communities and support the rehabilitation of productive infrastructures.

This objective targets 2.4 million people and aims to create/restore community assets and productive infrastructure. This is critical for delivering essential services relating to food security such as bread bakeries (bread is a staple food item in Syria), irrigation, canals and storage, to ensure services for the agriculture sector. Capacity building of affected local communities will be a key component as well so as to establish/restore their community structures. Organising and managing requisite infrastructure for delivering these services will be a core component of this objective. Geographical targeting will ensure that the areas are conducive for this intervention as infrastructural repairs are feasible only if safe areas remain peaceful, so that investments in repairs and capacity building of recipients are not compromised by further destruction. Targeted beneficiaries are vulnerable communities dependent upon community-owned agricultural and non-agricultural infrastructure for their livelihoods.

Sector objective 4: Improved quality of the response based on evidence, capacity building and strong coordination within the Food Security and Agriculture Sector and cross-sectors.

The Food Security and Agriculture Sector WoS approach is centred on the commitment of humanitarian partners to provide a coordinated response through the IASC sector/cluster approach, which is essential for achieving the first three sector objectives effectively and efficiently. This sector objective seeks to increase the efficiency and effectiveness of response through: (1) developing a principled, predictable and systematic operational planning process; (2) ensuring greater coherence across the different modalities used for delivery of assistance (i.e. cross-line, cross-border or regular programmes) through improved coordination both within and across sectors; and (3) strengthening information-sharing and joint monitoring of response among sector’s members, in cooperation with local counterparts. The key milestones reached in 2015 in the WoS sector approach include regular response analysis, efforts to minimize duplication, addressing geographical gaps, promoting sub-national coordination, developing contingency plans and completing mid-year prioritisation. In 2016, the sector will build on its work and will also aim to address some of the key gaps and challenges identified in 2015, including: regular monitoring and food security situation analyses; improving targeting by regularly updating people in need figures and severity rankings; strengthening early warning and contingency plans/preparedness; furthering work on harmonisation of

response packages and needs-based targeting/selection. Further emphasis will likewise be placed on monitoring key sector outcome indicators, which have been instrumental in setting critical baselines such as Food Consumption Score, Coping Strategy Index and Dietary Diversity Score, and which will be further enhanced by on-going sector assessments such as Food Security and Livelihoods Assessment. The Sector will achieve these objectives through a clear delineation of roles and responsibilities between hubs and WoS, thus ensuring complementarity and results-based performance.

Gender, age, protection and Ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people

Gender and age dynamics are critical factors in aggravating people's vulnerabilities and their ability to access services. For instance, as per sector assessments, households headed by women, children, the elderly or persons with disabilities lacking a regular and stable income source are among the most vulnerable groups. These households are resorting to negative coping strategies that have both gender and protection concerns such as child labour, early marriage and involvement in armed groups. In the complex Syrian context, the main sources of evidence or feedback from affected communities have been assessments and Post Distribution Monitoring by partners. In 2015, based on wide consultation, the sector developed checklists for the integration of gender, age, protection and to ensure appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people in partners' programmes. In 2016, integration of these topics across the programme cycle will be further pursued so that assessments and analyses, programme design, implementation and monitoring are sensitive and

responsive to these issues. For instance, where possible, gender and age-sensitive vulnerability criteria, safe distribution measures and on-site feedback mechanisms will be further promoted, and evidence of good practices/lessons learned will be documented. Additionally, the sector will make efforts to hold 'Cluster Listening' exercises with affected population (access permitting), to feed into evidence-based programming and to strengthen appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people.

Linkages with other sectors

Building on the continued engagement with the Nutrition sector, efforts will be made to synchronise distribution of nutrition supplements with food security interventions as a joint programming initiative. Since water is a key factor for the utilization of food and for agriculture related programmes, coordination and joint planning with WASH will be pursued as well. In cooperation with the Protection sector, further work on protection mainstreaming, such as building evidence around protection (and GBV) sensitive food security programming, will be pursued. The FSA Sector will continue to work with the CCCM sector to identify the food security needs of displaced people tracked by CCCM programming. Early recovery and livelihoods needs and programmatic initiatives are already fully integrated in the FSA sector response plan, and operational coordination will be carried out between both sectors to ensure complementarity and to capitalise on synergies. Winterisation initiatives will be pursued as an element of joint programming. The Food Security and Agriculture Sector has already made some progress in the harmonisation of vulnerability criteria and response packages, which will continue to be explored with other sectors as relevant and feasible.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|------------------------|------------------|------------------|--------------|-------------------|
| | IDPs | Host communities | % female | % children, adult |
| PEOPLE IN NEED | 4M | 4.7M | | |
| PEOPLE TARGETED | 3.5M | 4M | | |
| FINANCIAL REQUIREMENTS | \$ 1,235,603,095 | | | |

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PEOPLE IN NEED


11.5M

PEOPLE TARGETED


11.5M

REQUIREMENTS (US\$)


437,208,904

OF PARTNERS


38

HEALTH OBJECTIVE 1

1 To provide life-saving and life-sustaining humanitarian health assistance to affected people

RELATES TO S01 , S02 

HEALTH OBJECTIVE 2

2 To strengthen health sector coordination and health information systems to improve the life-saving health response for people in need, with an emphasis on enhancing protection and increasing access to health services

RELATES TO S01 , S03 

HEALTH OBJECTIVE 3

3 To support community resilience, institutional and response capacity by empowering communities and national actors

RELATES TO S01 , S02 , S03 

HEALTH

Health Sector analysis

The year 2015 was marked by an intensification of the crisis and an increase in the health needs of people living in Syria. The shortage of specialised medical staff, ambulances, equipment and medical supplies led to an increased number of preventable deaths. Appropriate and timely interventions are needed to limit the risk of avoidable amputations and preserve the longer-term health outcomes of patients in terms of mobility and dependence on family members and communities for survival. Lack of basic utility services including electricity, fuel, safe drinking water and basic sanitation services have increased the vulnerability to disease outbreaks such as diarrheal diseases, typhoid, hepatitis A, as well as other vaccine-preventable diseases. Essential health services have been further disrupted by the exodus of qualified healthcare workers, a 60 per cent drop in local production of pharmaceuticals, and a 50 per cent increase in prices of locally produced pharmaceuticals. Over 640 health care workers have been killed since the crisis started, and medical facilities continue to be attacked. An estimated 58 per cent of public hospitals and 49 per cent of public health centres are either partially functional or closed. In northern parts of Syria, only 36% of health facilities are operating in structures they occupied before the crisis, forcing many health care providers to operate out of buildings not designed for health service delivery. People with life-threatening chronic diseases such as diabetes, kidney failure, asthma, epilepsy, cancer and cardiovascular illness are at an increased risk of dying or developing complications as access to life-saving medications and care is becoming more difficult. A severe shortage in skilled-birth attendants, including obstetricians, means that there are major obstacles to providing care to an estimated 300,000 women who are pregnant and need targeted support. Only 10 per cent of primary health care centres provide basic mental health services. The number of people seeking mental health care is increasing, especially those suffering from depression, anxiety, psychosis and stress related conditions. Current estimates indicate 600,000 people are living with severe mental illness in Syria.

The priority in the health sector continues to be to provide life-saving and life-sustaining humanitarian health assistance to affected people. This will be done through specific interventions focusing on: provision of healthcare services (including trauma, reproductive health, including maternal and child health, services for gender-based violence, management of malnutrition, management of non-communicable diseases, mental health and psychosocial support, support for people living with disabilities, and referral services); availability of essential medicines, medical supplies, equipment and provision of outreach services; expansion and strengthening of the communicable disease surveillance, detection and response system, and continued support to the Expanded Programme on Immunization (EPI) to enhance vaccination coverage up to the required levels.

In addition, the sector will seek to **strengthen coordination and health information systems to improve the life-saving response for people in need, with an emphasis on enhancing protection and increasing access to health services.** This will be done through coordination efforts to increase assistance to hard-to-reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN; to synergise and harmonise the response across hubs; and better identify gaps and reduce overlap. Protection and gender mainstreaming efforts throughout health programming will continue to be emphasized and advocated for through coordination fora and training/workshops with health partners. Health information systems (HIS) at the cluster/working group level will be further strengthened to track essential morbidity and mortality data, creating an evidence base to drive forward health programming. In addition, due to the dynamic nature of the crisis and high risk of outbreaks of diseases, coordination structures will focus on joint contingency and preparedness planning for response to disease outbreaks such as cholera across the five hubs. This will include rapid health assessments of emergency situations and the design of timely response mechanisms.



Finally, reflecting the protracted nature of the crisis, **the health sector in 2016 will aim to support community resilience, institutional and response capacity** by empowering national actors and communities. Activities will focus on increasing the size and capacity of the health workforce; strengthening partnerships with national non-governmental organizations (NNGOs); rehabilitating and/or reinforcing damaged health facilities (including physical structures, human resources, and equipment/supplies) for health service delivery, including mobile medical units for emergency response and enhancing community-based health services and initiatives.

Linkages with other sectors

The health sector actively participates in inter-cluster/sector coordination groups at the hub and WoS levels. In addition, sub-working groups focused on advocacy, physical

rehabilitation, mental health and psychosocial support, gender based violence and sexual and reproductive health are functional to various extents at the hub level. The health sector will continue to work closely with the WASH, nutrition, food security and livelihoods, protection and CCCM sectors to promote a multi-sectoral approach, including through joint needs assessments. The health and WASH sectors strongly collaborate on joint contingency planning to reinforce health/hygiene education messaging and to prevent and control water-borne diseases. In two of the five operational hubs, the health and nutrition sectors operate jointly under a common framework. The health sector works closely with the protection sector to promote the use of protection-mainstreaming checklists across hubs and activate strategies to protect health care workers, facilities and ambulances.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

Given the severely affected nature of the health system in Syria, all population groups are affected by the crisis and have the right to receive health care services. Children under five, women of reproductive age, persons living with disabilities and people at high risk of trauma and at high risk of suffering complications from chronic diseases, including the elderly, are the most vulnerable population groups in the health sector. Pregnant women, for example, are in dire need of reproductive health services, including antenatal, delivery and postpartum care. Child- and female-headed households and all children under 18 years remain at high risk of suffering the health consequences of the Syrian crisis. In addition, hundreds of thousands of refugees and millions of internally displaced persons (IDPs) continue to live in highly volatile areas and remain extremely vulnerable and exposed to health risks.

| | BY STATUS | | BY SEX & AGE | |
|------------------------|----------------|------------------|--------------|----------------------------|
| | IDPs | Host communities | % female | % children, adult, elderly |
| PEOPLE IN NEED | 4.5M | 7M | | |
| PEOPLE TARGETED | 4.5M | 7M | | |
| FINANCIAL REQUIREMENTS | \$ 437,208,904 | | | |

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PEOPLE IN NEED



Humanitarian partners

PEOPLE TARGETED



Humanitarian partners

REQUIREMENTS (US\$)



15,039,153

OF PARTNERS



20

LOGISTICS OBJECTIVE 1

1 To provide logistics services (inclusive of surface transportation, transshipment, contingency fuel storage, emergency airlifts and warehousing) to humanitarian organisations responding to the Syria crisis

RELATES TO SO1 , SO2 

LOGISTICS OBJECTIVE 2

2 To maintain regional WoS inter-agency logistics coordination and information management in order to support humanitarian actors

RELATES TO SO1 , SO3 

LOGISTICS OBJECTIVE 3

3 To enhance capacity of humanitarian actors via dedicated logistics trainings and purchase of necessary equipment

RELATES TO SO1 , SO2 

LOGISTICS



Logistics Cluster analysis

Key needs identified in consultation with partners include common transport and common warehousing across Syria, in order to provide a predictable and secure logistics supply chain in the midst of severe access and security constraints. The Logistics Cluster can adapt their activities in neighbouring countries to take into account the situational needs and may augment or reduce capacities as required. Scarcity and rising costs of fuel require the maintenance of contingency fuel reserves, which will be especially critical during the winter months for emergency cooking and heating. Emergency airlifts will remain an option to reach the most isolated locations in the country. In line with partners' needs to enhance logistics capacity, dedicated logistics training will be continued in 2016, focusing on more diverse areas within logistics.

Logistics Cluster response strategy

The Logistics cluster's activities are in line with all three Strategic Objectives for the response. As per its first objective the cluster will continue to provide humanitarian partners with crucial logistics services, including surface transportation, contingency fuel provision and storage, cross-border trans-shipment services, emergency airlifts, and warehousing.

Common warehouse facilities with over 14,000 m² of storage space for partners have been established in five locations: Rural Damascus, Lattakia, Tartous, Homs, and Qamishly. The cluster also plans to augment storage space in additional locations as required. Common transport services on behalf of partners will continue into 2016 and as per the cost-recovery modality introduced in 2015.

Joint Humanitarian Convoys will continue to be organised by the logistics cluster in 2016, in order to access the hard-to-reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN. These convoys are organised at the inter-agency level, with prioritisation of items/locations taking place through robust Inter-Sector Coordination (ISC) mechanisms in Damascus. For the most

isolated areas, emergency airlifts of life-saving cargo will be organised as an option of last resort. The cluster also stands ready to respond to ad-hoc scenarios, such as local agreements' operations, with logistics support as required.

Support to cross-border humanitarian assistance deliveries, including logistics coordination and/or transshipment, will continue in 2016. The Bab Al-Hawa crossing in Turkey has seen a large increase in the number of trucks sent into Syria by UN agencies, and to cope with the increased caseload, the cluster will expand the trans-shipment area at this crossing as required, thus allowing the cross-loading of a higher number of trucks for UN agencies. UNMM monitoring teams will be ready and available at the borders to facilitate the loading of the consignments and to confirm the humanitarian nature of these shipments as required by the UN Security Council.

The logistics cluster's second objective (to maintain regional WoS inter-agency logistics coordination and information management in order to support humanitarian actors) is in line with the WoS approach and will be crucial in 2016 in maintaining the smooth flow of a complex logistics supply chain from several neighbouring countries into Syria (including hubs in Jordan, Turkey, and in Syria), with the WoS cluster coordinator based in Damascus. Coordination meetings will be held regularly in Amman, Damascus, Gaziantep, and other locations as required, allowing partners to discuss logistics bottlenecks and come up with common solutions. The cluster will also continue to share logistics information products including maps, capacity assessments, logistics snapshots, infographics, progress reports, meeting minutes, and real-time updates via its dedicated cluster webpage.

For the cluster's third objective: To enhance capacity of humanitarian actors via dedicated logistics trainings and purchase of necessary equipment, a series of diverse trainings are planned for 2016, including various aspects of logistics such as shipping, warehousing, transport, customs, and fleet/fuel management. This will help enhance the

existing capacity of logistics personnel both within Syria and neighbouring countries. These trainings are planned to cover a wider range of logistical means and locations, in order to benefit the maximum number of humanitarian personnel. The logistics cluster will also provide logistics equipment to enhance the capacity of national humanitarian actors.

Linkages with other sectors

The logistics cluster provides common services to all sectors involved in the Syria response. This includes the transport, storage, and handling of relief items in Syria, including health kits, blankets, tarpaulins, winter clothing, medicines,

water purification kits, school books, hygiene kits, protection items, and many others. In this way, the logistics cluster fills sectoral logistics gaps faced by the programmatic sectors in the Syria response, enabling them to implement sectoral response plans and reach people in need across the country. The Joint Humanitarian Convoys organised by the cluster, in particular, allow sectors to access locations listed in UNSCR 2139, 2165, 2191, as updated by the UN and hard-to-reach areas with life-saving aid items. These convoys are increasingly used as a mechanism to increase trust, build momentum, and ultimately increase access to cut-off locations.

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PEOPLE IN NEED


3.1M

PEOPLE TARGETED


1.9M

REQUIREMENTS (US\$)


51,174,627

OF PARTNERS


18

NUTRITION OBJECTIVE 1:

1 Strengthen preventive nutrition services for vulnerable groups in need of humanitarian response, focusing on appropriate infant and young child feeding practices, micronutrient initiatives and optimal maternal nutrition.

RELATES TO S01 , S02 

NUTRITION OBJECTIVE 2

2 Improve access to quality curative nutrition services through systematic identification, referral and treatment of acutely malnourished cases according to international standards.

RELATES TO S01 , S03 

NUTRITION OBJECTIVE 3

3 Promote nutrition situation analysis using standard tools and screening methodologies on children and women.

RELATES TO S01 , S02 

NUTRITION OBJECTIVE 4

4 Promote and strengthen timely, appropriate and integrated nutrition response through multi-sectoral approach to achieve maximum outcome from nutrition service delivery

RELATES TO S01 , S02 

NUTRITION



Nutrition Sector analysis

A poor nutrition situation exists in Syria as indicated by the prevalence of acute malnutrition (wasting) of 7.2 per cent, and chronic malnutrition (stunting) of 22.3 per cent in children 6-59 months (2014). Few locations have acceptable levels of malnutrition (<5 per cent). Micronutrient deficiencies are widespread and between 'serious' to 'critical' as reflected by the prevalence of anemia above 30 per cent in children and women of reproductive age.

Based on an in-depth analysis of data from multiple sources, the nutrition sector severity ranking at the governorate level was developed, and which forms the basis for the sector's response framework. The nutrition sector estimates that 3.16 million boys and girls aged 6-59 months and PLW are in need of preventive and curative nutrition services in 2016. Of these, an estimated 86,000 children aged 6-59 months are acutely malnourished, 670,000 children suffer from micronutrient deficiencies, 1 million children under 2 years of age require optimal feeding to ensure adequate nutrition status, and 1.3 million PLW require preventive nutrition services against undernutrition and for optimal nutrition wellbeing.

Aggravating factors, including sub-optimum infant and young child feeding (IYCF) practices, particularly with low levels of exclusive breastfeeding practices, the increasing use of infant formula in situations of poor sanitation, limited dietary diversity and food insecurity, declining livelihood options, population displacement with associated family separation, poor access to quality water and hygiene conditions, and deteriorating health care, are present. These factors further compound the risks for poor nutrition, morbidity and mortality in children below 5 years of age and pregnant and lactating women (PLW). Insecurity and constant displacements pose challenges of access and provision of adequate nutrition services to women and children in some areas.

Nutrition Sector response strategy

The poor nutrition situation in combination with the presence of aggravating factors call

for urgent actions to scale up the ongoing preventive nutrition services, sustain curative services and expand a multi-sectoral approach to ensure maximum nutrition service delivery. The nutrition sector will focus its efforts on boys and girls below 5 years of age and pregnant and lactating women.

Four sector strategic objectives were identified which emphasise preventive nutrition services, curative nutrition services, situation analysis and monitoring of the nutrition situation, and integration of nutrition response with other sectors.

Continued efforts will be made to ensure robust preventive nutrition services related to infant and young child feeding and micronutrient interventions, provided through the community and in health facilities. Promotion of appropriate infant and young child feeding (IYCF) with a focus on breastfeeding protection and promotion and complementary food will be made. The critical window of a child's growth in the first 1,000 days will be safeguarded and promoted through maternal nutritional support during the period of pregnancy and lactation, promoting the introduction of breastfeeding to the newborn within the first hour of birth, exclusive breastfeeding for the first six months, and complementary food introduction to infants after six months of age. Widespread and uncontrolled infant formula use will be prevented, since in emergency situations it is often used with unclean water and unhygienic conditions, thus predisposing the children to the risk of diarrhea or even death. The capacity of public health workers will be strengthened to facilitate IYCF counselling sessions.

The prevention of micronutrient deficiencies and control initiatives through micronutrient supplementation within health facilities and during accelerated campaigns, distribution of multiple micronutrient powder through facilities and directly in the community (alongside food distributions), and promotion of dietary diversity and optimal maternal nutrition will be emphasised to prevent further deterioration of the situation.

Preventive efforts will be complemented by curative activities through screening for malnutrition and referral for treatment of

acutely malnourished cases as a life-saving measure. Community-based approaches for malnourished case finding and treatment will be conducted to improve coverage and for early detection of cases. Appropriate nutrition supplies will be availed.

The sector will also continue to monitor the nutrition situation through community outreach and active screening for malnutrition and data compilation, implementation of rapid nutrition assessments and support of nutrition surveillance services. Data collection tools will be standardised and capacity strengthened to conduct SMART nutrition assessments and overall collection of quality data.

Finally, to maximise the response outcome from nutrition service delivery, better coordination will be pursued to ensure provision of a comprehensive nutrition response package, to enhance regular analysis of response coverage and gaps to enable appropriate advocacy, and to facilitate integration of an appropriate nutrition response with other sectors.

Based on the above strategies, some of the activities to be prioritised by the nutrition sector in 2016 include the following: (1) distribution of lipid-based nutrient supplements (LNS) through health facilities and alongside food distribution and advocacy/promotion of dietary diversification; (2) facility and community-based counselling for and awareness-raising on breastfeeding and complementary feeding (IYCF); (3) micronutrient supplementation to women and children; (4) facility and community-based screening of acute malnutrition to identify children and women in need of nutrition services at an early stage and refer them for appropriate services; (5) treatment of acutely malnourished children, pregnant women and lactating

mothers; and (6) capacity strengthening of health workers on IYCF and community management of acute malnutrition (CMAM) to effectively render services. Other mechanisms to prevent micronutrient deficiencies will be considered such as distribution of high energy biscuits to PLW and the use of cash/vouchers to promote the consumption of fresh foods. The elderly will be considered but further information is needed for a better understanding of the situation and needs of this target group.

To deliver the above intervention the 17 active nutrition sector/cluster stakeholders and their partners will need financial support estimated at US\$ 51,174,627 for the year 2016.

Linkages with other sectors

A significant proportion of nutrition responses are delivered through the health care system. Furthermore, the nutrition situation is largely influenced by such aggravating factors as food insecurity at the household level, inadequate access to quality water and sanitation, and inadequate health care. In order to prevent further deterioration of the nutrition situation and to ensure effective service delivery, the nutrition sector will strive to better coordinate with other sectors, particularly health, food security, protection and WASH, to reduce the risk of nutrition deterioration, to promote common service delivery platforms and partners and facilitate geographical convergence and better targeting of beneficiaries. Where and when feasible, joint activities will be put in place in hard-to-reach areas to reduce exposure of beneficiaries and workers. This will enhance efficiency and cost effectiveness.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | Boys 6-59 months | Girls 6-59 months | PLW | BY SEX & AGE | |
|------------------------|------------------|-------------------|------|--------------|----------------------------|
| | | | | % female | % children, adult, elderly |
| PEOPLE IN NEED | 0.9M | 0.9M | 1.3M | | |
| PEOPLE TARGETED | 0.85M | 0.8M | 0.3M | | |
| FINANCIAL REQUIREMENTS | \$ 51,174,627 | | | | |

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PEOPLE IN NEED



2.4M
Shelter

5.3M NFIs

PEOPLE TARGETED



6.5 M
(1.2 M in shelter
and 5.3 M NFIs*)

N.B. People may be supported through repeated NFI assistance as any single provision of goods/voucher/cash may not meet 100% of a person/households annual NFI needs

REQUIREMENTS (US\$)




523,184,835

OF PARTNERS




52


SHELTER And NFI OBJECTIVE 1

1 Provide life-saving and life-sustaining shelter and NFI support
RELATES TO SO1 

SHELTER And NFI OBJECTIVE 2

2 Promote increased security of tenure
RELATES TO SO2 

SHELTER And NFI OBJECTIVE 3

3 Contribute towards the resilience and cohesion of communities and households by improving housing and community/public infrastructures
RELATES TO SO3 

SHELTER - NFI

Shelter- NFI Sector analysis

Shelter and NFI support remains a primary need for the crisis-affected population. It is estimated that 2.4 million people need shelter support and 5.3 million people need NFI support. Syrians remain the primary providers of emergency shelter for IDPs. Adequate shelter stock remains insufficient. Evictions, insecure tenure and repeated displacements remain a chronic problem. Access to and availability of NFI items remains limited.

Currently, an estimated 6.5 million people are displaced, 1.7 million live in collective centres and 7.8 million have insufficient access to markets. To date 1.2 million housing units have been damaged and 400,000 destroyed. People - residents, IDPs and hosts- who live without shelter or in damaged or unfinished buildings are considered most at risk to the threats associated with not meeting their livelihoods, WASH, education and other needs. Within households, the young, women headed households, and the elderly are most impacted by a family's inability to meet its own shelter and NFI needs. Given the cyclical nature of displacement, loss of NFIs and damages to shelters the displaced, hosts and the crisis-affected often need repeated assistance.

The main constraints to a timely and effective response are insecurity restrictions in accessing areas, beneficiaries and supplies and services and, for cross-border programs, border issues. Limited access to certain target groups or locations undermines needs-based approaches to programming prompting more opportunity-based responses in areas with sufficient and safe access.

Shelter- NFI Sector response strategy

The sector will address shelter and NFI needs through a two-pronged approach, which addresses emergency needs while promoting household and community resilience. The sector will support people in need within displaced, hosting and non-displaced people. While efforts will be made to increase access to those in need, the sector recognises that safe, sustained access can be difficult



to maintain which may in turn impact needs-based programming and particularly resilience-oriented programming.

Family-level interventions will address the specific needs of households experiencing short-term, long-term and multiple displacements as well as the specific needs of residents, IDPs and hosts and consider these needs differently. The response will look at household composition and aim to accommodate the specific needs of different members (children, adults, elderly, males, females, people with disabilities, etc.). Additionally, the response aims to better address possible protection risks by improved examination of what programming is done and how it is done. To better ensure that the sector is able to tackle the aforementioned intricacies the sector will carry out an in-depth sector assessment.

Emergency Response:

Emergency programming will focus on saving and sustaining lives. The shelter and NFI response will provide NFI/shelter kits, construction materials/tools, emergency shelters (for example tents) within and outside of sites/camps and the improvement of collective centres and spontaneous sites, in addition to transitional housing units, in accordance with specifications defined by the Sector incorporating beneficiary inputs. The sector will also look at addressing seasonal needs. Due to Syria's harsh weather conditions winterisation programs, running for six months of the year, represents one of the most important aspects of the response. A wide range of solutions (NFI winter kits, thermal blankets, winter clothing, fuel and stoves) are considered. The modalities of these interventions will be determined by what is most cost effective, timely and realistic and will encompass in-kind distributions, non-conditional/conditional cash, vouchers or physical repair.

It is anticipated that sudden-onset and cyclical displacements will continue. Effective emergency programming is contingent on the delivery of the right items, to the right place, at the right time. For this to occur, contingency plans and stocks must be in place. It is essential

that sufficient stocks are maintained in key locations to address acute and chronic needs and enable a tailored flexible response. Given the protracted nature of the crisis, distributed items may need replacement because they have been lost, damaged, have exceeded their life-span or were left behind during displacement.

Resilience

The sector will support resilience building by promoting the cohesion and recovery of communities. This will be done through rehabilitation of family housing and repair and improvement of public and communal infrastructures. Access to electricity will be increased through the support of alternative systems (solar energy). The sector aims to support owners and entitled tenants to re-establish their lives within their neighbourhood and community. These interventions will not only assist individual families but promote community cohesion and resilience. By improving community infrastructures (schools, health posts, utility systems, etc.) overall community recovery and the protective environment will be strengthened. The improvements in these areas will empower communities and promote self-help initiatives within them.

Due to the increasingly limited availability of safe shelters and the increasing numbers of displaced people, overcrowding of structures and sites and subsequent lack of sufficient privacy,

access to public services, and related protection threats, are a paramount concern that the sector aims to address by improving the overall availability of adequate shelter stock. Where possible, information and counselling on housing land and property (HLP) will be integrated into shelter interventions in order to mitigate risks associated with insecure tenure and eviction. The extent, and effectiveness, of HLP activities will be contingent on the ability of humanitarian actors to work within the complexities of different local administrations.

Linkages with other sectors

The sector recognizes the centrality of protection in all programming and it is therefore committed to mainstream protection. In addition, sector activities are inherently linked with other sectors. The sector will particularly focus on proactive engagement with the following sectors: 1) CCCM, due to the high number of displaced people living in formal and informal sites and collective shelters; 2) WASH, to better ensure adequate water and sanitation for shelters, especially in collective centres; 3) Livelihoods and Early Recovery, to ensure a holistic approach to promote resilience; 4) Education, given the prevailing use of schools as collective shelters close coordination is necessary to mitigate the negative effects of evictions due to re-establishing schools to their original use.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|------------------------|---------------|------------------|--------------|----------------------------|
| | IDPs | Host communities | % female | % children, adult, elderly |
| PEOPLE IN NEED | 4.3M | 3.1M | | |
| PEOPLE TARGETED | 3.6M | 2.6M | | |
| FINANCIAL REQUIREMENTS | \$523,184,835 | | | |

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Line ministry (only for Damascus-based agencies): Ministry of Local Administration

PEOPLE IN NEED



12.1M

PEOPLE TARGETED



System Support

14.7M

Humanitarian WASH

7.3M

REQUIREMENTS (US\$)



250,048,010

OF PARTNERS



51

WASH OBJECTIVE 1

1 Sustainable water and sanitation systems are maintained and/or restored to improve public health.

RELATES TO SO1 , SO2 

WASH OBJECTIVE 2

2 Most vulnerable groups receive life-saving assistance to reduce WASH-related morbidity.

RELATES TO SO1 , SO3 

WASH OBJECTIVE 3

3 WoS WASH coordination structures enhanced

RELATES TO SO1 , SO2 

WASH



WASH Sector analysis

The lack of consistency in safe water and sanitation service provision has increased the risk of waterborne diseases including cholera. The breakdown of infrastructure is largely due to widespread insecurity and looting, the lack of spares, general neglect and the impact of the unilateral financial and economic measures imposed on Syria, which have impacted the availability of technical services (spare parts - sterilized tools...etc.), contributing to the lack of drinking water.

Water supply infrastructure is under ever-increasing stress, mainly due to limited electricity, and a lack of access to materials for operation and maintenance. Consequently, people are opting for unregulated services, such as private sector trucking, and other unsafe water sources. The rising cost of trucked water places further limits to vulnerable individuals. **In terms of sanitation**, dysfunctional treatment plants in cities are discharging raw sewage mixed with chemical pollutants into open lands and fresh water bodies leading to contamination of water sources and causing irreversible damage to the environment and unhygienic living conditions. In addition, there is an acute lack of sanitation for recently displaced people, especially those living in informal sites. There are similar concerns for the lack of **waste management services**, as garbage accumulations have become hazardous to public health. **Hygiene items** are generally available with stable prices, however they are not always accessible to IDPs and the highly vulnerable who general rely on distribution from humanitarian actors.

The WASH sector defines the most **vulnerable groups** as IDPs (old and new), returnees and host communities in key areas including camps, informal sites, unfinished buildings and over-populated communities. People in locations listed in UNSCR 2139, 2165, 2191, as updated by the UN also represent a highly vulnerable group, while cutting-off of water supply in some areas is used as a weapon of war by armed groups.

WASH sector response strategy

The WASH sector will pursue 2 strategic objectives. The first is to restore and maintain existing water, sewerage, and solid waste systems and even reverse the trend of degradation wherever possible. This represents the best large-scale opportunity to provide reliable and good quality services, which are essential for the resilience of the Syrian population. Critical activities include rehabilitation of infrastructure, provision of supplies and consumables, support for staffing, and on-going operation and maintenance. Without alternative energy sources in remote areas, the national electrical power, stand-by generators are critically needed to provide power, but often only possible to partial levels. In other instances, modifications or extensions may be possible if existing water systems cannot meet increased demands. The sector will continue to prioritize water quality assurance: water supply systems will be provided with sufficient quantities of water treatment supplies and equipping laboratories for water quality monitoring. This intervention has been critical over the past years, as the chemicals needed are subject to unilateral economic and financial measures imposed on Syria. The importation of supplies from abroad will be complemented with efforts to support local production of such chemicals in-country.

The focus on restoring existing systems is compelling from a cost-benefit perspective and consequently reduces or eliminates a community's reliance on emergency water trucking. Whilst recognizing the need to continue in the development of alternative water sources for safe distribution for people at risk. Additionally, wastewater and solid waste management systems and infrastructure will be targeted with repair and materials provision so as to reduce the overall public health risk caused by the degradation of the systems.

Special attention will be given to the sustainability of the interventions, in a context of insecurity and impoverished catchment people. In the absence of a clear

operator with the necessary resources for continued operation and maintenance, strategies for cost recovery will be piloted, providing the necessary support in the initial part of the intervention. For emergency preparedness, water and systems adjacent to highly volatile areas will be strategically supported to receive potential IDPs.

Community level risk management strategies will be introduced, including household water treatment and storage (HHWTS), sanitary surveys and training in appropriate water treatment. WASH actors will also engage, to the extent possible, with water vendors, introducing Water Safety Plans (WSP), and advocating for safe procedures of filling, transporting and distributing water, including provision of the needed chemicals for tank chlorination. The sector will also support health authorities in conducting water quality surveillance as required. This will happen through the support of existing laboratories and deployment of field water quality labs and adequate training.

The second sector objective is to reduce excess morbidity and mortality through the provision of emergency WASH assistance. Priority will be for the most vulnerable groups especially IDPs in underserved areas and affected people in locations listed in UNSCR 2139, 2165, 2191, as updated by the UN. Water trucking, emergency latrine installation, and hygiene kit distributions will be undertaken during rapid response. As much as possible, these will be replaced by more reliable solutions such as extending sewage and water lines from an existing network to collective centres and unfinished buildings. In many cases, reliance on emergency WASH measures are needed as long as the crisis continues. Moreover, access into many communities is limited due to insecurity and lack of resources. For prioritisation, the use of community mobilisers will help identify the most vulnerable. They also facilitate hygiene promotion and collect valuable information on underlying risk factors associated with excess morbidity. Poor waste management and unsanitary conditions will be improved through cleaning campaigns, and vector control activities such as indoor room spraying and bed net distributions.

The most vulnerable IDPs live in unfinished buildings and informal sites where WASH, especially sanitation, are often far below minimum standards, and efforts will be made to reach those people with improved services. While the most vulnerable make up a small percentage of the overall population, it is acknowledged that WASH interventions within these communities is life-saving.

Opportunities will be created for all population segments to provide input into program activities, and partners will ensure the involvement of women, men and adolescents (boys and girls) in decision-making and leadership in committees and in feedback (monitoring) mechanisms. Engagement of women as program staff/enumerators will be promoted, in order to facilitate interaction with female community members and beneficiaries. To support implementing partners to apply gender-sensitive and protection-oriented approaches, WASH actors will provide relevant trainings and coaching to their partners and staff in Syria.

The sector will continue promoting a complementary strategic approach capable of reaching all target people with the required flexibility. To ensure evidence-based planning, the sector will continue to promote and lead harmonised inter-hub needs assessments and common analysis, as well as a strong monitoring of the response, via the WoS 3W. WoS will also continue, in cooperation with specialised agencies, to monitor the market of water and essential hygiene items. The sector will provide opportunities for capacity building in both key technical areas, and more programmatic ones, including third party monitoring.

Linkages with other sectors

WASH contributes to most aspects of humanitarian action, and the sector is acutely aware of the need to coordinate closely with other sectors to guarantee effectiveness. Particular attention is given to the coordination with the health sector on water quality assurance, surveillance, and waterborne disease monitoring; the CCCM and NFI/shelter sectors on the delivery of services and goods to IDPs and host communities; and the education sector on the prioritisation of WASH in schools. The WASH sector also has frequent contacts with the nutrition, protection and early recovery sectors.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

| | BY STATUS | | BY SEX & AGE | |
|--|-------------|------|--------------|----------------------------|
| | Total | IDPs | % female | % children, adult, elderly |
| PEOPLE TARGETED WITH HUMANITARIAN WASH | 7.3M | 4.3M | | |
| PEOPLE TARGETED WITH SYSTEM SUPPORT | 14.7M | - | | |
| FINANCIAL REQUIREMENTS | 250,048,010 | | | |

CONTACT

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PART III: ANNEXES



| | |
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| Objectives, Indicators & Targets | 48 |
|--|----|

OBJECTIVES, INDICATORS & TARGETS

Strategic Objective 1 (SO1): Support saving lives, alleviate suffering and increase access to humanitarian response for vulnerable people and those with specific needs.

| INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---|---------------|
| Combined % of targets met across life-saving interventions ¹⁰ | 13.5 million | n/a | 70% (TBC) |
| Number of people receiving timely and life-saving WASH assistance | | | |
| Number of medical procedures | | | |
| Number of treatment courses distributed | | | |
| Number of boys and girls 6-59 months screened for malnutrition | | | |
| Number of people that have received emergency NFI and shelter assistance | | | |
| Number of people receiving assistance as % of planned by different modalities, including: in kind such as food baskets, wheat flour/bread ¹¹ , cash, vouchers, and supplementary food assistance programs | | | |
| Number of children under 1 covered by DPT3 | | | |
| % of people in severely affected areas provided with life-saving multi-sector humanitarian assistance | 8.7 million | TBC with sectors in first quarter of 2016 | 50% increase |
| % of people in locations listed in UNSCR 2139, 2165, 2191, as updated by the UN and hard to reach areas provided with multi-sector humanitarian assistance | TBC with sectors in first quarter of 2016 | TBC with sectors in first quarter of 2016 | 100% increase |
| Combined % of country-based pooled fund disbursements allocated to national humanitarian actors | n/a | 32% | 50% |

Strategic Objective 2 (SO2): Enhance protection by promoting respect for international law, IHL and HRL through quality principled assistance, services and advocacy.

| INDICATOR | IN NEED | BASELINE | TARGET |
|---|--------------|---|---------------|
| % of people in need accessing protection case referral, risk mitigation or prevention services, including community-based, psycho-social, GBV, HLP and child protection responses ¹² | 13.5 million | 197,477 | TBD |
| % of national actors reached by capacity building initiatives to implement protection responses, including protection mainstreaming, risk mitigation and front line response across all sectors | n/a | TBC with sectors in first quarter of 2016 | 100% increase |

Strategic Objective 3 (SO3): Support the resilience of affected local communities, households and individuals within the humanitarian response by protecting and restoring livelihoods, enabling access to essential services and rehabilitation of socio-economic infrastructure.

| INDICATOR | IN NEED | BASELINE | TARGET |
|--|-------------|---|---|
| % of people in need supported with livelihood interventions | 10 million | 17% | 32% |
| Number of affected people receiving livelihoods support (loans, grants, assets, vocational training, etc.) | | | |
| Improved Coping Strategy Index/score | | | |
| % of people in need with increased access to basic social services ¹³ | 10 million | 17% | 32% |
| Number of boys and girls (6-59 months) who receive multiple micronutrient supplements | | | |
| % of school-aged children (boys and girls - 5-17 years) enrolled in formal and non-formal education | | | |
| % of IDP sites where women, girls, boys and men have equal access to basic services | | | |
| Number of socio-economic infrastructures supported and/or restored | 8.7 million | TBC with sectors in first quarter of 2016 | TBC with sectors in first quarter of 2016 |
| Number of WASH systems rehabilitated/supported | | | |
| Number health facilities rehabilitated and/or reinforced | | | |
| Number of classrooms established, expanded or rehabilitated | | | |
| Relevant infrastructure rehabilitation as delivered by other sectors | | | |

10. Composite indicator derived as an aggregate of output level indicators from sectors. Specific sector targets, baselines are indicated in the respective sectoral indicators further below.

11. Wheat flour/bread distributed outside of food baskets as stand-alone items.




12. Composite indicator derived as an aggregate of protection sector top-line beneficiary targets across relevant activities.

13. Composite indicator derived as an aggregate of output level indicators from sectors. Specific sector targets, baselines are indicated in the respective sectoral indicators further below.



PROTECTION SECTOR OBJECTIVES, INDICATORS AND TARGETS

 **Sector Objective 1: Increase the protection of affected people at risk from the consequences of the crisis through sustained advocacy, risk mitigation and enhanced protection responses. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|------------|----------|-----------|
| Activity 1.1: Develop and provide protection analysis for advocacy with international community, humanitarian actors | 1.1.1) # initiatives incorporating protection analysis and advocacy | 13,500,000 | 6 | 19 |
| | 1.2.1) # of girls, boys, women and men benefiting from protection interventions (including community based protection responses, case management and referral mechanisms) | 13,500,000 | 0 | 1,425,700 |
| Activity 1.2: Strengthen sustained community-based interventions to identify, prevent and respond to critical protection needs. | 1.2.2) # of crisis- affected Palestine refugees accessing specialised protection services | 460,000 | 0 | 460,000 |
| | 1.2.3) # of girls, boys, women and men reached with risk mitigation programming (including community safety and protection, awareness raising, etc) | 13,500,000 | 0 | 2,074,650 |

 **Sector Objective 2: Strengthen the capacity of national community-based actors to assess, analyse and respond to protection needs. Relates to SO1 , SO3 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|----------|--------|
| Activity 2.1: Provide training, mentorship and support to national and community actors to implement protection responses | 2.1.1) % increase in national actors reached by capacity building initiatives to implement protection responses (including protection mainstreaming, risk mitigation and first responders). | N/A | 6 | 100% |
| Activity 2.2: Support national/ community actors to develop protection reports | 2.2.1) # of analysis/information products developed or assessments conducted and shared by national and community based actors. | N/A | 0 | 15 |

 **Sector Objective 3: Girls and boys affected by the crisis with a focus on those most at risk in prioritized locations, have access to effective and quality child protection responses in line with the Child Protection Minimum Standards in Humanitarian Action. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------------|-----------|-----------|
| Activity 3.1: Strengthen community-based child protection, including psychosocial support, to improve protection of children from violence, abuse and exploitation in targeted locations | 3.1.1) # of girls, boys, women and men participating in structured and sustained child protection and psychosocial support programmes, including parenting programmes | 5,900,000 | 508,689 | 910,374 |
| | 3.1.2) # of individuals reached with awareness raising initiatives on child protection issues (age and sex disaggregated, to extent possible) | 5,900,000 (*) | 1,089,419 | 1,933,855 |
| Activity 3.2: Provide specialised child protection services (case management) to girls and boys who are survivors or at risk of violence, abuse, neglect and exploitation in targeted locations | 3.2.1) # of girls and boys who are survivors or at risk receiving specialist child protection services (case management) | 300,000 (**) | 0 (***) | 22,196 |
| Activity 3.3: Strengthen child protection coordination and partners' capacity to respond to child protection concerns in Syria | 3.3.1) # of frontline child protection first responders and volunteers trained in line with the child protection minimum standards (women/men) | N/A | 5,327 | 6,425 |

(*) calculated as 44.1% of Inter-sector PIN

(**) estimated 5% of child PIN in need of specialized CP services

(***) low level of confidence in current 4Ws data against this indicator

Sector Objective 4: Survivors of GBV have access to quality comprehensive GBV services and measures are in place to prevent and reduce risks of GBV. Relates to SO1 , SO2 




| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|------------|----------|-----------|
| Activity 4.1: Provide specialised quality multisectoral GBV services, including case management, psychosocial support and legal services to survivors of GBV | 4.1.1) # of women, girls, boys and men survivors accessing specialised GBV services | n/a | 0 | 15,740 |
| Activity 4.2: Increase strategies to prevent and mitigate risks of GBV with communities and humanitarian actors | 4.2.1) # WGBM reached by GBV prevention activities | 13,547,067 | 0 | 1,542,590 |
| Activity 4.3: Build the capacity of GBV partners to address GB | 4.3.1) # of humanitarian actors trained on GBV (includes all trainings: CMR, MISP, SOPs, GBV, IASC etc.) | n/a | - | 3,860 |

Sector Objective 5: Reduce the impact of explosive remnants through risk education activities. Relates to SO1 , SO2 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|-----------|----------|-----------|
| Activity 5.1: Conduct Risk Education session for affected civilians at risk | 5.1) # Beneficiaries who received Risk Education | 5,100,000 | 0 | 2,952,452 |
| Activity 5.2: Train national capacity on Risk education | 5.2) # people trained on risk education | 5,100,000 | 0 | 2544 |

CCCM SECTOR OBJECTIVES, INDICATORS AND TARGETS
 CCCM Objective 1: Enhance the capacity to provide life-saving multi-sectoral assistance to people living in IDP sites. Relates to SO1 , SO2 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|-----------|----------|---|
| 1.1) Assessment and Gap Analysis of IDP sites | Number of Multi-sectoral gap analysis of IDP published in 2016 | 0 | 0 | 12 |
| 1.3) Critical life-saving site renovations and improvements | # of IDPs living in IDP sites provided with life-saving assistance | 1,744,000 | 209,775 | 500,000 (280,000 women and girls) 200,000 |
| | # of IDPs living in collective centres provided with life-saving assistance | 1,540,000 | 20,000 | (110,000 women and girls) |
| Activity 3.3: Strengthen child protection coordination and partners' capacity to respond to child protection concerns in Syria | # of IDPs living in IDP sites with improved essential infrastructure | | 50,000 | 150,000 |



 CCCM Objective 2: Disseminate timely information on sudden mass displacements. Relates to SO1 , SO3 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|----------------|-----------------------|----------------|
| 2.1) Periodic Displacement Trends Monitoring | Number of displaced persons identified through the CCCM cluster | 6.5 million | 3.2 million | 3.2 million |
| 2.2) Assessments of potential IDP locations by CCCM members | Number of displaced persons identified through the CCCM cluster during a sudden mass displacement | Not Applicable | 415,000 ¹⁴ | Not Applicable |

14. As of November, CCCM partners had verified the locations of 415,000 IDPs that had fled during five subsequent mass displacements in northern Syria during April to November 2015. No target has been set for this figure, as these sudden mass displacements cannot be predicted with any long-term forecasting.

 **CCCM Objective 3: Promote participatory management of IDP sites and improvements in the quality of basic services in IDP sites.. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|----------------|--------------|
| 3.1) Promote participatory management structures | # of IDPs living in sites with participatory management committees (including active participation by women) % of IDP sites reporting improved infrastructure from the CCCM infrastructure checklist | | 18,000 | 50,000 |
| 3.3) Improvements to IDP settlement safety and basic quality of life | % of IDPs settlement where women, girls, boys and men have equal access to basic services | | Not Applicable | At least 55% |
| Activity 3.3: Strengthen child protection coordination and partners' capacity to respond to child protection concerns in Syria | 3.3.1) # of frontline child protection first responders and volunteers trained in line with the child protection minimum standards (women/men) | | | At least 75% |




 **CCCM Objective 4: Strengthen the resilience of household and communal coping mechanisms in IDP sites. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|-----------------------|------------------|
| 4.1) Strengthening communal resilience in IDP sites | % of IDP sites with self-run emergency response capabilities (first aid, fire response...) | 209,000 | Fewer than 10% | At least 30% |
| 4.2) Supporting household resilience and exit strategies | Increase of dedicated initiatives to HH resilience | 220,000 | Less than USD 200,000 | Increase of 300% |

 **CCCM Objective 5: Enhance capacities in camp/collective centre management and protection mainstreaming in IDP sites for national humanitarian actors. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|---------|---------------|--------|
| 5.1) Training on camp management and/or protection mainstreaming for Syrian humanitarian actors | Number of IDPs benefiting from Syrian NGOs with reinforced capacities in camp and collective centre management | | n/a 10,000 | 50,000 |

COORDINATION AND COMMON SERVICES SECTOR OBJECTIVES, INDICATORS AND TARGETS

 **Coordination and Common Services Objective 1: Provide effective coordination support at hub and WoS levels, facilitating timely funding, an evidence-based response informed by enhanced needs assessment and information management, and reinforced response capacity of national humanitarian actors. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|-------------------|---------------------------------------|
| 1.1) Provision of support to enhance coordination, leadership and humanitarian financing mechanisms at the national and Whole of Syria levels | % of partners satisfied with OCHA country offices' support to enhance the effectiveness of coordination mechanisms | n/a | TBC ¹⁵ | 80% |
| | % of pooled-fund resources disbursed to national partners against priorities outlined in the 2016 SRP | n/a | 41% | 100% |
| 1.2) Provision of tools and resources to enhance common situational awareness of humanitarian needs and enable more informed decision making | % of partners indicating satisfaction with information management materials | n/a | TBC ¹⁶ | 80% |
| | # of cities and IDP sites for which profiling exercise is completed and regular tracking and monitoring mechanism for displacement is established | 200,000 | TBC | 20 neighbourhood profiles in 6 cities |




15. Survey to be conducted at start of 2016

16. Survey to be conducted at start of 2016

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|----------|--------|
| 1.3) Provision of support to enhance the response capacity of national humanitarian actors at the hub and Whole of Syria level | # of learning needs analyses and competency mappings carried out | n/a | TBC | TBC |
| | # of learning programmes and training packages developed | n/a | TBC | TBC |
| | # of Arabic speaking trainers incorporated into trainer network | n/a | TBC | 200 |


 **Coordination and Common Objective 2: Maintain coordination and operational capacity for UNRWA-led programmes targeting Palestine refugees.. Relates to SO1 , SO3 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|---------|----------|--------|
| 2.1) Provision of enhanced operational support for effective response to Palestine refugees | # and % of UNRWA facilities with adequate security equipment, personnel and services | n/a | 60% | 100% |




 **Coordination and Common Services Objective 3: Enhance security risk management measures to ensure the safety and security of UN personnel and continuity of humanitarian programme delivery. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|----------------------------|----------------------------|
| 3.1) Provision of a comprehensive security risk management package to the UN and INGOs | Safe access to areas of operation | n/a | All areas of UN operations | All areas of UN operations |
| | Number of incident reports produced, regular reports, advisories | n/a | 200 | 365 reports |
| | Number of missions facilitated | n/a | 20 | 80 missions |
| | Number of UN/INGO staff trained or provided with awareness-raising sessions | 400 | 100 | 200 people |

EARLY RECOVERY AND LIVELIHOODS SECTOR OBJECTIVES, INDICATORS AND TARGETS


 **Early Recovery & Livelihoods Objective 1: Improve access to essential services and restore socio-economic infrastructure using labour-intensive schemes for the affected people and institutions. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|------------|-----------|-----------|
| Establish and implement Cash-for-Work and labour-intensive schemes for debris and solid waste management and rehabilitation in shelters, affected neighbourhoods and host communities. | Number of affected people with better access to basic and social infrastructure and services | 9,474,277 | 1,670,237 | 1,850,000 |
| | Number of people employed in infrastructure rehabilitation | | | 12,390 |
| Establish and implement Cash-for-Work and labour-intensive schemes for the restoration and rehabilitation of damaged infrastructure in relatively stable areas, areas of return and hosting communities. | Number of affected people with better access to basic and social infrastructure and services | 9,474,277 | 120,000 | 1,143,500 |
| | Number of people employed in infrastructure rehabilitation | 10,029,193 | 3,650 | 6,300 |
| Support socio-economic recovery of micro- and small-scale enterprises through grants, loans and assets replacement with particular focus on vulnerable groups. | Number of affected people with better access to basic and social infrastructure and services | 9,937,142 | | 182,000 |

 **Early Recovery & Livelihoods Objective 2: Strengthen the coping mechanisms of affected people and vulnerable groups through the rehabilitation and restoration of disrupted livelihoods complemented by social protection schemes. Relates to SO1 , SO3 **




| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|------------|----------|---------|
| Support socio-economic recovery of micro- and small-scale enterprises through grants, loans and assets replacement with particular focus on vulnerable groups. | Number of affected people receiving livelihoods support (loans, grants, assets, vocational training...) aggregated by gender and age | 9,937,142 | | 283,945 |
| | Number of people employed in livelihoods restoration activities | 10,029,193 | 4,308 | 14,275 |
| Develop and implement business development services including vocational training | Number of vulnerable HH receiving regular cash or in-kind cash transfers | 9,937,142 | 10,044 | 15,000 |
| | Number of affected people receiving livelihoods support (loans, grants, assets, vocational training...) aggregated by gender and age | | 2,102 | 39,628 |
| Develop and implement an integrated rehabilitation programme for PwD offering various services such as disability aids, physiotherapy, livelihoods support | Number of affected people receiving livelihoods support (loans, grants, assets, vocational training...) aggregated by gender and age | | | 500 |
| | Number of people with disabilities benefiting from rehabilitation services and livelihoods support | | 3,333 | 16,500 |
| Develop and implement Cash-for-Work, assets support, grants and toolkits provision and vocational training for women heading households. | Number of affected people receiving livelihoods support (loans, grants, assets, vocational training...) aggregated by gender and age | | 9,010 | 10,004 |
| | Number of vulnerable HH receiving regular cash or in-kind cash transfers | | | 950 |

53

 **Early Recovery & Livelihoods Objective 3: Promote social cohesion and local participation for more resilient communities. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|-----------|----------|--------|
| Develop and implement participatory youths-led community-based activities promoting social cohesion. | Number of community members and youth trained on ER&L and resilience-based approaches promoting social cohesion | 5,023,398 | 10,996 | 17,400 |

EDUCATION SECTOR OBJECTIVES, INDICATORS AND TARGETS




 **Education Objective 1: Scale up safe and equitable access to formal and non-formal education for crisis-affected school aged girls and boys (5-17 years). Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|-----------|----------|---------|
| 1.1 Provision of ECCE (Early Childhood Care and Education) services | # of children (up to 5 years, girls/boys) enrolled in ECCE services | 1,400,000 | 30,000 | 69,205 |
| 1.2 Conduct non-formal education programs (ALP, catch-up classes, remedial education, literacy and numeracy classes, etc.) | # of children (5-17 years, girls/boys) enrolled in non-formal education | 2,757,244 | 90,000 | 626,810 |
| 1.3 Provide technical and vocational education and training (TVET) to youth | # of youth (15-20 years, girls/boys) benefitted from TVET | 2,200,000 | 4,000 | 104,265 |
| 1.4 Provide school feeding programs | # of children (5-17 years, girls/boys) benefitted from school feeding programs | N/A | 280,000 | 548,000 |

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|--------------------|----------|--|
| 1.5 Establish, expand and rehabilitate (small scale) classrooms as per the INEE Minimum Standards (MS), equipped with basic furniture | # of classrooms established, expanded or rehabilitated | 108,000 classrooms | 81,765 | 16,000 classrooms (including establishing Temporary Learning Spaces - TLS) |

 **Education Objective 2: Improve the quality of formal and non-formal education for school aged girls and boys (5-17 years) within a protective environment. Relates to SO1 , SO3 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|-----------|-----------|-----------|
| 2.1 Provide teacher professional development programs (including facilitators and school staff) related to child-centred, protective and interactive methodologies, classroom management and PSS | # teachers, facilitators and school staff trained (female/male) | 272,000 | 5,000 | 34,722 |
| 2.2 Provide incentives/allowances for teaching staff | # of teaching staff received incentives/allowances (female/male) | 30,000 | 4,000 | 6160 |
| 2.3 Conduct self-learning and life-skills programs | # of children (5-17 years, girls/boys) benefited from self-learning, life-skills programs | 2,757,244 | 52,700 | 532,187 |
| 2.4 Procure and distribute textbooks, teaching and learning materials, and school supplies (school bags, school-in-a-box, recreational kits, ECD kits etc.) including through Back-to-learning (BTL) campaigns | # of children (girls/boys) received textbooks, teaching and learning materials, and school supplies. | 5,400,000 | 2,100,000 | 3,837,091 |




 **Education Objective 3: Strengthen the capacity of the education system and communities to deliver a timely, coordinated and evidence based education response at national and sub-national levels. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|----------|---|
| 3.1 Provide training for education actors, including PTAs and local councils, on policy development, planning, data collection, sector coordination and on INEE MS | # of education actors (female/male) trained on policy, planning, data collection, sector coordination and INEE MS | 4,500 | 1,300 | 2,090 |
| 3.2 Develop and update sector analysis through school-based assessments, rapid assessments, real-time monitoring, analytical mappings, etc. | # of assessments/monitoring tools developed or updated | N/A | N/A | Annual WoS Education Analysis, 12 Education Monitoring Tool |

EMERGENCY TELECOMMUNICATIONS SECTOR OBJECTIVES, INDICATORS AND TARGETS

 **Emergency Telecommunications Objective 1: Provide common security telecommunications, voice and data connectivity services to humanitarian actors. Relates to SO1 , SO2 **




| ACTIVITY | INDICATOR | TARGET |
|--|---|--------|
| 1.1) Provide emergency telecommunication services (eg. radio programming, radio coverage, data connectivity) to humanitarian partners in common operational areas. | Number of operational areas where common security telecommunications (radio) networks have been upgraded. | 5 |

 **Emergency Telecommunications Objective 2: Lead inter-agency emergency telecommunications coordination and information sharing to support the operational needs of humanitarian actors. Relates to SO1 , SO3 .**

| ACTIVITY | INDICATOR | TARGET |
|---|--|-------------------------|
| 2.1) Provide an online platform for information sharing and coordination. | ETC web portal operational with secure member access and regular updates posted. | Dedicated online portal |
| 2.2) Prepare information management (IM) products and convene coordination meetings across the WoS region. | Number of IM products (maps, situation reports etc.) produced and shared via email, task forces and on the ETC web portal. | 24 |
| 2.3) Lead coordination amongst humanitarian partners to ensure the delivery of data and security telecoms services. | Number of global and local ETC coordination meetings conducted. | 20 |




 **Emergency Telecommunications Objective 3: Build capacity of humanitarian actors and strengthen the ability to ensure safety of staff and assets in the field. Relates to SO1 , SO2 .**

| ACTIVITY | INDICATOR | TARGET |
|--|---|--------------------------|
| 3.1) Provide basic and advanced technical training to humanitarian personnel e.g. radio communications training. | Number of humanitarian personnel who receive training. | 150 |
| 3.2) Develop new ways to deliver technical training to staff in the field. | Number of online training courses available on-demand via the ETC web portal. | 1 |
| 3.3) Deploy radio operators at inter-agency radio rooms to improve the safety of staff and assets in the field. | Number of radio operators deployed in common operational areas. | Syria - 31 Jordan - 8 |

 **Emergency Telecommunications Objective 4: de targeted assistance to national NGOs that demonstrate a need for telecommunications assistance beyond their organizational capacity. Relates to SO1 , SO2 .**

| ACTIVITY | INDICATOR | TARGET |
|--|---|--------|
| 4.1) Launch a seed funding initiative to assist national humanitarian actors to strengthen their capacity through the use of technology. | Number of national humanitarian actors assisted to strengthen their capacity through the use of technology. | 2 |

FOOD SECURITY AND AGRICULTURE SECTOR OBJECTIVES, INDICATORS AND TARGETS

 **Food security and Agriculture sector objective 1: Provide emergency response capacity, lifesaving, and life sustaining assistance for the most vulnerable crisis affected people, including people with specific needs. Relates to SO1 , SO2 .**

Where relevant, indicators will be disaggregated by sex and age.




| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|--|----------|-----------------------------|
| 1.1) Emergency response with food assistance through appropriate modalities to meet immediate food needs of most vulnerable during acute crises | Number of organisations' that have planned for an emergency response. Number of households assisted by emergency responses/contingency plans. | 1.2 million people (estimated projection for 2016) | n/a | 1.2 million people (annual) |

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|--------------------|--|---|
| 1.2) To sustain food assistance through appropriate modalities for the most vulnerable affected people | Number of people receiving assistance as % of planned by different modalities, including: in kind such as food baskets, wheat flour/bread ¹⁷ , cash, vouchers, and supplementary food assistance programs | 6.3 million people | 40% of households have poor or borderline Food Consumption Score (FCS) in 2015 | 6.3 million people (per month) Reduce the % of assisted households with poor or borderline Food Consumption Score to 30% |
| | Number of people receiving subsidized bread (bakery support – SO 3) | | Coping Strategy Index (CSI) 36 in 2015 | Consumption Score to 30% |
| | Quantity of food/value of cash/voucher received by beneficiary/ households (and proportion in relation to food basket.) | | | Reduce Coping Strategy Index (CSI) to 25 |
| | Improvement in Food Consumption Score (FCS) over assistance period for targeted/assisted households Improved Coping Strategy Index/score | | | |


 **Food Security and Agriculture objective 2: Support livelihoods of affected communities and households by increasing agricultural production, protection of productive assets, and restoring or creating income generating activities to prevent negative or irreversible coping mechanisms. Relates to SO1 , SO3 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|--|---|
| 2.1) Distribution of agricultural inputs, such as seeds, fertilizer, pesticide and equipment | Number of households reached with agriculture Inputs as % of planned by modality (in kind, cash or voucher) Qty of seed distributed by crop (cereal, tuber, legume, vegetable) | n/a | Coping Strategy Index 36 in 2015 | 230,000 Households Reduce Coping Strategy Index to 25 |
| | Ha/donum planted by crop Improved Coping Strategy Index/score | | | |
| 2.2) Support to backyard food production (horticulture, poultry-egg laying hens, market gardens) | Number of households supplied with backyard kit as % of planned by modality (in kind, cash or voucher) | n/a | 33% of households have medium or low Dietary Diversity Score in 2015 | 100,000 Households Reduce the medium or low Dietary Diversity Score of % of households assisted to 25. |
| | Percentage of assisted households that have an improved dietary diversity score | | | |
| 2.3. Support to asset building and asset protection (small livestock and animal feed distribution) | <ul style="list-style-type: none"> Number of households supplied with assets as % of planned by modality (in kind, cash or voucher) Number of animals distributed as % of planned. MT of feed distributed to beneficiary households. | n/a | n/a | 90,000 households |
| 2.4 Veterinary support, such as provision of animal health such as animal drugs and training for veterinary services | <ul style="list-style-type: none"> Number of herders assisted and animals treated/vaccinated as % of planned. Number of major outbreaks recorded in the areas covered by the treatments | n/a | n/a | 200,000 households |
| 2.5. Income generating activities (resource production/ food or resource processing) | <ul style="list-style-type: none"> Number of households supported with income generation activities as % of planned by modality (in kind, cash, or voucher) Number of Vocational trainings delivered as % of planned. Number of small businesses created as % of planned. Improvement in Food Consumption Score (FCS) over assistance period for targeted/assisted households | n/a | 40% of households have poor or borderline Food Consumption Score (FCS) in 2015 | 100,000 Households Reduce the % of assisted households with poor or borderline Food Consumption Score to 30% |

17. Wheat flour/bread distributed outside of food baskets as stand-alone items.

 **Food Security and Agriculture Objective 3: Improve the capacity to deliver essential services to affected local communities and support the rehabilitation of productive infrastructures. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|----------|--------------------|
| 3.1) Establish/develop/strengthen the structure and capacity for the provision of essential services for affected local communities (food security, agriculture and livestock) | Number of technicians trained as % planned | n/a | n/a | 200,000 Households |
| | Number of essential services supported as % planned | | | |
| | Number of communities served by the service as % planned | | | |
| | Number of household benefitting from the service | | | |
| 3.2) Support rehabilitation of relevant economic infrastructures (canals, irrigation systems, markets, storage facilities, bakeries, etc.) through different modalities | Number of households/communities served by the rehabilitated infrastructure | n/a | n/a | 200,000 Households |
| | Number of household involved in the rehabilitation through different modalities as % planned | | | |
| | Number of households supported with CFW or CFAs as % planned | | | |
| | Number of bakeries supported as % planned MT of subsidised bread produced | | | |

 **Food security and Agriculture objective 4: Improved quality of the response based on evidence, capacity building and strong coordination with the Food Security and Agriculture Sector and cross-sectors. Relates to SO1 , SO2 , SO3 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|---|--|
| 4.1) Food security partners have a harmonized approach towards assessments, analysis of data and monitoring to develop a robust evidence base for response planning | Number of assessment sub group meetings across hubs, INGOs and SNGOs | n/a | 8 individual FS assessments in 2015 as per assessment registry | Quarterly updates on Food Security situation, pin numbers and severity |
| | Assessment repository updated and info disseminated frequently | | | 2 country wide assessments during 2016 |
| | Harmonized indicators for comparable data analysis across assessments | | | 12 country wide price monitoring updates in 2016 |
| | FSS Technical Working Group delivers on WoS analysis and harmonization. | | | Increase data analysis capacity within cluster/sector |
| 4.2) Update WOS 4W regularly by partners, and provide forecast plans on a quarterly basis | All partners are sharing information from all hubs | n/a | 37 partners feeding into 4ws monthly Forecasts 1 month ahead from only 1 hub | 100% partners reporting including no activity |
| | Monthly response/gaps analysis across hubs and at WoS. | | | Forecasts to include 3 months ahead and from all hubs |
| | Number of cross sector severity ranking/ mapping supporting geographically focused joint contingency planning | | | |
| 4.3) Targeting based on harmonized vulnerability criteria | Common targeting approach for the FS sector | n/a | n/a | # new partners using harmonized criteria # of the most vulnerable people receiving assistance increases |
| 4.4) Capacity building | Partners trained in skills including designing a project proposals, project cycle management | n/a | 4 sector Contingency Plans in 2015 | # partners trained Type of partners trained Number of contingency plans and areas/ Households covered |
| | Number of national partners trained in minimum preparedness and response action / monitoring. | | | |
| 4.5) Cross sectoral coordination on key issues, including assessments, monitoring and targeting | Number of cross-sectoral initiatives taken | n/a | n/a | Cross-sectoral winterization plan for 2016 |

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|--|--|
| 4.6. Platform for all cross learning initiatives such as monitoring, transfer modalities such as cash based response, protection mainstreaming, Ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people | # of consultative position papers and guidance provided # of organizations endorsing the cross learning initiatives # of cluster listening exercises conducted | n/a | 2 (protection mainstreaming and Ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people checklists) | At least 2 WoS positions/feasibility study conducted to guide partners At least 80% of partners integrated protection mainstreaming and Ensuring appropriate humanitarian response through seeking feedback from, and addressing concerns about the response, from affected people checklists At least 2 cluster listening exercises conducted |

HEALTH SECTOR OBJECTIVES, INDICATORS AND TARGETS

Health Objective 1: To provide life-saving and life-sustaining humanitarian health assistance to affected people. Relates to SO1 , SO2

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|----------------------|---|---|
| Provision of primary health care services, including child and maternal health | 1) # of medical procedures* 2) # of treatment courses distributed 3) # of children under 1 covered by DPT3 | 11,530,000 (persons) | 1) 10,981,587m 2) 21,351,878 3) 190,000 | 1) 13,000,000 (medical procedures) 2) 21,000,000 |
| Strengthening trauma and injuries care | 4) # % of sentinel sites submitting weekly surveillance reports | | 4) 80% 5) 150 | 3) 80% 4) 90% |
| Provision of essential medicines and supplies | 5) # of health facilities providing EmONC | | | 5) 250 |
| Strengthening of the provision of physical rehabilitation services at the facility level | | | | |
| Support for immunization services | | | | |
| Strengthening and expanding the communicable disease surveillance system | | | | |
| Provision of EmONC services at health facilities | | | | |
| Support for mental health services at facility level | | | | 2 |
| Strengthening of the management of non-communicable disease treatment and prevention | | | | |
| Strengthening of referral system | | | | |

* Aggregate number based on: 1) Consultations (OPD consultations at PHC and hospital, including outreach services; mental health consultations, and referral cases) 2) Trauma cases supported 3. Persons with disabilities supported 4) deliveries by skilled birth attendant.

Health Objective 2: To strengthen health sector coordination and health information systems to improve the life-saving health response for people in need, with an emphasis on enhancing protection and increasing access to health services, relates to SO1 , SO3

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|-----------------------------------|---------|----------|--------|
| 2.1 Coordination meetings held regularly at the hub and WoS level for de-confliction of areas of overlap, gap identification and collaborative efforts between the five hubs to increase access to hard to reach areas and locations listed in UNSCR 2139, 2165, 2191, as updated by the UN | # of inter-hub meetings conducted | | 8 | 12 |
| 2.2 Mainstream protection efforts throughout health programming through coordination fora and training/workshops with health partners | | | | |
| 2.3 Roll out of health information systems (HIS) at the cluster/working group level | | | | |
| 2.4 Joint contingency and preparedness planning across the five hubs | | | | |
| 2.5 Flash assessment of emergency situations and design of rapid response | | | | |

Health Objective 3: To support community resilience, institutional and response capacity by empowering communities and national actors relates to SO1, SO2, SO3

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|----------|--------|
| 3.1 Training, retaining and increasing the capacity of health care providers | 1) # of facilities rehabilitated and/or re-enforced | | | 300 |
| 3.2 Training community health care workers | | | | |
| 3.3 Rehabilitating and reinforcing health facilities, including physical structure, equipment/supplies to provide safe and secure environments for health service delivery | | | 26,236 | 30,000 |
| 3.4 Capacity building of NNGOs and health institutions to support Syrian leadership of the health sector | 2) # of health care workers trained | | | |
| 3.5 Promote mobile medical units for emergency response | | | | |

LOGISTICS CLUSTER OBJECTIVES, INDICATORS AND TARGETS

Syria Logistics Cluster Objective 1: To provide logistics services (inclusive of surface transportation, transshipment, contingency fuel storage, emergency airlifts and warehousing) to humanitarian organizations responding to the Syria crisis. Relates to SO1, SO2

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|----------|--------|
| 1.1) Common logistics services (including common transport, contingency fuel storage, humanitarian convoys, storage, emergency airlifts, coordination/transshipment support) | Number of organizations assisted | n/a | n/a | 20 |
| | Percentage of logistics service requests fulfilled | n/a | n/a | 95% |
| | Number of convoys per month (average monthly) | n/a | n/a | 4 |
| | Number of emergency airlifts conducted | n/a | n/a | 5 |
| | Number of hubs for cross-border coordination/ transshipment operational | n/a | n/a | 3 |


Syria Logistics Cluster Objective 2: To maintain regional Whole of Syria inter-agency logistics coordination and information management in order to support humanitarian actors. Relates to SO1, SO3

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|--|---------|----------|--------|
| 2.1) Maintain a platform for logistics information sharing and coordination | Number of Coordination Meetings held | | | 40 |
| Number of Information Management (IM) products produced and shared | Number of Information Management (IM) products produced and shared | | | 50 |

Syria Logistics Cluster Objective 3: To enhance capacity of humanitarian actors via dedicated logistics trainings and purchase of necessary equipment. Relates to SO1, SO2

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|----------------------------------|--------------------------------------|---------|----------|--------|
| 3.1) Conduct logistics trainings | Number of logistics trainings held | | | 5 |
| | Number of humanitarian staff trained | | | 100 |

NUTRITION SECTOR OBJECTIVES, INDICATORS AND TARGETS

 **Nutrition Objective 1: Strengthen preventive nutrition services for vulnerable groups in need of humanitarian response, focusing on appropriate infant and young child feeding practices, micronutrient initiatives and optimal maternal nutrition. Relates to SO1¹⁸, SO2¹⁹**

| ACTIVITY | INDICATOR | IN NEED | BASELINE ²⁰ | TARGET |
|--|---|-----------|------------------------|-------------------------|
| 1. Promotion of appropriate infant and young child feeding (IYCF) practices | | | | |
| 1.1) Facility and community based counselling for and awareness raising of breastfeeding and complementary feeding | Number of Pregnant and lactating women counselled on appropriate IYCF | 1,331,841 | 86,814 | 266,368 ²¹ |
| | Number of appropriate IYCF awareness sessions conducted | | 9,842 | 19,200 ²² |
| 1.2) Capacity building of health workers on appropriate IYCF practices to provide support and counseling. | Number of health workers (male/female) trained on IYCF and are providing counseling support | 1008 | 301 | 1,000 ²³ |
| 1.2 Provision of micronutrient supplementation through healthcare network, campaigns and community-based food and nutrition activities | | | | |
| 1.2) Micronutrient supplementation to women and children | Number of boys and girls (6-59 months) who received multiple micronutrient supplements | 1,830,499 | 437,823 | 915,249 ²⁴ |
| | Number of pregnant and lactating women who received micronutrients including iron folate for 6 months and multiple micronutrients | 1,331,841 | 15,914 | 133,184 ²⁵ |
| 1.2.2) Vitamin A supplementation through health facilities (routine) and during campaign | Number lactating women reached with Vitamin A supplementation | 665,921 | 282 | 66,592 ²⁶ |
| | Number of boys and girls aged 6-59 months reached with Vitamin A supplementation | 1,830,499 | 1,600,000 | 1,647,449 ²⁷ |
| 1.2.3) Distribution/provision of lipid-based nutrient supplements to women and children for 4 months through health facilities and alongside food distribution and advocacy/promotion of dietary diversification | Number of boys and girls aged 6-59 months reached with LNS for 4months including high energy biscuits | 1,830,499 | 556,427 | 915,249 ²⁸ |

 **Nutrition Objective 2: Improve access to quality curative nutrition services through systematic identification, referral and treatment of acutely malnourished cases according to international standards. Relates to SO1²⁹, SO3²⁹**

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|-----------|----------|-----------------------|
| 2.1) Train/orient stakeholders on CMAM guidelines | Number of health (male/female) staff trained on CMAM guidelines | | 741 | 1,000 ³⁰ |
| 2.2) Facility- and community-based screening for acute malnutrition | Number of PLW women screened for malnutrition | 1,331,841 | 651,625 | 732,200 ³¹ |
| | Number of boys and girls 6-59 months screened for malnutrition | 1,830,499 | 44,762 | 133,184 ³² |

18. Save lives, alleviate suffering and increase access to humanitarian response for vulnerable people and those with specific needs

19. Enhance protection by promoting respect for IHL and HRL through quality principled assistance, services and advocacy

20. Baseline is based on the Nutrition cluster performance as of 30th September 2015

21. 20% of total pregnant and lactating women considered under people in need

22. Each of the 200 priority surveillance supporting facilities conduct 4 sessions per month for children under 12 months

23. 70 health workers per governorate

24. 50% coverage of 6-59 month-old children; 6-59 month-old children represent 90% of all U5.

25. 10% overage of the total pregnant and lactating (P/L) women in need.

26. Lactating women represent 50% of P/L women, then aim at with 10% coverage

27. 90% coverage of 6-59 month-old children; 6-59 month-old children represent 90% of all U5

28. 50% coverage of children 6-59 month children




29. Support the resilience of affected local communities and households within the humanitarian response by protecting and restoring livelihoods, access to essential services and rehabilitation of socio-economic infrastructure

30. 70 health workers per governorate



31. 10% overage of the total pregnant and lactating (P/L) women in need.

32. 40% coverage of 6-59 month-old children; 6-59 month-old children represent 90% of all U5.

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|----------|----------------------|
| 2.3) Treatment of acutely malnourished children | Number of boys and girls 6-59 months with severe acute malnutrition treated | 26,090 | 3,196 | 7,827 ³³ |
| | Number of boys and girls 0-59 months who are severely malnourished with medical complications treated | 2,609 | 220 | 783 ³⁴ |
| | Number of boys and girls 6-59 months with moderate acute malnutrition treated | 60,599 | 9,356 | 18,180 ³⁵ |
| | Number of PLW with moderate malnutrition treated | 79,910 | 982 | 7,991 ³⁶ |

 **Nutrition Objective 3: Promote nutrition situation analysis using standard tools and screening methodologies on children and women. Relates to SO1 , SO2 **

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|----------|-------------------|
| 3.1) Facilitate collection and consolidation of the age and gender disaggregated (where possible) health facility-based nutrition screening data | Number of health facilities equipped and regularly submitting nutrition screening data | 200 | 120 | 200 |
| 3.2) Conduct governorate-level rapid/SMART nutrition assessments. | Number of governorate-level rapid nutrition assessments conducted | 14 | 11 | 13 |
| 3.3) Capacity strengthening of public health staff on rapid nutrition assessment | Number of staff (male/female) trained in rapid nutrition assessment | 140 | 50 | 130 ³⁷ |

Nutrition Objective 4: Promote and strengthen coordinated timely, appropriate and integrated nutrition response through multi-sectoral approach to achieve maximum outcome from nutrition service delivery. Relates to SO1 , SO2 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|--------------|--------------|--------------|
| 4.1) Maintain national and sub-national capacity for nutrition sector/cluster coordination and information management for integrated response | Number of sector/cluster coordination platforms operational | 4 | 3 | 4 |
| 4.2) Regular consolidation of the 4W matrix on nutrition response to purposes of analysing coverage/gap on response and advocacy with other sectors | Monthly Whole of Syria 4W matrix on nutrition response | 12 (monthly) | 12 (monthly) | 12 (monthly) |

33. 30% of the 26,000 total SAM caseload (i.e. with and without complications)

34. All SAM cases with medical complications, which are estimated as 10% of the target SAM cases.

35. 30% of the total MAM caseload of 60,000 children

36. 10% of the total pregnant and lactating women MAM caseload (80,000).

37. 10 staff per governorate

SHELTER AND NFI SECTOR OBJECTIVE, INDICATORS AND TARGETS



Shelter/NFI Objective 1: Provide life-saving and life-sustaining shelter and NFI support. Relates to SO1


| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|----------|---|
| 1.1) Provision of emergency shelter kits and/or construction materials/tools for private or shared shelters (in-kind, cash, voucher, etc.) | Number of people that have received emergency shelter assistance | | | 5,800,000 Male: 2,900,000 Female: 2,900,000 |
| 1.2) Provision of emergency/ temporary shelter (e.g. tents) | | | | |
| 1.3) Rehabilitation of emergency shelter spaces in collective centers, spontaneous sites, etc. (in-kind, cash, voucher, physical repair, etc.) | | | | |
| 1.4) Provision of NFI assistance (in-kind, cash, voucher, etc.) | | | | |



Shelter & NFI Objective 2: Promote increased security of tenure. Relates to SO2



| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|----------|---|
| 2.1.1 Provision of information and/or targeted counselling on housing, land and property (HLP) rights | 2.1 Number of people provided with HLP information/assistance | | | 120,000 Male: 60,000 Female: 60,000 |




Shelter & NFI Objective 3: Contribute towards the resilience and cohesion of communities and households by improving housing and community/public infrastructures. Relates to SO3


| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|----------|---|
| 3.1) Support to owners/tenants to sustainably repair/rehabilitate their housing (materials, cash, voucher, cash-for-work, local hire, etc.) | 3.1 Number of people assisted with durable shelter solutions | | | 580,000 Male: 290,000 Female: 290,000 |
| 3.2) Rehabilitation of community structures and public infrastructure (materials, cash, voucher, cash-for-work, local hire, etc.) | 3.2 Number of people benefiting from the improvement of community/public infrastructure | | | |
| 3.3) Training of stakeholders on resilience oriented shelter/NFI skills and capacities | 3.3 Number of people trained in shelter/NFI related skills | | | |

WASH SECTOR OBJECTIVE, INDICATORS AND TARGETS


WASH Objective 1: Sustainable Water and sanitation systems are maintained and/or restored to improve public health. Relates to SO1

, **SO2**


| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|---|---------|-----------|------------|
| 1.1) Repair / rehabilitation / augmentation of water systems | Estimated number of people served by repair/ rehabilitation/ augmentation of water systems. | | 6,500,000 | 13,203,506 |

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|---------|----------|------------|
| 1.2) Support to operation and maintenance. | Estimated number of people benefiting from support to operation and maintenance. | | | 14,754,693 |
| 1.3) Support to waste water systems | Estimated number of people served by waste water systems. | | | 6,220,498 |
| 1.4) Support to solid waste management | Estimated number of people served by solid waste management systems. | | | 3,179,122 |

 **WASH Objective 2: Most vulnerable groups receive life-saving assistance to reduce WASH-related morbidity.**
Relates to SO1 , SO3 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|--|--|------------|----------|-----------|
| 2.1) Provide access to essential WASH NFIs | Estimated number of individuals with access to essential WASH NFIs. | 9,660,000 | 0 | 4,460,553 |
| 2.2) Provide access to improved lifesaving/ emergency WASH facilities and services | Estimated number of individuals benefitting from access to improved lifesaving/ emergency WASH facilities and services. | 12,130,341 | 0 | 5,828,288 |
| 2.3) Through community mobilization activities establishing water safety plans and improving hygiene | Estimated number of individuals reached through community mobilization activities establishing water safety plans and improving hygiene. | 12,130,341 | 0 | 7,320,691 |
| 2.4) Vector control | Estimated number of individuals benefitting from vector control activities. | | 0 | 3,416,440 |
| 2.5) WASH technical training and capacity building | Estimated number of national humanitarian actors and authorities receiving WASH technical training and capacity building. | | 0 | 2091 |

 **WASH Objective 3: Whole of Syria WASH Coordination Structures Enhanced.** Relates to SO1 , SO2 

| ACTIVITY | INDICATOR | IN NEED | BASELINE | TARGET |
|---|---|---------|----------|--------|
| 3.1) Produce monthly analytical maps | # of sets of WoS monthly analytical maps | | 0 | 12 |
| 3.2) Sector-specific needs assessments conducted and analyzed | # of sector-specific needs assessments conducted and analysed | | 0 | 2 |
| 3.3) WASH WoS sector working groups operational | # of WASH WoS partner sector working groups operational | | 3 | 3 |

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