

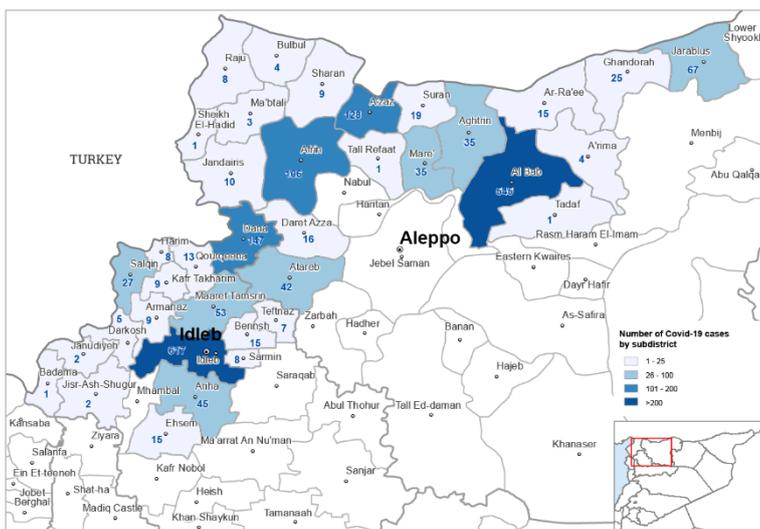
### HIGHLIGHTS

**>500**  
average daily  
COVID-19 tests

**2,865**  
confirmed  
COVID-19 cases

**7.3%**  
devaluation of the SYP  
since last month

**1.5M**  
people living  
in active IDP sites



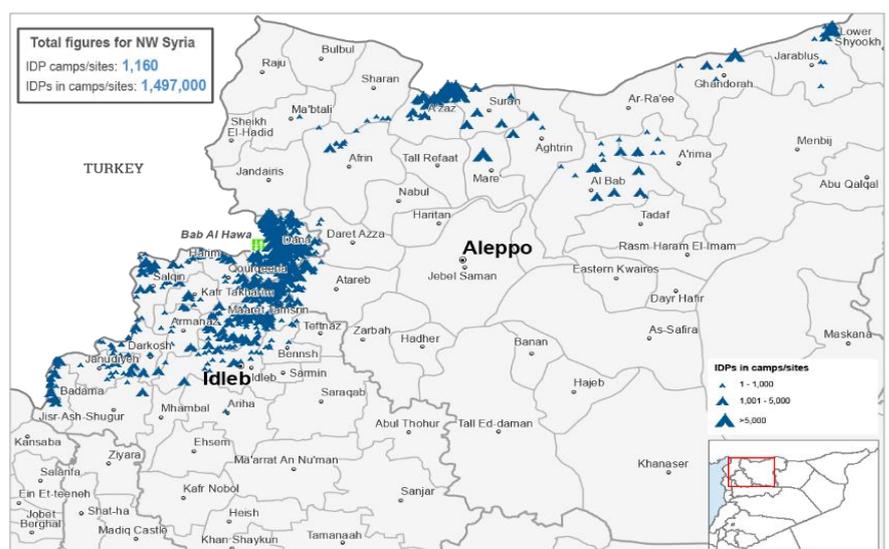
Source: Health Cluster, as of 14 October 2020  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

### COVID-19 situation in northwest Syria

- Twenty-fold increase in confirmed cases since the last situation report.
- 1,476 cases in Idlib area, 1,389 cases in northern Aleppo governorate.
- Three testing labs (two new).
- 19 CCTCs (715 beds) and eight hospitals (645 beds, 114 ICU beds and 86 ventilators).
- More than 13% of cases are medical health workers; 7.5% other workers in health sector.
- [Northwest Syria COVID-19 monitoring dashboard](#) available.

### IDP sites and winterisation

- Some 2.8 million people in need in northwest Syria.
- Nearly 1.5 million people live in 1,160 camps/sites in northwest Syria (79% women and children).
- Economic crisis is inhibiting individuals' independent access to vital supplies.
- [Guidance Note on Winterisation for northwest Syria](#) has been updated.
- Additional US\$10 million needed to support winterisation for some 252,000 IDPs.



Source: CCCM Cluster, September 2020  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

## SITUATION OVERVIEW

**Continuing hostilities:** Communities in northwest Syria continue to be affected by hostilities despite the 5 March ceasefire agreement, with continued shelling largely concentrated in areas south of the M4 highway and around the M5 highway in the Idleb area. Sporadic airstrikes continue to be reported, most recently on 14 October, while 20 September saw the highest number of recorded airstrikes in a single day since the ceasefire – some 28 airstrikes in the Idleb area. According to local sources, at least two people were killed and 21 people were injured by these hostilities since the last situation report. Despite reduced airstrikes, increasing numbers of IED incidents, reports of clashes between non-state armed groups (NSAGs), and targeted attacks on civilians and humanitarian workers highlight the high level of insecurity in the Idleb and Afrin and A'zaz to Jarablus areas. Notably, on 14 September a Turkish Red Crescent (TRC) vehicle was attacked by armed men in northern Aleppo, resulting in the death of one TRC humanitarian worker and the injury of another, while on the same day at least nine civilians were killed and 19 others were injured by a vehicle-borne IED explosion in Afrin. On 6 October, a vehicle-borne IED exploded in Al Bab city and reportedly killed 21 people including four children and injured at least 80 others. Three of the people injured are NGO workers working as part of the northwest's COVID-19 referral system. Following the explosion in Al Bab, demonstrations against the deteriorating security situation were held in Al Bab city as well as in Qabasin, Idleb city and Afrin city. In yet another incident, on 15 October two Syrian aid workers and their driver were injured, one of them critically, after the car they were travelling in from a project site in Salqin city was hit by shrapnel resulting from a drone attack on another car travelling in the area. These incidents are grave reminders of the persistent danger to life in these areas. Since 8 September, local sources reported at least 17 other incidents of IEDs, UXOs and landmines affecting civilians, with nine people reported killed, including a child and a woman, and 22 others injured, including three children.

**Rapid increase in COVID-19 cases:** The number of COVID-19 cases in northwest Syria increased twenty-fold since the last situation report, from 138 cases on 8 September to 2,865 cases as of 19 October. Of the current cases, 1,476 are in the Idleb area and 1,389 cases are in northern Aleppo governorate. Idleb and Al Bab sub-districts are the most affected, together accounting for some half of all confirmed cases in the northwest, drawing calls for urgent attention to these areas. Twenty-one COVID-19 associated deaths have been reported in northwest Syria, while 1,544 cases are reportedly active and 1,300 people recovered. The recent increase of confirmed cases comes alongside the more than twofold increase in testing capacity, as two additional laboratories are now active, taking the total to three in northwest Syria. One new laboratory is in Jarablus and the other is in Afrin, each with one polymerase chain reaction (PCR) machine to test for COVID-19. These supplement the existing laboratory in Idleb city which has two PCR machines, and contribute to a sharp rise in daily testing capacity, now averaging of over 500 tests per day. As of 19 October, 18,076 tests have been performed. Given the crowded living conditions across northwest Syria, a significant challenge in countering COVID-19 remains the difficulty of physically isolating people. To address this, one quarantine centre is due to start operating this month. Strong emphasis is being laid on effect surge planning in hospital settings, simultaneously focused on infection control, clinical operational challenges, ICU surge capacity, triage staffing and maintenance of staff wellness through psychosocial support. This is being done through periodic assessments, supportive supervision activities and practical guidance. To increase availability of personal protective equipment (PPE) for the wider public, various inter-sector initiatives are currently being planned for the local production of reusable fabric masks, to reduce transmission risk while creating livelihood opportunities.

**Weakened economy:** The use of the Turkish Lira (TRY) continues to spread in northwest Syria, as the Syrian Pound (SYP) remains out of favour following its rapid devaluation and instability between June and mid-August 2020. The value of the SYP continues to slide; at 2,360 SYP per USD, its value as of 19 October is some 7.3 percent weaker than a month ago. Vendors have, in some cases, reportedly been mandated to price goods in TRY, and a rapid market assessment by humanitarian partners has found that most vendors no longer accept SYP. With basic commodities such as fuel, bread, transport, electricity and telecommunications services now reportedly priced in TRY, people without adequate access to TRY risk being excluded from markets or facing higher prices for the same goods and services because of exchange rate disparities – further marginalising more vulnerable members of society. This reportedly includes rent for accommodation, resulting in reported isolated incidents (with an increasing trend) of evictions of households without access to TRY. The devaluation of the SYP intensifies the precarious economic situation and is worsened by the impacts of COVID-19 on communities and markets. Protection partners are observing a steady increase in adoption of harmful coping mechanisms, resulting especially in child protection and gender-based violence (GBV) violations.

**Displacement and Returns:** In September, some 9,700 people are estimated to have spontaneously returned to areas in northwest Syria from which they were displaced. Most people returned to Ariha, Idleb, Teftnaz and Bennsh sub-districts, while Dana, Idleb, Salqin and Maaret Tamsrin saw the most departures. This brings the total to some 234,900 returns since January 2020 – the majority of these taking place following the ceasefire agreement in March. Displacements also continue to be recorded in northwest Syria, mostly driven by economic incentives, the security situation and factors such as access to services. CCCM partners reported some 44,083 IDP movements in northwest Syria in September, with most people departing from Idleb, Ehsen and Afrin sub-districts and most new arrivals received in Afrin, Dana and Ariha sub-districts.

**Winterisation priority:** With winter imminent, a current priority is delivering winterisation support before the arrival of the cold weather. Nearly 1.5 million people now live in more than 1,100 camps and informal sites across northwest Syria, most of which are self-settled and lack crucial infrastructure. With the economic crisis making it more difficult for people to independently access vital supplies such as fuel for heating, humanitarian partners are stepping up efforts to ensure that people are adequately equipped to deal with the impending weather conditions. A funding gap of some US\$10 million has been identified for achieving these aims. The Syria Cross-border Humanitarian Fund (SCHF) has made urgent lifesaving winterisation interventions in high-needs and underserved areas a thematic priority for its upcoming standard allocation, and humanitarian partners are calling on donors to help close the remaining gaps.

**Road rehabilitation:** Work to repair and widen roads has begun, funded through the SCHF. This follows the closure of the Bab Al-Salam border crossing under UNSCR 2533 in July, leaving Bab Al-Hawa the only point of entry from Turkey to northwest Syria open for shipments of UN humanitarian assistance. As a result, all UN transshipments to areas previously served via Bab Al-Salam must now travel further inside northwest Syria to reach those in need among the 1.3 million people living in northern Aleppo governorate, of whom some 800,000 are internally displaced. To facilitate this, and in advance of winter and anticipated seasonal flooding, work is being undertaken to rehabilitate the single route connecting Bab Al-Hawa to northern Aleppo and to create humanitarian lanes at the internal crossing points. In September, 845 trucks of UN humanitarian assistance were shipped via Bab Al-Hawa, compared to 176 in August and 21 in July – illustrating the increasing importance of keeping this lifeline open and accessible for millions of people in the northwest.

## FUNDING

The Syria cross-border Humanitarian Fund (SCHF) is working on a strategy for launching a new standard allocation, with a limited funding envelope of US\$13 million available. Two thematic priorities have been identified, namely (i) to support immediate and critical measures to prevent and respond to the COVID-19 pandemic, and (ii) to contribute to urgent lifesaving winterisation interventions in high-needs and underserved areas. These priorities were identified based on analyses of the context in consultation with the SCHF Advisory Board, the Humanitarian Liaison Group (HLG) and the Inter-Cluster Coordination Group (ICCG). A strong integration across sectors is needed to ensure complementarity with already funded activities and to focus on prioritised activities and geographical locations, while access and risk management considerations are central given the increasingly complex operating environment in northwest Syria.

As in previous years, a second standard allocation plays a strategic role in supporting critical activities at the turn of the year and across winter, at a point when a large part of donors' contributions has already occurred. Although a record amount of US\$127 million dollars has been generously contributed by 15 donors since the beginning of 2020, needs in northwest Syria are unabated and resource mobilisation efforts must continue. These generous contributions have enabled the SCHF to support 2.9 million people in northwest Syria with lifesaving and basic assistance, and to support the critical COVID-19 preparedness, prevention and response. However, the 2020 Syria Humanitarian Response Plan (HRP) remains underfunded, with 43.2 percent of the total requirement funded at the beginning of October.

Further information on SCHF activities and contributing donors can be found here: <https://pfbf.unocha.org>

## KEY PRIORITIES

 **Camp Coordination and Camp Management:** In northwest Syria, partners closely monitor 1,160 active IDP sites hosting 1,496,861 people (287,308 households). Of these, 79 percent are women and children, and 24,162 IDPs are reported to be persons with specific needs. In meeting the needs of this population, priority issues are: monitoring and coordinating **equitable access to multi-sectoral services** to enable better living conditions for displaced people; improving the quality and accountability of camp management in IDP sites; and strengthening IDP households' coping strategies to secure more sustainable solutions. To analyse trends and rapidly identify displaced persons in need of assistance, partners are prioritising **tracking IDP movements** and **coordinating and disseminating operational information** on IDP sites. Due to the many self-settled sites lacking camp management systems, monitoring and information collection are essential.

 **Early Recovery:** ERL partners are prioritising increasing access to **livelihoods opportunities**, with a focus on cash-for-work (CFW) schemes and multi-purpose cash. This includes CFW linked to rehabilitation for improving access to services (e.g. markets, main roads) and linked to local manufacturing of PPE such as fabric masks. Other foci include providing **support to urban/rural new businesses** and existing entrepreneurial activities impacted by multiple shocks, and scaling-up **restoration/rehabilitation of access ways/roads** critical for transportation of humanitarian supplies, to prevent natural calamities such as floods and to restore local economic activity and related access to livelihoods opportunities.

Furthermore, partners aim to scale up **restoration, rehabilitation and adaptation of key socioeconomic services** and related infrastructure, such as markets and shops and the collection and removal of waste and debris in urban and rural areas. **Preventing and reducing tensions** between displaced and host communities remains another ERL priority.

 **Education:** Schools in northwest Syria reopened on 26 September, and partners are prioritising **COVID-19 mitigation** measures such as providing additional learning spaces, WASH facilities, sterilisation and personal protective equipment (PPE) as well as rehabilitation and winterisation of learning spaces. **Distance and blended learning support** remain a priority for schools that remain fully or partially closed. Ongoing priority responses remain providing education personnel and teacher **incentives and training**, learning materials for children and teachers, and supporting children to undertake the national exams. As part of the COVID-19 response, **risk communication and community engagement (RCCE)** efforts are continuing, as well as re-planning school modalities and infrastructure, especially in camps, to adjust for physical distancing requirements.

 **Food Security and Livelihoods:** The provision of food assistance and pre-positioning of food stocks continued through-out the reporting period. Further, **livelihood initiatives** are prioritised to support local communities and households to recover agricultural production, sustain small-scale food production and productive assets, and create income-generating activities. A further priority is supporting the **production of animal-source foods** for humans to reduce human malnutrition, protect human health and reduce COVID-19 susceptibility, including by improving access to affordable animal feed for livestock owners and **protection against endemic and epidemic diseases**. Partners have engaged in **vaccination campaigns** against Peste des Petits Ruminants (PPR) and Lumpy Skin Disease (LSD), and an LSD training course is underway for Syrian NGO vets.

 **Health:** During the reporting period, confirmed COVID-19 cases in northwest Syria increased from 138 to 2,865, with slightly over 13 percent of current cases among medical health workers and another 7.5 percent among other workers involved in the health sector. The **COVID-19 outbreak** is a priority for health partners, with focus on treating and mitigating the spread of the virus and its impacts on IDPs and other vulnerable communities, including the **healthcare workforce**, and supporting scale-up of the **public health response**. In addition to COVID-19, partners are also focused on responding to a dramatic rise in **visceral leishmaniasis** and Multi-Drug Resistant (MDR) **tuberculosis** cases in northwest Syria.

 **Nutrition:** The poor nutrition situation in northwest Syria continues, with increases in acute and chronic malnutrition (stunting) rates among children over the last four months. The **high prevalence of stunting in children** aged 6-59 months and **acute malnutrition in pregnant and lactating women (PLW)** are of primary concern. The prevalence of chronic malnutrition among children aged 6-59 months increased from 19 percent to 33 percent (35 percent for boys, 31 percent for girls) between May 2019 and September 2020, while the prevalence of acute malnutrition increased from 1 percent to 2 percent over the same period. For PLW, proxy prevalence of acute malnutrition across northwest Syria is at 11 percent. There are also significant differences across northwest Syria. The proxy prevalence of acute malnutrition was higher in Idlib compared to Aleppo among children aged 6-59 months (4 percent vs. 1 percent) and PLW (20 percent vs. 2 percent) and was generally higher among displaced persons for both children aged 6-59 months and PLW.

 **Protection:** The protection environment in northwest Syria continues to be severely affected by the compounding impacts of COVID-19 mitigation measures, the economic downturn, prolonged and large-scale displacement, as well as the impacts of the ongoing armed conflict. Partners are engaged in addressing the **increased adoption of negative and harmful coping strategies** due to the current context. These include child marriage and child labour, including its worst forms, as well as increased exposure to domestic violence such as marital rape, sexual harassment and exploitation, including from community members and relatives. Some women are reported to leave their abusive relationships, but lack safe shelter elsewhere. GBV partners continue to report that male adolescents are exposed to sexual abuse, especially in orphanages, and note an increase in rates of sexual harassment and abuse against children, especially by other children. Isolated but increasing reports of suicides, including of young women, are received. Dynamics around housing, land, and property rights remain of concern, with local authorities in Idlib reportedly increasingly expropriating property from absent landowners. **Forced evictions** of displaced persons from residential, commercial and public properties are being increasingly reported, suggesting a concerning upward trend. **COVID-19 and widespread fears of infection** are causing social pressure and distress, especially for women who are considered by their community to be primarily responsible for the health and wellbeing of their families. **Social stigma** associated with COVID-19, alongside pressure to maintain income and livelihood, is reportedly inducing people to hide symptoms and avoid seeking treatment or self-isolating. Continued

shelling and use of other explosive weapons during localised hostilities results in **explosive hazards**, affecting freedom of movement of civilians as well as resulting in killing and maiming, including of children.

 **Shelter and Non-Food Items:** In preparation for the imminent winter season and the impact of the harsh weather conditions on people's living conditions, the main priority is the coordination of the **winterisation response**. Shelter, Health and WASH partners are coordinating to respond to the needs of the displaced population in the context of COVID-19, to mitigate the spread of the virus during distributions, to improve the conditions of shelters and to **decongest overcrowded collective shelters**. More widely, partners continue to focus on responding to the needs of the **newly displaced population** as well as **protracted IDPs** in northwest Syria through the provision of shelter and NFI assistance.

 **Water, Sanitation and Hygiene:** **Access to safe water** is a priority; only 57 percent of water stations in northwest Syria are functioning, of which only 80 percent are disinfecting their water. WASH partners are supporting services such as water trucking, toilet desludging and removal of solid waste, providing chemical disinfectants for treated water supply, and providing operational support to water stations. Comprehensive **lifesaving WASH services** and additional support to undertake **COVID-19 infection prevention and control (IPC)** measures are prioritised, for some 1.7 million displaced people in 1,683 camps and some 2.7 million people in other communities. **Countering diseases** are a focus. Thousands more cases of water-borne diseases (WBD) were reported in September 2020 compared to the same month in previous years, with hotspots in Ar-Ra'ee and Jarablus sub-districts, while endemic diseases such as leishmaniasis remain prevalent.

 **Logistics:** A **reliable and consistent transshipment service** for delivering lifesaving cargo from Turkey into northwest Syria is a key need of organisations responding to the needs of people in the area. Given the COVID-19 outbreak, **closer coordination and timely information sharing** has become more vital to facilitate partners' decision-making and to avoid bottlenecks or duplication. The implementation of WHO guidelines is being prioritised to **mitigate COVID-19 transmission** risks at transshipment points, and to ensure the safety and health of staff.

## PREPAREDNESS & RESPONSE ACTIVITIES

 **Camp Coordination and Camp Management:** The September **update of the IDP site monitoring database** shows that of the 1,160 active IDP sites monitored, 56 percent have been provided with COVID-19 awareness activities and around half are partially applying COVID-19 physical distancing measures. Personal protective equipment (PPE) was unavailable in 88 percent of sites, and 76 percent were not regularly sanitised. Partners **tracked 44,083 recent displacements in September**, noting that some may have been exposed to multiple displacements and that reasons for moving vary. The top three shelter types for new arrivals in September were reported to be solid/finished houses (43 percent); managed camps (20 percent), and solid/finished apartments (18 percent). Partners continued to **monitor and report on incidents in IDP sites**; as of 10 September, 84 incidents affecting 121 camps were reported in 2020, including 60 fires, 11 floods, four wind incidents and four incidents of bombardment. Given the high number of fire incidents reported, partners convened a second meeting on coordinating the response to fire incidents in IDP sites in September. In coordination with Health partners, CCCM partners continue to facilitate the application of **COVID-19 prevention and response measures in camps and camp-like settings**, including developing referral mechanisms to link triage facilities in planned camps and reception centres to referral networks and nearby health facilities.

**44K**

*Displacements in September*

 **Early Recovery:** From January to August, **6,288 people** were employed through the creation of **short-term work opportunities**, in light rehabilitation works of social infrastructure, basic infrastructure and roads, and cash-for-work (CFW) activities such as mask manufacturing. Some **500,000 masks** were produced and distributed through CFW schemes. Entrepreneurial activities supported **782 entrepreneurs**, mostly women and youth, to start a business or service, mostly in Atareb and Ariha. To enhance access to livelihoods opportunities, mobility, and prevent floods, ERL partners are working to **restore/rehabilitate key access roads** to markets and camps in displaced and host communities, in densely populated areas and in areas of return. **Twenty kilometres of roads have been rehabilitated**; rehabilitation of 9 kilometres of agricultural roads in Maaret Tamsrin and Aghtrin is still ongoing. Of some 70 kilometres of connecting roads requiring restoration, there remains a gap of approximately 50 kilometres to be covered.

**6,288**

*employed through CFW activities*

**Education:** At least **416,953 school-age displaced children were reached with education assistance** in the last six months, comprising services including psychosocial support (PSS), psychological first aid (PFA), formal and non-formal education activities, home schooling, student bags and textbooks. Four thousand out-of-school children were provided with life skills, recreation and PSS education activities, while 11,682 children were supported with PSS and PFA. 52,398 children were supported with formal and informal education, including children with disabilities, and 4,133 children were provided home-based education support via a self-learning programme. Partners provided 76,264 children with recreational kits, school bags, student kits and textbooks, and supported 4,150 children for their mid-year exams. **Teachers and education personnel** were provided training (508) and incentives (200), while 227 **families were provided tents** to support their relocation away from schools where they were sheltering. Given the **COVID-19 pandemic**, at least 209,882 children and teachers benefited from distance learning; awareness raising and information, education and communication (IEC) materials were provided to 171,494 students and teachers; and 25,529 students, teachers and parents were sensitised on COVID-19 prevention. At least 21,718 children in schools and temporary learning spaces benefited from the sterilisation of education facilities.

**417K**  
*children reached*

**Food Security and Livelihoods:** In September, partners provided **food assistance** to 67,938 newly displaced people and returnees. This included 7,177 emergency food baskets, 1,540 ready-to-eat (RTE) rations, 4,007 cooked meals and US\$263,650 in multi-purpose cash grants (MPCG). In-kind food assistance for over 1.3 million people continued, and at least 1.5 months' prepositioned food supply was maintained. Three **new area coordination groups** have been established to facilitate coordination between partners: for the Idleb area, the Afrin area, and the A'zaz to Jarablus area. A **Bread and Bakery dashboard** was released, containing figures for August 2020 and plans for bread and bakery activities until the end of 2020. In August, partners' bread programmes widened distribution coverage to reach 1.3 million people; plans are in place to reach 1.5 million, 1.3 million and 900,000 people in October, November and December respectively. As of September, partners vaccinated 18,466 cattle against LSD, benefitting 9,160 households in northwest Syria. The LSD vaccination campaign is ongoing to cover all 21,500 cattle in accessible areas of the northwest. Under the northwest Syria PPR vaccination campaign, 869,751 sheep and goats were vaccinated against PPR, protecting the livestock assets of 21,271 households, including displaced persons.

**68K**  
*new IDPs received food assistance*

**Health:** Updates of the COVID-19 situation in northwest Syria are disseminated daily, and a **COVID-19 monitoring dashboard** is available to provide the latest information on the epidemiological situation, COVID-19 community-based treatment centres (CCTC) and hospitals, points of entry, referrals, and logistics. Coordination is ongoing for a comprehensive multi-sector approach to containing the spread of the virus, with a current focus on expanding quarantine options. Two new testing laboratories have become operational, for a total of **three testing laboratories** and four PCR machines in the northwest. These currently process an average of over 500 tests per day. **Nineteen CCTCs** are functional with a capacity of 715 beds, as well as **eight hospitals** with a capacity of 645 beds, 114 intensive care unit (ICU) beds and 86 ventilators. To date, Health partners have supported distribution of 11,500 testing kits, 11,500 Viral Transport Media (VTM), 120 IPC kits, 7,810 goggles and protective equipment, 11,638 gloves, 111,128 facemasks, 308,952 surgical masks, 548,859 examination gloves and 7,056 face shields. **Mental health support** for first-line responders has been made available through helplines in northwest Syria and southern Turkey, and media engagement is taking place to further encourage the referral of tentative cases to CCTCs.

**>500**  
*COVID-19 tests per day*

**Nutrition:** **Lifesaving nutrition services** are provided through 120 Rapid Response Teams (RRTs) and mobile teams, 10 stabilisation centres, 165 Outpatient Therapeutic Programmes (OTP) and 23 Targeted Supplementary Feeding Programmes (TSFP) by 25 Nutrition partners. Since the start of 2020, some 1.5 million children aged 6-59 months and pregnant and lactating women (PLW) have been reached with lifesaving nutrition services in 513 communities and 40 sub-districts of northwest Syria. This represents nearly 66 percent of the population in need, and a 10 percent increase in coverage compared to the last situation update. Nutrition partners are implementing **COVID-19 adaptations** including integration of IPC measures for mitigation of COVID-19 transmissions in all platforms, enhanced communication on infant and young child feeding in emergencies (IYCF-E) in the context of COVID-19, simplified protocol for treatment of acute malnutrition, surveillance and supply prepositioning. Nutrition's COVID-19 Task Force meetings are conducted fortnightly to review emerging global evidences and recommendations, and discuss northwest Syria experiences and questions in relation to operational guidance. Nutrition partners are working closely with the Sexual and Reproductive Health (SRH) working group to strengthen the **complementarity of Health and Nutrition support for PLW**.

**1.5M**  
*Women and children reached*



**Protection:** From 28 September to 11 October, seven Protection partners provided 15,486 **emergency protection interventions** in 30 communities within seven sub-districts in northwest Syria, reaching 6,984 newly displaced people. The main emergency services were psychological first aid and psychosocial support, information sharing about services and assistance, dignity kits distribution and explosive hazard education. Partners also referred individuals to other basic services, notably to health centres and shelter assistance, and provided individual protection assistance (primarily cash grants for protection outcomes). In September and in the context of regular programming despite limitations imposed by the COVID-19 outbreak, 5,468 individuals accessed individual specialised protection interventions such as case management. Throughout the same month 85,127 individuals participated in group-based support sessions aiming to prevent violations, contribute to wellbeing, and identify individuals in need of specialized support. Protection partners are conducting a series of focus group discussions with men and women to better understand the **dynamics around COVID-19-related stigma**, health-seeking behaviour, and barriers to voluntary entrance to quarantine and isolation facilities, to inform community engagement, information provision and facility design. This year, 275,000 dignity kits have been distributed to date, providing entry points to provision of other crucial protection services. **Gender-Based Violence (GBV)** partners are rolling out the GBV Information Management System (GBVIMS+) in northwest Syria to enhance the quality of GBV case management and incident analysis, and are working to strengthen capacity to provide specialised services to child survivors. A joint taskforce has also been launched by GBV partners and the Cash Working Group to improve the provision of cash and voucher assistance to GBV survivors. **Child Protection** partners reached 933 individuals with emergency interventions (433 girls, 473 boys, 17 women). Of the total, 326 children were reached with PSS and seven with PFA; one girl was referred to specialised services. 149 PSS kits were distributed to 69 girls and 80 boys, and 450 caregivers and children were reached with child protection awareness raising activities. Child Protection case management, including family tracing, continues to be provided with COVID-19 precautions in place. **Housing, Land, and Property** focused partners are developing an eviction tracking system as well as guidelines to mitigate harm during evictions, including to inform advocacy with duty bearers.

**5.5K***Individual specialised protection services in September*

**Shelter and Non-Food Items:** In August, over 118,000 individuals received **NFI assistance** in the form of NFI kits, kitchen sets, mattresses, jerry cans, carpets, solar lamps, tarpaulin and blankets. **Shelter needs** for 101,016 people were addressed with activities such as provision of emergency shelter, infrastructure rehabilitation, shelter rehabilitation, transitional shelters and seasonal shelter assistance. As part of **winterisation efforts**, the [Guidance Note on Winterisation for northwest Syria](#) was updated and shared. Thirty-two partners have shared their winterisation plans, and a meeting was held to coordinate targets and activities at the community level. Some US\$29.7 million has been secured to support winterisation activities for some 1 million people, leaving a gap of nearly US\$10 million for 251,707 people. Due to frequent fire incidents reported in IDP sites, partners developed an [awareness raising brochure](#) focusing mainly on the safe usage of fuel and stoves during winter, targeting individuals and households. This brochure can be affixed as a sticker on NFI kits or displayed as posters, to comply with COVID-19 mitigation measures. As part of the **COVID-19 response**, 354,090 individuals have been provided with additional soap with their NFI distributions since March. In October, partners plan to reach some 9,735 people with additional soap.

**\$10M***Needed for winterisation*

**Water, Sanitation and Hygiene:** Since the start of 2020, partners have reached 3.16 million with safer water through water trucking and support to piped water systems, while over 1.6 million people have been supported with essential hygiene items and 1.8 million people participated in hygiene promotion activities. A further 1.3 million people were reached with either latrine construction or support to sewage services and 2.7 million with solid waste services. WASH partners continue to **advocate for funding to support the connection of camps to existing piped water and sewage systems**, which would dramatically improve the quantity and quality of lifesaving water and sanitation services while substantially reducing costs. Partners are also **exploring alternative electricity providers** to potentially reduce partners' expenditure by more than 25 percent. 47 health facilities supporting 418,000 people and 196 schools with 122,000 students were reached with water supply, sanitation, solid waste services and hygiene promotion activities. In response to COVID-19, 89 percent of WASH partners have changed their response, 80 percent have increase the amount of water supplied, 83 percent have adapted hygiene promotion activities, 59 percent have increased the amount of soap distributed, and 15 percent increased the amount of laundry detergent distributed. WASH and FSL partners are collaborating for the distribution of soap bars with 720,000 food parcels from April to October, accompanied by RCCE stickers. Around 1 million soap bars are also being purchased over the next six months to be delivered to the COVID-19 Awareness Team (CAT).

**3.16M***Reached with safe water*

**🚚 Logistics:** In September, the transshipment of **845 Syrian trucks** through the Bab Al-Hawa border crossing took place, facilitating the delivery of UN humanitarian assistance comprising Food Security, Shelter and Health sector items. **Physical road access data** is being collected to facilitate road rehabilitation efforts, and partners have published a [map displaying travel times and road conditions from Bab Al-Hawa across northwest Syria](#). Partners continue to monitor **customs regulations**, with particular attention to COVID-19-related items, and share lists of prohibited and restricted items for import when changes occur. An update of customs procedure recommendations has also been shared with partners. **COVID-19 mitigation** measures in line with WHO guidelines and local health authorities remain in place at the transshipment hubs.

**845***Trucks brought humanitarian relief*

## OPERATIONAL CHALLENGES

**🏠 Camp Coordination and Camp Management:** The remote management context introduces additional challenges in CCCM partners' efforts to clean and verify data received from different sources. Although IDP sites are usually a last resort option, there are currently 1,160 IDP sites listed in the CCCM database, the majority of which are self-settled (1,073 sites). CCCM partners continue to monitor these sites to identify gaps and facilitate the coordination of multi-sectoral services. Continuous displacements have led to a decrease in areas available to accommodate newly displaced populations; the Land Task Force is thus focused on identifying and verifying available land for camp establishment or expansion.

**🔨 Early Recovery:** The highest priority needs for displaced people living in northwest Syria are livelihood opportunities (63 percent), basic services (59 percent) and food (56 percent). This is mirrored by the highest priority needs of returnees. The risk of further reduction of the purchasing power of vulnerable people risks exacerbating this, resulting in urgent need to scale up access to livelihoods opportunities for people in northwest Syria. Given the increase in traffic from Bab Al-Hawa under UNSCR 2522, the roads connecting Bab Al-Hawa to northern Aleppo require urgent rehabilitation to ensure continued access of humanitarian supplies through winter and beyond. A gap of some 50 kilometres remains to be rehabilitated, of the some 70 kilometres of this stretch. Limited funding is a further challenge for ERL partners working to restore/rehabilitate key access roads to markets and to/from camps, to enhance access to livelihoods opportunities, mobility and prevent floods.

**📖 Education:** A lack of funds inhibits Education partners from providing adequate education support, particularly in conjunction with the security situation in which children are often on the move, education services need to be relocated and educational materials replaced. Students and teachers lack basic education supplies, school furniture and WASH facilities are insufficient, and many learning facilities have no basic safety equipment or systems despite ongoing safety and security concerns. Alongside this, too few students and education personnel are receiving the psychosocial support, knowledge and skills needed for a safe and productive learning environment. Use of schools as shelters is also impacting children's access to education, while COVID-19 further complicates education provision. Many children have no access to the internet or smartphones, inhibiting distance learning, while suspension of schools and the reopening of some schools amidst the rising spread of cases impacts the quality of education.

**🌾 Food Security and Livelihoods:** A gap of some 237,000 people remain in need of urgent food assistance in northwest Syria. Of 43 sub-districts assessed, more than half had food assistance coverage below 25 percent. Challenges have also been reported in the marketing of vegetables, a solution to which may be to enhance food processing that relies on vegetable production. Additionally, there is a need to support livelihood and income-generating activities, and to enhance complementarity between food assistance and livelihood activities.

**🏥 Health:** Attacks on health workers and health facilities remains a serious concern. In terms of operations, issues of service duplication inhibit efficiencies, particularly given the already limited human resources available to the health sector in northwest Syria. Increasing demands on the health system are a further challenge, such as due to the doubling of the caseload of visceral leishmaniasis compared to the past two years. With regards to COVID-19, continued movement of people contributes to difficulties in containing the spread of COVID-19, and healthcare workers continue to be at higher risk of contamination. Challenges also remain in increasing admissions to CCTCs by encouraging community acceptance of isolating in the event of tentative COVID-19 cases.



**Nutrition:** Proportions remain low for people in need reached with services for treatment of moderate acute malnutrition (MAM) (42 percent), prevention of acute and chronic malnutrition (56 percent), and micronutrient supplementation (62 percent). The low achievements especially for treatment of MAM are indicative of limited funding, access constraints and supply shortages, particularly of ready-to-use supplementary food (RUSF). The COVID-19 outbreak and economic downturn may potentially cause further deterioration of the nutrition situation during the second half of 2020, due to dysfunctional markets, limited livelihoods opportunities, inflation, low purchasing power, increasing food insecurity, and disruption of access to health and WASH services. A further challenge is the limited implementation of a multi-sectoral approach, which is crucial for addressing the underlying drivers of acute and chronic malnutrition.



**Protection:** A multi-sectoral and well-coordinated response to forced evictions is required, including by provision of support as well as advocacy with duty bearers. Social stigma related to COVID-19 poses a significant risk to public health due to adverse effects of reluctance to seek health services. Structured engagement with communities, including to seek feedback, is required to strengthen the response. Funding gaps remain a pressing issue; grants funding the Protection Emergency Focal Points network, crucial in provision of an immediate and streamlined emergency protection response to new displacement, expire by the end of October. Gaps in funding result in a significant loss of emergency response capacity. Furthermore, current coverage of Women and Girls' Safe Spaces (WGSS) is insufficient and GBV partners struggle to sustain these spaces due to lack of funds. Several GBV projects and WGSS in northwest Syria have closed due to insufficient funding. Critical GBV services, including WGSS, should be considered essential in any new or updated preparedness and response plans related to COVID-19. In the context of NW Syria where many essential services (e.g. safe shelter, legal) are not available to survivors, cash could positively contribute to achieving a protection outcome for survivors when safety measures in place. Therefore, sustained and multi-purpose cash assistance benefitting GBV survivors and other women and girls at risk should be funded and supported.



**Shelter and Non-Food Items:** Funding gaps exist for meeting winterisation plans for the forthcoming winter season, as well as in infrastructure funding, especially for new sites that established by IDPs themselves. Improving infrastructure in camps and IDPs sites is essential to avoid future flooding. There is also a need to replace worn-out emergency shelters with transitional shelters that include water and sanitation, especially for people in protracted displacement, in order to improve living conditions and access to adequate, dignified shelter solutions. This is particularly important in the context of the COVID-19 pandemic, with access to improved infrastructure and hygiene facilities helping to mitigate transmissions.



**Water, Sanitation and Hygiene:** Current gap analysis indicates that across 27 sub-districts, 1.3 million people lack some form of WASH service, including water trucking (156,278 people), connection to piped water networks (1,041,343 people), latrine construction and sewage network rehabilitation or construction (179,393 people), solid waste removal services (454,641 people), and hygiene kit distributions (62,787 people). Gaps are compounded by short-term and unsustainable funding, which disrupts the provision of regular WASH activities creating new WASH gaps on a weekly basis. Furthermore, observations from sites assessed by WASH field facilitators indicate that 33 percent of locations receive less than 30 litres of safe water per day and 58 per cent of locations have insufficient chlorine levels in drinking water. Average latrines coverage is one for every 103 persons, 41 percent of locations have a coverage of more than 50 persons per latrine, and in 19 percent of locations latrines are not segregated by sex. In 69 percent of locations, affected populations had no access to hygiene kits in the past three months. Partners continue to face additional access challenges in some areas with local water departments refusing to give permission for WASH infrastructure work on private land.

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