

HIGHLIGHTS

- Medical facilities, personnel and wounded and sick must be afforded special protection
- Calls for access to civilians trapped in contested areas
- Momentum builds towards a political solution to the conflict
- Crisis undermines Syria's progress towards MDGs
- UN response plans remain underfunded

FIGURES

Population	21.4 m
# of people in need	6.8 m
# of IDPs	4.25 m
# of Syrian refugees in neighboring countries & North Africa	2.1 m
Population	21.4 m

FUNDING

\$1.4 billion

requested for humanitarian assistance inside Syria

48% funded

\$3 billion

requested for the Regional Refugee Response Plan

43% funded



Photo: UNICEF/BHalabi

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Call for respect and protection of medical facilities and personnel

The health situation continues to deteriorate across Syria

Across Syria, the health situation continues to deteriorate with shortages of medicines, the deliberate targeting of medical workers and health facilities by all parties, restrictions on the delivery of medical supplies to affected areas, and difficulties in accessing health care due to insecurity.

Of particular concern is the destruction of hospitals, assaults on medical professionals, and clinics, the impact of the conflict on pharmaceutical factories, as well as the challenge to import medicines to meet chronic medical needs, given economic sanctions. Medicines needed include those for treatment of cancer, vaccines and medicines for chronic conditions. Additional ambulances are also needed. Some 60 per cent of public hospitals, 34 per cent of public health centres and 92 per cent of public ambulances have been affected. Around 212 health care staff have been killed, injured or kidnapped. In some locations, including Homs, 50 per cent of doctors have left the country. In and around Aleppo city, only 36 doctors are practicing compared to 5,000 before the crisis. Around 70 per cent of pharmaceutical plants in the country have been impacted.

There is also an increased risk of all infectious disease outbreaks due to disruptions in vaccination programmes, overcrowding in public shelters, decreasing availability of support systems and damage to water and sanitation infrastructure increasing the risk of waterborne disease. In addition, an increase in number of human Brucellosis cases, judged to be caused by a drop in rate of vaccination of animals that can transmit it to humans, is expected to continue. According to the Ministry of Agriculture, animal vaccination against brucellosis dropped from 99 percent in 2010 to 36 percent in 2012.

In the first seven months of 2013, the UN and non-governmental health agencies in Syria provided emergency medical supplies to treat more than two million people, however additional capacity is necessary to meet the rapidly rising scale and scope of need for basic medical services, as the number of people requiring medical assistance due to the intensification of the conflict is rising exponentially.

Parties to the conflict are failing to meet their obligations, as the breakdown of medical services disproportionately affects the most vulnerable

On 13 September 2013, the Commission of Inquiry on Syria presented a paper which highlighted the great risk deterioration of the conflict has placed on the rights of the most vulnerable. The trend indicates a disproportionate risk for people in contested areas as the number of public hospitals which have closed- 26 out of 32- are in the four Governorates facing the most fighting- namely Aleppo, Damascus, Deir-ez-Zor and Homs. Further, the breakdown of medical services disproportionately affects vulnerable segments of the population, such as children under the age of five, nursing mothers, the

Vulnerabilities are becoming entrenched in those areas where insecurity or restrictions to access are stalling deliveries of assistance for protracted periods of time.

disabled and the elderly. In the context of increasing challenges to access to healthcare for Syrians, women are particularly vulnerable. UNFPA's partners and communities report that women do not have adequate information regarding when and where they can access reproductive health services, including emergency obstetric care (EmOC). Access and security challenges continue to constrain implementation of programmes to support women's access to reproductive health in Syria.

Parties to the conflict in Syria are not meeting their obligations under international humanitarian law. Humanitarian actors report limited or no access to populations for several months in areas that have been subject to sieges, as well as cuts in utilities, and chemical weapons use. Under international humanitarian law, the parties to the conflict must allow and facilitate rapid and unimpeded passage of humanitarian relief for civilians in need, as well as respect the right of all persons who are wounded or sick to receive medical attention with the least possible delay.

Civilians remain trapped in hard to reach areas

Vulnerabilities are becoming entrenched in those areas where insecurity or restrictions to access by various parties to the conflict are stalling deliveries of assistance for protracted periods of time.

An estimated more than half a million people are in hard-to-access areas in Rural Damascus. In Al-Rhaiba, approximately, 40,000 people are completely sealed off, with gaps access to food, NFIs and hygiene materials. Around 10,000 people or 2,000 families remain trapped in the Old City of Homs while an estimated 300,000 people in northern parts of Rural Homs and around 35,000 people in Nubul and Zahra (North of Aleppo) have lived in besieged areas for several months. Although currently unconfirmed, reports of snipers targeting people moving through the Al-Mzaara crossing, the only access point for an estimated 400,000 civilians and internally displaced persons living in Al Wa'er neighborhood in Homs, will inhibit people's freedom to move and seek assistance due to fear.

For most of 2013, UNICEF and its partners have faced severe difficulties in reaching hundreds of thousands of children in Aleppo, rural areas of Dar'a, Deir-ez-Zor, major parts of Homs and Rural Damascus. Medical supplies, including vaccines, have been held up at checkpoints, and vital work on repairing water pipelines has been delayed.

WFP reports significant challenges to deliver food assistance to Al-Hassakeh governorate and that no food rations for September have been dispatched to Aleppo, where the Government of Syria and armed groups are engaged in increasingly fierce fighting over key transit routes, such as the International and Khanaser roads.

Over the past two weeks, humanitarian leaders have called on all parties to the conflict to agree on a pause in hostilities to allow humanitarian agencies immediate and unhindered access to evacuate the wounded and provide life-saving treatment and supplies in areas where fighting is ongoing.

NGOs warn not to forget humanitarian crisis as winter approaches

As UN General Assembly begins and side meetings focus on Syria political solutions, aid groups on 23 September urge member states to prioritize humanitarian aid for Syrians and host communities. The 14 agencies, all members of the Syria International NGO Forum (SIRF), urge heads of state meeting in New York for the United Nations General Assembly to urgently increase financial support to meet immediate and long-term needs of Syrians.

On 18 September, the President of the Syrian Arab Red Crescent (SARC), Dr. Abdul Rahman Attar, publicly urged the world not to forget the humanitarian plight of the millions of people affected by the crisis. "Winter is coming and the needs are extremely important for these people," said Dr. Attar. "Can you imagine in the winter time, 4 or 5 million people who have had their houses destroyed, who have no place to live, living under a tree or in tents?" he added, citing mattresses, blankets, kitchen kits and hygiene kits as priority needs.

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Development progress cannot be achieved nor sustained amid armed conflict, violence, insecurity and injustice.

Crisis undermines progress towards achieving Millennium Development Goals

In advance of the UN General Assembly General Debate on the 'Post-2015 Development Agenda', UN Secretary-General Ban Ki-moon highlighted the focus the international community and UN member states must have to support people in countries affected by conflict, stating that development progress cannot be achieved nor sustained amid armed conflict, violence, insecurity and injustice. The Syrian Center for Policy Research's (SCPR) March 2013 quarterly report "The Syrian Catastrophe", produced in cooperation with UNRWA, estimates that Syria has moved backwards by 35 years in terms of the human development index, particularly in the income, education and health sectors.

The impacts of the conflict and crisis on the population of Syria, a middle-income country which had taken strides forward towards achieving the MDGs, according to the Government of Syria's 2010 report, are devastating as Syrians trying to cope with the loss of primary wage-earners, loss of their homes, loss of livelihoods and inconsistent access to education and basic services, including food, water and medical services.

Limited access to basic food items creates additional needs

"The Syrian Catastrophe" report estimates that more than half of Syria's population is poor, with 6.7 million Syrians falling into poverty due to the crisis, and 3.6 million in extreme poverty. WFP reports that across the country, high food prices, increasing inflation and the steady devaluation of the Syrian Pound is eroding families' purchasing power and limiting their access to basic food items creating additional needs. Across the country, prices of commodities such as rice, lentils, oil and tea have registered average increases of 25 percent during the past month. UNDP's assessment in Hama Governorate illustrates that the ongoing crisis has exacerbated pre-existing levels of poverty and unemployment particularly in rural areas. The majority of people in Al-Ghab area have been impacted by crisis and displacement and are experiencing significant challenges relating to decrease in income, rising prices, unemployment, lower purchasing power, erosion of assets and rise in number of families who have lost their primary income-earner, among other significant challenges.

Reports from paediatricians from Damascus Children's Hospital and SARC clinics confirm a noticeable increase in the rates of moderate and acute malnutrition.

Almost two million Syrian children have dropped out of school

Syria has over 20,000 schools and, in 2010, its school enrolment, attendance and completion rates compared favourably with those of the region. Now, according to UNICEF, the conflict in Syria has left almost 4,000 schools – approximately, one in five – damaged, destroyed or sheltering internally displaced families. Since the 2012 school year, almost two million Syrian children between 6-15 years of age have dropped out of school due to displacement and violence. The pace of displacement and temporary use of schools by parties to the conflict are likely to bring further pressure to bear on educational infrastructure. Globally, fifty percent of the primary school age children who are out of school live in conflict affected countries.

Increased disruption of access to basic services, including water and sanitation, raising the risk waterborne diseases

Increasingly, UN agencies and partners report disrupted access to basic services, including water and sanitation and health services, in contested areas in Syria, and increased risk to WASH-related diseases.

Due to insecurity and logistics challenges, particularly in Al Wa'er area of Homs Governorate, repairs to the damaged water trans-pipeline have experienced delays over the past month, leaving approximately 1,300,000 people in Hama and Homs Governorate without water unless purchased via the private sector or provided by humanitarian actors. Partners in Al-Hassakeh have reported that water through the pipe network is only available five hours per week and there are early reports of diarrhea cases in two towns.

The UN re-established a Hub in Homs, enabling close proximity to communities in need and local authorities to assess the gaps and facilitate operational response.

In the Hessian area, which hosts approximately 2,000 families displaced from Al-Qusair, there are reports of an increase of waterborne diseases.

International Medical Corp's (IMC) recent baseline assessment of hygiene practices in IDP shelters in Damascus found that, due to Syria's lower communicable disease and disease outbreak incidence pre-crisis, people's hygiene knowledge and practices do not always take into account the new risks and threats of disease posed by the crisis. For example, pre-crisis, people typically drank water directly from the taps as municipal water sources were expected to be adequately purified and therefore safe. In their current locations, such as in IDP shelters, water sources are not the same. Further, the high level of knowledge of certain hygiene practices, such as hand-washing, is not connected to disease transmission pathways, particularly for water-borne diseases.

Overview of the UN-Coordinated Humanitarian Response

UN Hubs enable strengthened humanitarian response

On 15 September, the UN Country Team moved to re-establish the UN Hub in Homs to enable close proximity to communities in need and communications with local authorities necessary to assess the gaps and facilitate operational response.

The UN team conducted a mission to Al Moukharam area, in rural Homs, immediately following reports of fighting and displacement. UNICEF assessed displaced children as in urgent need of food and winter clothes for the upcoming winter season. WFP delivered family food rations sufficient for 10,000 people in the immediate aftermath of the incident and, with SARC, evaluated the need for family food rations for an additional 10,000 people and 2,800 bags of wheat flour which was delivered on 18 September. The Emergency Telecommunications Cluster joined an inter-agency mission to re-establish operations in Homs and consolidated the IT needs. Equipment will be sent to the Hub in the coming days.

By leveraging the quicker administrative procedures in Tartous, augmented storage space in nearby Safita and closer physical proximity at a local level, UN and partners aim to increase the use of the UN Hub in Tartous to stage joint humanitarian convoys and strengthen further the capacity to deliver humanitarian assistance to locations in Northern and Central Syria.

The Logistics Cluster has registered additional transport companies in Syria to enable scaled up capacity for joint humanitarian convoys.

A complex joint humanitarian convoy, facilitated by the Logistics Cluster and UNOCHA, to deliver assistance to Idleb successfully dispatched all the supplies from Lattakia and Tartous, between 18-23 September, to meet emergency food, water, sanitation, hygiene, education and recreation needs provided by WFP, UNICEF and IOM. The following supplies were distributed: food rations for 2,500 families; wheat flour for 2,500 families; baby hygiene kits for 1,000 families; WASH powder for 1,000 families; water kits for 2,000 families; educational kits for 38,120 students; jerry cans for 2,500 families; and hygiene and cleaning kits for 5,000 families.

WHO, agencies and partners deliver medical services amidst rising needs

WHO, UNICEF and UNHCR provided medical equipment, supplies and medicines as the needs for health support spiral. WHO provided ICU beds and ventilators, as well as medicines and medical supplies for more than 14,850 beneficiaries, to establish a new Burns Unit at Al-Mouwassat Hospital in Damascus. UNICEF supported the installation of one cold room for vaccine storage at Al-Bassel Medical Compound in Hama. UNHCR supported the establishment of a small centre in Lattakia to receive displaced persons with disabilities for assessment and measurements. Health authorities and Lattakia and Damascus were provided medicines and medical supplies to treat respectively more than 25,000 and 230,595 direct beneficiaries,

Through 51 mobile medical teams in 14 Governorates and fixed centers in Damascus, Rural Damascus and Quneitra, UNICEF and partners were able to reach 28,277

displaced children with medical check-ups over the past two weeks. So far this year, 233,344 children were reached with medical check-ups.

UNFPA expands access to reproductive health services programme

In cooperation with the Ministry of Health, UNFPA expanded its reproductive health (RH) voucher programme, enabling women's free access to health services to five hospitals, in As-Sweida, Homs, Rural Damascus and Tartous, to meet the increased reproductive health and EmOC needs. As a result of the wider distribution of RH vouchers and referrals to maternity hospitals, 800 women received EmOC including normal and C-section delivery. Further, UNFPA and the Ministry of Health organized training for 25 midwives to enable improved, timely delivery of basic emergency obstetric care at the community level in As-Sweida, Deir-ez-Zor, Hama and Homs.

Humanitarian actors mobilize capacity to respond rapidly to increased risk of malnutrition

Amid reports of increased incidence of malnutrition, UNICEF, in collaboration with the WHO and the Primary Healthcare Unit at Ministry of Health, immediately organized a refresher training on the treatment of Severe Acute Malnutrition and the Management of Moderate Acute Malnutrition for 60 medical doctors from Aleppo, Deir-ez-Zor, Idlib and Rif Damascus. Therapeutic nutrition supplies, such as F75, F100, Plumpy Nut, Micronutrient powders, and Plumpy Doz, were mobilized to be dispatched to the corresponding hospitals. Further, UNICEF and WFP have agreed to procure super cereal plus as a complementary foodstuff in food baskets for families with children 6-23 months, the most vulnerable age group.

According to the data from the Ministry of Health, 4,927 boxes of Plumpy Doz have provided supplementary feeding towards the prevention of Moderate Acute Malnutrition to 49,383 children under-five in Aleppo, As-Sweida, Damascus, Dar'a, Deir-ez-Zor, Hama, Homs, Idlib, Lattakia, Quneitra, Rif Damascus and Tartous, since the beginning of 2013.

One million children in Syria targeted with 'Back to Learning' Campaign

As the new school year in Syria began on 15 September, many children still face extraordinary challenges to continue their education. UNICEF, in cooperation with the Ministry of Education and other partners, launched a 'Back to Learning' campaign to boost efforts to get children in Syria back to school. The campaign aims to reach 1 million conflict-affected primary school-aged children across the 14 Governorates. The campaign is complementing advocacy messages on radio, print and broadcast media, billboards, posters, and flyers with delivery of school bags and stationery supplies, such as pens and notebooks. Approximately half of these supplies have already been dispatched to areas with the most vulnerable children, including in Ar-Raqqa, Damascus, Deir-ez-Zor, Al-Hassakeh, Homs, Rural Damascus and Tartous for distribution in schools.

During the reporting period, UNICEF provided school bags for 24,240 and 58,780 children in Tartous and Rural Damascus, respectively; teaching-learning kits for 12,360, recreation kits for 21,000, and Early Childhood Education kits for 2,300 pre-school children in Rural Damascus.

As coordinators of the Education Sector,



UNICEF/BHalabi. UNICEF Syria Representative, Youssef Abdel-Jelil, meets children at a primary school in Rural Damascus as they receive school bags containing stationery supplies such as pens and notebooks. "It is vital for children's well-being, as well as for the future of the society, that they are supported in their return to learning."

UNICEF, WHO and Ministry of Health organized refresher training on the treatment of Severe Acute Malnutrition and the Management of Moderate Acute Malnutrition for 60 medical doctors from Aleppo, Deir-ez-Zor, Idlib and Rif Damascus

UNICEF and the Ministry of Education organised an Education Sector Workshop. More than 100 participants, representing 12 governorates, including from the Ministry of Education at national and sub-national levels, national and international NGOs and UN agencies, discussed strategic interventions to address the key challenges in the sector, including: shortage of classrooms; low psycho-social support capacity amongst school staff; and lack of teaching and learning materials. They agreed to develop further initiatives such as self-learning and an accelerated learning curriculum for out-of-school children.

WFP and partners enable timely food assistance via flexible, rapid response

WFP's ongoing September cycle is targeting 3 million people across all fourteen governorates. As of the 22 September, family food rations sufficient for 1.44 million people have been dispatched across Syria. The delayed arrival of some purchases and limited availability of food in local markets forced WFP to reduce the ration of some commodities in its food basket during September.

In response to the recent wave of displacements that have concerned particularly Al-Hassakeh and rural Idleb, WFP and partners have organized ad hoc responses to provide timely assistance, including via joint humanitarian convoys.

In Jaramana, Mary, a 59-year-old woman, who recently abandoned her home and fled the escalating insecurity in her home town of Ma'aloula with over 300 other families in search of safety, told her story while waiting at a Syrian Arab Red Crescent (SARC) distribution point. "Me and my three sisters moved to Jaramana on the outskirts of Damascus because we had no choice; we lost everything and our house was burned down like all other houses in the neighborhood," she recounts.

As families are forced to flee with few belongings and little money, they are forced to crowd in small rented apartments and schools or squat in unused spaces. Many displaced families have limited access to health services and often face financial difficulties when attempting to purchase food, clothing and other basic necessities. "Food prices are high, everything is expensive, especially oil," she explains. "Without assistance, we would struggle to survive."

UNICEF and partners deliver WASH assistance as access to water deteriorates

Repairs to the pipeline which serves as the primary source for drinking water for 1,300,000 people in Hama and Homs Governorates continue to be delayed due to insecurity. WASH partners, including SARC, ICRC and UNICEF, Premiere Urgence (PU) and IMC have provided water trucking, tanks, jerry cans, purification supplies, pipes, generators and pumps to activate old wells and boreholes and connect to the drinking water networks. The total amount of water being provided is estimated at 1110 m3/day.

UNICEF has provided Water Authorities in Damascus and Tartous with water purification supplies enough to supply safe drinking water to 5 million people for one month and 1 million people (80 per cent women and children) for three months respectively. At Aleppo University campus, 12,000 people are able to access safe water through installation of Oxfam tanks and water trucking; approximately 10,000 people have access to safe sanitation through rehabilitation of the facilities; and 8,000 people benefitted from hygiene promotion activities. Premiere Urgence (PU) distributed 5,137 hygiene kits, benefitting about 25,685 beneficiaries in Homs, Tartous and Hama and continues provision of water in 10 centres in Rural Damascus hosting 5,390 displaced persons. Three cleaning campaigns for environmental sanitation, benefitting over 40,000 people, were implemented in the neighbourhoods of Al-Kosur, Deir Ateeq, and Villat.

IMC will coordinate with WASH sector partners, including the Syrian Arab Red Crescent (SARC) to develop hygiene promotion messages based on recent assessment in Damascus shelters.

Humanitarian agencies scale up child protection response

UNHCR and International Medical Corps (IMC) signed a new agreement to launch capacity building initiatives with local NGOs on psychosocial support for children to scale up child protection response

In response to the prevailing psychosocial concerns of displaced children, humanitarian agencies scaled up child protection response, including capacity-building initiatives and targeting hard-to-access areas.

UNHCR and International Medical Corps (IMC) signed a new agreement to launch capacity building initiatives with local NGOs, on psychosocial support for children, and to establish a child and community friendly centre for children at risk. UNICEF, through SARC, trained 30 volunteers in Homs on basic psychosocial support activities and 59 volunteers in Damascus and Rural Damascus on adolescent support. IOM conducted two 4-day awareness-raising workshops with 24 social workers from the Ministry of Social Affairs (MoSA), focusing on child recruitment, identification of victims of human trafficking, and specialised services for vulnerable cases. It was also agreed between UNICEF and MoSA to hold training for journalists on child rights and media ethics. The Danish Relief Committee's (DRC) protection advisor trained 50 teachers, livelihoods volunteers, 9 doctors and 3 social counsellors from the Ministry of Education (MoE) on child protection.

UNICEF, through its implementing partners, reached a further 24,256 children and adolescents with psychosocial support in Aleppo, Damascus, Dar'a, Homs, Lattakia, Quneitra, Rural Damascus and Tartous. IMC, in coordination with Syrian Arab Red Crescent (SARC), also continued to provide psychosocial support to 2,030 people in 8 communal shelters, and various centres and clinics, in Damascus. The Danish Refugee Council (DRC) provided legal and social counseling in community centres, as well as ad hoc support and assistance in civil status, deportation, arrest and missing cases in addition to direct intervention in courts, in Damascus, Dar'a, Homs and Rural Damascus, for 3,300 people, despite the fragile security situation.

Gender-specific assessment tools are developed to address the increasing vulnerability and need of women in shelters

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The deterioration of the economic and social conditions of families has exposed women to increased sexual and gender-based violence (SGBV). During the reporting period, data collection tools for assessing the needs of women in shelters were finalised. UNFPA provided research assistants with training, and the tools were piloted in centres in Damascus. UNFPA, together with UNRWA, also implemented capacity-building programmes on psychological first-aid (PFA) and stress management to have 6 certified PFA trainers and 15 specialised stress counsellors respectively.

UNFPA, through the Syrian Family Planning Association (SFPA) and SARC volunteers, provided psychological first aid, psychosocial support and counselling for 3,000 women residing in affected areas in Aleppo, Damascus, Homs and Rural Damascus. In addition, 600 women participated in awareness-raising initiatives through UNFPA-assisted mobile teams in Deir-ez-Zor.

UNDP and partners support improved resilience and livelihoods

To meet the needs of the poor and vulnerable, particularly small scale food producers in Al Ghab region of Hama Governorate, UNDP launched two initiatives in 11 villages to support the restoration and stabilization of disrupted livelihoods, in addition to access to safe water. The already vulnerable population was put at further risk by another shock when they no longer had access to safe and clean water due to the damage to the pipeline serving Hama and Homs. UNDP's intervention aims to restore 30 old, neglected Roman wells through labour intensive techniques, both

alleviating water shortages in target villages for a period of three months and



UNDP/. A young boy from a poor family in rural Hama Governorate watches as his mother employs the UNDP-provided milk processing unit to increase the amount of

For the first time in 10 months, humanitarian agencies were able to reach displaced and vulnerable persons in Ar-Raqqa

providing income for 60 labourers. Thus far, 14 ancient collection wells have been rehabilitated in Al Tamaza village, serving 50 families' drinking water and hygiene needs, as well as supporting livestock and the irrigation of 30 hectares of tobacco, nuts, fruits, and vegetables.

Another initiative aims to establish 8 milk processing units for 40 small scale milk producers in six villages whose vulnerability increased due to unsustainable prices from wholesalers. UNDP facilitated the employment of 50 local workers, providing all required equipment and tools for milk processing, as well as corresponding vocational training. Thus far, four milk processing units have been completed and are being successfully utilized by small scale producers to generate income, in addition to extending the shelf-life of the milk and broadening the milk value chain.

UNRWA enables 25,258 Palestine refugee students to attend the first day of school

On 15 September, UNRWA schools re-opened for the new academic year. Through the support of 1,251 teachers in 55 UNRWA schools and 41 Ministry of Education schools, Palestine refugee students were able to continue their education. Further, distance-learning materials, based on the Government of Syria curriculum, are available online for those students who are unable to physically attend regular classes.

UNRWA continues to provide comprehensive humanitarian assistance to Palestine refugees in Aleppo, Damascus, Dar'a, Hama, Homs and Lattakia, including access to basic, secondary and tertiary health services. Over the past two weeks, UNRWA delivered 11,652 family food parcels to displaced and vulnerable refugees, in addition to 21,632 light blankets, 3,997 hygiene kits, 9,669 packs of diapers, and 13,466 packs of sanitary items.

Humanitarian agencies mobilize quickly to deliver essential shelter and NFIs in hard-to-access areas

For the first time in 10 months, humanitarian agencies were able to reach displaced and vulnerable persons in Ar-Raqqa. UNHCR, UNICEF, IOM, together with local partners, delivered: core non-food items, including mattresses and blankets to 1,000 families (approximately, 5,000 people) in Almaraid, Alhama and Alshahameea; 5,000 blankets and 5,000 plastic sheets; and essential non-food items, including diapers and hygiene kits for 24,242 people. A window of opportunity opened up along the roads to Aleppo and Idlib, facilitating UNHCR to dispatch 1,500 full relief kits to Ahi Al-Kheir Aleppo and 1,500 full relief kits to SARC Idlib.

During the reporting period, IOM received authorization from the Ministry of Social Affairs (MoSA) to carry out management and coordination at Sport City in Lattakia, which hosts over 7,000 persons. IOM also started rehabilitation works for an additional 4 shelters in Lattakia in order to improve the living conditions of over 1,000 persons displaced from conflict areas.



IOM/Al-Rokhsy. IOM rehabilitated shelter at Sport City in Lattakia

In response to reports estimating 160 families (800 people) fled the fighting in al Maaloula to settle in Bab Touma, in Old Damascus, UNHCR dispatched essential non-food items, including mattresses, blankets and pillows for 160 households to the Sister of the Good Shepherd, a local NGO, for distribution. UNHCR's Field Office in Tartous prepared itself to meet the needs of 170 new vulnerable displaced from the governorate. The IDPs were visited at three different shelters in Tartous and provided with urgently needed relief items such as blankets, hygiene kits and sleeping mats.

During the reporting period, IOM provided essential non-food items, including baby diapers and hygiene kits to 173,154 displaced persons in 6 governorates in Syria. UNDP reached 3,000 displaced families or 15,000 people in Damascus, Rural Damascus, Homs and Dar'a with essential non-food items including bedding sets, hygiene kits, diapers and

clothes. A UNDP-funded sewing workshop in Al-Hassakeh produced more than 8,000 pieces, of women's and children's clothing and sheets, which were provided to more than 1,600 households in Qamishli. During the reporting period, SOS Children's Villages distributed 1,681 clothes for children in Aleppo, 200 hygiene kits in Damascus and 16,000 school kits in 7 governorates: Damascus, Rural Damascus, Quneitra, Dar'a, Latakia, Idleb and Aleppo. Premère Urgence provided 5,137 hygiene kits for 25,685 displaced persons in Rural Damascus, Aleppo, Tartous, Homs and Hama.

Central Emergency Response Fund allocated USD 50 million to Syria crisis response.

More than 2.1 million Syrian refugees

Country	Refugees registered and/or assisted awaiting registration as of 12 August 2013
Egypt	126,717
Iraq	192,443
Jordan	525,264
Lebanon	759,932
Turkey	492,716
North Africa	14,289
Total	2,111,361

Source: UNHCR as of 24 September 2013. For updated figures and more information: <http://data.unhcr.org/syrianrefugees/regional.php>. The above figures are based on numbers registered in each country and/or those who are assisted while waiting for registration. In addition to the above figures, around 28,000 Syrians have fled to various European countries.

Syria humanitarian response plans 45% funded

SHARP plan is 48% funded, while the Regional Response Plan is 43% funded



Central Emergency Response Fund (CERF) allocates USD 50 million for the Syria response

On 13 September, Valerie Amos, the United Nations Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, allocated USD 50 million from the Central Emergency Response Fund to boost the efforts of humanitarian agencies to prepare for and assist the growing number of Syrians affected by the crisis, in the country and in the region. Country-specific envelopes include \$20 million for Syria; \$15 million for Lebanon; \$5 million for Jordan and \$10 million for Iraq.

The Government of Syria allocates SYP 50 billion to relief aid in 2014

On 23 September, the government allocated SYP 50 billion (USD 368 million, according to Syria Central Bank exchange rate) to relief aid in the 2014 budget as compared to SYP 30 billion in 2013 budget. The Prime Minister stressed the importance of providing basic

goods for citizens and 'prioritizing food, medicine and energy security in the government's work plan, and its development and service programs.

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