



# Syria Situation Report #2

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| Country:              | Syria   |
| Emergency type:       | Conflict  |
| Start Date of Crisis: | Nov 27, 2024  |
| Date Issued:          | June 10, 2025   |
| Covering Period:      | February 1, 2025 to April 30, 2025  |
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## Key Figures



**16.7 million**

Total people affected<sup>1</sup>



**4.1 million**

Women of reproductive age<sup>2</sup>



**257,000**

Estimated pregnant women<sup>2</sup>



**85,600**

Number of expected deliveries within the next 3 months<sup>2</sup>



**5.6 million**

People targeted<sup>3</sup>

<sup>1</sup> [UNOCHA 2025](#).

<sup>2</sup> Based on the MISP calculator.

<sup>3</sup> UNFPA targeted population in 2025 across all of Syria for sexual and reproductive health services, gender-based violence prevention and response, and youth empowerment programmes.

## Highlights

- **Eruption of violence since March in the coastal, central and rural Damascus areas** has further compounded the humanitarian situation and resulted in loss of life, disruptions to sexual and reproductive health (SRH) and gender-based violence (GBV) services and driven new displacement, both internal and to Lebanon.
- **Lifting of US and EU sanctions on Syria:** On 13 May, 2025, the US lifted sanctions on Syria. A week later, the European Union also lifted economic sanctions. The lifting of sanctions is expected to offer a renewed opportunity to help Syrians rebuild their lives in safety and dignity, and to advance towards the peaceful, stable, future they deserve. It will likely enable broader access to life-saving assistance, facilitate the rehabilitation of critical infrastructure, and create an environment that supports responsible investment in basic services and livelihoods.
- **Impact of the US funding cuts:** The termination of US funding will result in a gradual withdrawal of UNFPA's support for 15 hospitals, 24 women and girls' safe spaces (WGSSs), 54 static health facilities, and 26 integrated mobile teams (IMTs). This withdrawal of support will affect services across the 14 governorates of Syria. Around 265,000 people will lose access to life-saving reproductive health services, including maternal health care and GBV response services.
- **GBV incidents remain significantly underreported** due to social stigma, fear of retaliation, and an indication of lack of trust in available services. Deep-rooted patriarchal norms, and the normalization of intimate partner violence, continue to deter women and girls from accessing GBV services. Ongoing displacement, return movements, and rising living costs are increasing women and girls' psychological stress and heightening their exposure to violence. The closure of numerous community protection centres nationwide has increased the GBV caseload of WGSSs and mobile facilities.
- **Provision of life-saving SRH and GBV services amid insecurity and funding cuts:** During the reporting period, UNFPA and its partners continued providing life-saving SRH and GBV services, reaching 557,000 people across all 14 governorates.

## Situation Overview

- **Refugees Return Movement:** As of 15 May, 2025, UNHCR estimates that since 8 December some 501,125 Syrians have returned to Syria via neighbouring countries, while 861,960 Syrians (52% female) have returned since the beginning of 2024. Returnees frequently encounter legal and housing challenges, including unresolved land disputes, a lack of necessary documentation, and exclusion from available services.<sup>4</sup>
- **Continued internal displacement inside Syria:** As of 15 May, 2025, 1,200,485 (53% female) internally displaced persons (IDPs) have returned to their homes, including 344,733 people returning from IDP sites since early December 2024.<sup>5</sup>
- **Observed increase in vulnerability among returnees and IDPs:** Ongoing internal displacement, refugee return movements, the destruction of infrastructure, exposure to traumatic events, along with rising living costs, could increase the vulnerability of displaced populations, the majority of whom are women and girls, to GBV, early marriage, and economic violence.. In northwest Syria, the overstretched health system is limiting GBV response services. To meet needs, GBV and SRH partners have reprogrammed services to areas of return, and expanded outreach efforts, awareness-raising initiatives, and case management services for displaced women and girls.

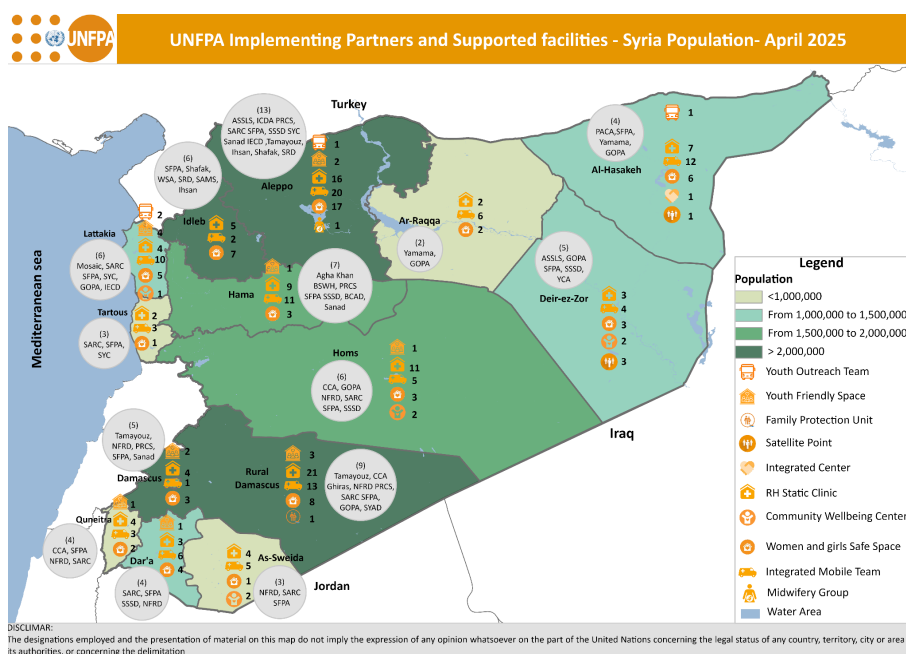
<sup>4</sup> <https://data.unhcr.org/en/documents/details/116356>

<sup>5</sup> <https://data.unhcr.org/en/documents/details/116354>

- **Insecurity continues to limit access to affected populations:** While humanitarian actors continue efforts to deliver critical humanitarian assistance to affected populations, access to displaced people, and those in collective shelters, remains limited due to ongoing insecurity. Access to essential maternal and reproductive health services continues to be severely limited, particularly in areas of displacement, returnee and informal shelter areas.
- **Scaling down provision of health and protection services:** Nationwide, protection services are being scaled down due to significant funding shortfalls, notably after the suspension of US support, with 42 of 82 protection centres closed in northwest Syria. Rising health needs in areas with increased returnees, damaged infrastructure, and limited basic services are adversely impacting access to immunization services, reproductive and child health care, and mental health and psychosocial support (MHPSS), disproportionately affecting women and children.<sup>6</sup>
- **Financial barriers continue to restrict women's access to SRH and GBV services,** with high transportation costs a major obstacle. Integrating transport support into GBV and protection programming remains essential to ensure services are accessible to those most at risk.
- **UNFPA and partners have increased the provision of mobile SRH services in prioritized locations, mainly coastal areas.** Activities include the distribution of clean delivery kits and contraceptives, as well as the provision of the minimum initial service package (MISP) to vulnerable populations.
- **Youth-friendly spaces** in coastal areas were temporarily closed in March due to security concerns, but have gradually reopened. UNFPA supported the most affected adolescent girls with menstrual health supplies and tailored hygiene kits.

## UNFPA Response

- During the reporting period, UNFPA ensured the continuity of life-saving SRH and GBV services and reached over **400,000** people with SRH services and more than 157,000 people with GBV prevention, mitigation, and response activities, demonstrating extensive coverage across crisis-affected areas. Services are delivered through UNFPA's support to static health facilities (95), safe spaces for women and girls (65) and 19 youth-friendly spaces across all 14 governorates of Syria.



<sup>6</sup><https://www.unocha.org/publications/report/syrian-arab-republic/syrian-arab-republic-humanitarian-situation-report-no-5-28-april-2025>

## Sexual & Reproductive Health

- UNFPA continued its support to implementing partners, including the Ministry of Health (MoH) and NGOs, to provide life-saving SRH services, including maternal and newborn care, family planning, the prevention and treatment of sexually transmitted infections (STIs) and HIV, and care for survivors of sexual violence. These services are crucial for preventing maternal and newborn deaths and providing medical care for survivors of violence. Services were delivered through UNFPA's support to 85 health facilities and 26 mobile outreach teams operated by implementing partners. Contraceptives and supplements were also provided to 970 public health community centres (PHCCs) operated by the MoH.
- UNFPA supported one basic emergency obstetric and newborn care (BEmONC) centre in Bagazha (Al-Bab, Aleppo) and one comprehensive CEmONC facility at Aldana Maternity Hospital (Dana, Idleb) between January and March 2025 to address gaps in maternal health services, including emergency obstetric care. This brings the number of health facilities supported by UNFPA to five CEmONCs, four BEmONCs, and one nursing and midwifery school.

## Gender Based Violence

- **UNFPA has expanded access to GBV prevention and response services through its support to 141 GBV facilities**, including WGSSs, SRH/GBV-integrated mobile teams, and community wellbeing centres; as well as integrating GBV services within health facilities. Services include individual PSS, psychological first aid (PFA), awareness-raising sessions, comprehensive case management, including cash assistance, and multisectoral referrals to specialized services.

## Adolescents & Youth

- UNFPA continued to support young people in Syria through 19 youth-friendly spaces in Damascus, Rural Damascus, Aleppo, Homs, Latakia, Al-Hasakah, Dara'a, Quneitra and Hama. Activities ensured young people have access to reliable information on SRH, GBV, civic engagement, empowerment opportunities, including capacity-building, vocational training, and MHPSS services.
- UNFPA continued supporting young people's participation and engagement by providing technical and financial support to **11 youth led-initiatives in Aleppo, Damascus and Rural Damascus**. Additionally, in Damascus, young people received training on youth-led community initiatives. They will develop and propose new initiatives, six of which will be implemented with UNFPA and partner's technical and financial support, which includes coaching and mentoring.
- **UNFPA, supported the Syria Hackathon in February 2025, engaging over 1,000 young participants in developing tech-based solutions to current challenges**. It also sponsored the SYNC'25 Conference (Syria Silicon Valley), connecting Syrian experts and youth to discuss the future of technology and innovation in Syria. Both events included practical workshops and strategies to boost entrepreneurship and advance the tech sector.
- UNFPA continued the provision of MHPSS to young people through individual/group counseling and recreational activities.

## Results Snapshots



400,000

People reached with **SRH services**



95

Health static facilities supported






157,000

People reached with **GBV prevention, mitigation and response** activities



65

**Safe Spaces** for women and girls supported

|   |        |  |
|---|--------|--|
|    | 11,000 | Dignity kits distributed to women and girls  |
|   | 176    | Reproductive health kits provided to service delivery points to meet the SRH needs of the targeted population      |
|  | 19     | Youth spaces supported by UNFPA that provide capacity building and economic empowerment activities to young people |

## Coordination Mechanisms



### Gender-Based Violence:

- The GBV Sub-Sector, led by UNFPA, is working with OCHA and the inter-sectoral coordination to provide support to partners in all governorates during the transitional period. In line with the released transition vision statement and roadmap, the GBV Sub-Sector coordination team is closely coordinating with partners from all former Hubs to facilitate a smooth transition towards the Damascus-led GBV coordination structure.
- GBV Sub-Sector partners inclusion in mailing lists and platforms is completed. Integrated "All hubs' partners" meetings were launched in Damascus, Qamishly, Aleppo and Der Ez Zor. A transactional Strategic Advisory Group (SAG) was established, including the existing Humanitarian Country Team (HCT) and North West Syria (NWS) members and additional North East Syria Forum (NESF) representatives. Technical task forces, including the case management and cash and voucher assistance (CVA) task forces, are under review and will resume integrated work in June.
- GBV Sub-Sector information management platforms and processes have been harmonized through the adoption of the Syria GBV Sub-sector 5W Dashboard. Regular service mapping merging is ongoing, while referral pathways are gradually being integrated into one consolidated platform, in order to enhance timely referrals in the most-at-risk areas, in all governorates.
- Key workstreams made significant progress between February and April 2025. The GBV risk mitigation

capacity building initiative continued to be rolled out through the completion of two trainings in Damascus and Aleppo. Critical assessment data analysis progressed towards finalization stages, including the Voices from Syria 2025 Assessment and the WGSS Sustainability and Effectiveness Assessment. Final reports are expected in June.

- In NES, UNFPA, in its capacity as the GBV Sub-Sector lead agency, conducted a technical support mission to assess GBV risks and needs during the repatriation of IDPs from IDP camps (Al Hol and Worshekani).
- Informed by support missions and assessments, the GBV Sub-Sector coordination unit continued to lead advocacy efforts in inter-sectorial coordination (ISC) and HCT fora to facilitate the integration of GBV into prioritization exercises, including resource mobilization through pooled funds (SHF) and individual donors, to sustain life-saving responses.
- Engagement with local stakeholders remains key to facilitating an understanding of core GBV concepts, and supporting access to life-saving GBV prevention and response activities, including those that address harmful practices and social norms.

## Sexual and Reproductive Health:

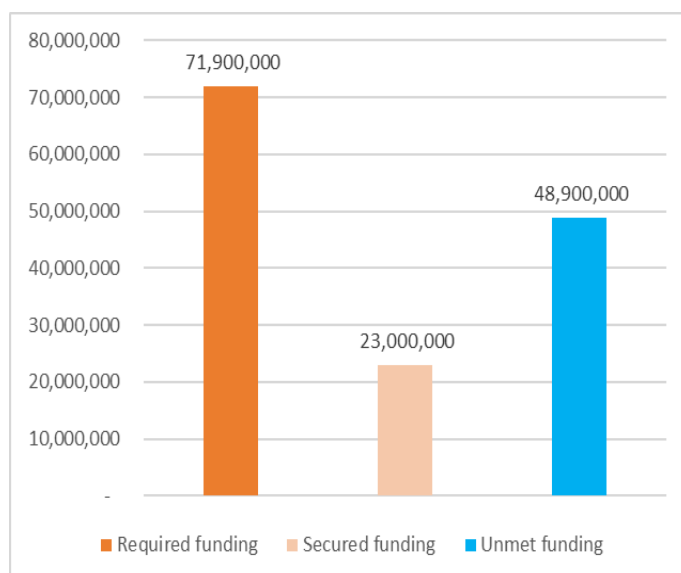
- The SRHWG is actively streamlining coordination among SRH partners to adapt to the evolving context in Syria. A key step in this process involves revising the SRHWG's Terms of Reference (ToR) to align with the broader Whole of Syria (WoS) transitional plan, ensuring a cohesive and integrated approach to SRH service delivery across the country. The SRHWG is fostering enhanced collaboration among all partners, including those newly operating in Syria, to facilitate the sharing of identified gaps and needs in SRH service provision; guiding the operationalization of activities in line with national health priorities; and ensuring a more effective and coordinated response to the humanitarian needs across all governorates.
- The SRHWG in North-east Syria (Qamishli - Deir-ez-zoir) is updating existing service maps to include actors from the NESF operating within Syrian Democratic Forces (SDF)-controlled areas of Deir-ez-Zor (DEZ). Similar service mapping updates are planned by SRHWGs in other governorates.

## Funding Status

In 2025, UNFPA is appealing for US\$71.9 million to provide critical reproductive health and protection services to women, girls and youth across Syria. To date, only 32% (US\$23 million) of the funding required has been received, with US\$48.9 million still needed. The termination of US funding, with effect from the end of March, has left a significant funding gap risking the continuity of service provision.

### UNFPA would like to thank:

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