# HUMANITARIAN IMPLEMENTATION PLAN (HIP) SYRIA REGIONAL and LEBANON CRISES

# The full implementation of this version of the HIP is conditional upon the approval of the NDICI transfer by the Budgetary Authorities.

# AMOUNT: 247 310 266

The present Humanitarian Implementation Plan (HIP) was prepared on the basis of financing decision ECHO/WWD/BUD/2023/01000 (Worldwide Decision) and the related General Guidelines for Operational Priorities on Humanitarian Aid (Operational Priorities). The purpose of the HIP and its annexes<sup>1</sup> is to serve as a communication tool for DG ECHO<sup>2</sup>'s partners and to assist in the preparation of their proposals. The provisions of the Worldwide Decision and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

### 0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

# <u>3rd Modification – 7 July 2023</u>

This modification entails two changes:

The first modification is intended to transfer EUR 3 714 266 to be allocated to the IFRC pilot Programmatic Partnership action 'Accelerating local action in humanitarian and health crises' for Lebanon.

The second modification concerns Syria. After 12 years of conflict needs are at an all-time high in Syria. The critical infrastructure which still provides people with some basic services face great risks and is at the brink of collapse. The water sector in particular was significantly disrupted with access to safe water in Syria decreasing by some 40% compared to pre-war standards.

In light of the gap in the WASH sector and the link to the health response, DG ECHO has mobilised an additional EUR 3 500 000 for Syria to support the resilience of the WASH sector and to mitigate the humanitarian consequences that would result from a collapse in service delivery.

# 2<sup>nd</sup> Modification – 8 June 2023

<sup>&</sup>lt;sup>1</sup> Technical annex and thematic policies annex.

<sup>&</sup>lt;sup>2</sup> Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO).

Four months after the devasting earthquakes that hit northern Syria, humanitarian needs in different sectors remain high. In Northwest Syria, amidst an ongoing cholera outbreak,<sup>3</sup> 1.1 million people are estimated to require urgent WASH assistance.

In light of the gap in the WASH sector and the link to the health response, Portugal has pledged to transfer to the European Commission's budget a contribution to support the WASH earthquake response in Northwest Syria<sup>4</sup>.

This Modification consists of the following contribution, from external assigned revenue, to be added to the HIP: EUR 96 000.

# 1<sup>st</sup> Modification – 2 March 2023

This Modification consists of a top-up of EUR 25 000 000 following the devastating earthquakes that hit Türkiye and Syria on 6 and 20 February, affecting at least 8.8 million people in Syria, both in government-controlled areas as well as in non-government-controlled areas of Northwest Syria. It is estimated that more than 6 000 people died and over 11 000 were injured across the country.

In Northwest Syria, more than 10 000 buildings have been partially or fully damaged, leaving more than 50 000 households in need of emergency shelter.<sup>5</sup> In government-controlled areas, it is estimated that four million people have been affected by the earthquake mainly in Aleppo, Hama, and Lattakia. More than 50 000 families have been displaced, mostly in Aleppo.<sup>6</sup> The collective centres are overcrowded with lack of basic services, exposing people to unsecure protection environment and unsafe hygienic conditions risking outbreaks of communicable diseases. The already ill-functioning electricity, heating, water and sewage systems have completely broken down in many locations.

Urgent needs remain in all sectors: shelter; health, including mental health and psychosocial support; non-food items, including winterisation; protection; food; education; and WASH assistance.

An additional EUR 25 million has been allocated to address needs in Syria following the earthquakes to address the multi-sector needs and life-saving interventions. Special focus will be on the most affected areas and communities. Shelter, non-food items, cash, food needs, and WASH will be prioritised.

<sup>&</sup>lt;sup>3</sup> North-west Syria – Situation Report (last update 28 April 2023) (OCHA).

<sup>&</sup>lt;sup>4</sup> The full implementation of this version of the HIP is conditional upon payment of the Member State's contribution of EUR 100 000 to the EU budget as externally assigned revenue minus a 4% management fee.

<sup>&</sup>lt;sup>5</sup> Earthquakes: North-west Syria: Flash Update No. 13 (as of 23 February 2023) (OCHA)

<sup>&</sup>lt;sup>6</sup> Earthquakes Situation Report No. 1 (As of 25 February 2023) (OCHA)

# 1. CONTEXT

The protracted crisis in Syria remains one of the largest humanitarian crises of our times, and the world's second largest refugee crisis, generating humanitarian needs unparalleled in scale, severity, and complexity. Russia's war of aggression against Ukraine has further aggravated the situation, notably regarding food security. Inside Syria, the humanitarian situation has deteriorated significantly over the past twelve months, mainly due to the unresolved political crisis, increasing food insecurity, ongoing conflict, the sharp economic downturn, and the severe water crisis affecting millions across the country, amplified by cyclical, intensifying droughts, poor environmental conditions (deforestation, soil and vegetation degradation), mismanagement of natural resources, and the COVID 19 and cholera pandemics. The number of people in need of life-saving assistance continues to rise sharply and has reached an unprecedented 14.6 million people in 2022, more than 30% more than in 2020, and is expected to further rise to more than 15.5 million people in 2023. Today, 97% of the Syrian population lives below the poverty line, close to 70% is food insecure, 6.7 million people are internally displaced, and 2.4 million children are out of school.<sup>7</sup> The context remains particularly complex and highly volatile, broadly characterised by three sub-contexts: Northwest, Northeast, and Southern/Central Syria, each experiencing various levels of humanitarian needs, conflict intensity, access dynamics and constraints.

While the UN Security Council Resolution 2642 (2022) authorised a continuation of cross-border assistance to Northwest Syria until January 2023, humanitarian access to Northwest Syria remains difficult. The ceasefire agreed between Turkey and Russia in March 2020 remains fragile, with continued shelling and violence reported across the region on an almost daily basis. 4.1 million people need humanitarian assistance in the region, while about 2.7 million people are Internally Displaced Persons (IDPs), many of them forcibly displaced on multiple occasions.

In Northeast Syria, close to 650 000 people remain displaced, including around 130 000 living in 12 IDP camps. Ongoing hostilities between multiple armed actors and growing insecurity continue to pose significant challenges to the provision of critical services.

The situation in Government-controlled Central and Southern Syria is marked by increased food insecurity, poverty, eroded coping capacities and deteriorating access to basic services. Continuous violence has been observed in the southern governorates of Dara'a and Sweida in 2022. The region hosts over 3 million displaced people and 8.4 million people in need of humanitarian assistance.

In neighbouring countries, some 5 575 000 million Syrian refugees are registered, accounting for one of the largest refugee populations worldwide, second only to the displacement generated by Russia's war of aggression against Ukraine. The region hosts a large Syrian refugee population, including 3 630 000 in Turkey, 825 000 in Lebanon, 662 000 in Jordan, 242 000 in Iraq and 130 000 in Egypt. Lebanon accounts for the world's highest number of refugees per capita, with refugees representing a third of the population. Jordan has the second highest ratio, at 87 refugees per 1 000 inhabitants.

<sup>&</sup>lt;sup>7</sup> Humanitarian Needs Overview (HNO 2022).

In Lebanon, the continuing severe political, socio-economic, and financial crises have pushed an estimated 80% of the Lebanese into poverty, and 36% of Lebanese households below the extreme poverty line<sup>8</sup>, while 90% of the Syrian refugees cannot cover their needs as defined by the survival minimum expenditure basket (SMEB)<sup>9</sup>. Electricity outages due to the fuel shortage are jeopardising the availability of healthcare and drinking water. Lebanon also faces critical waste management and pollution issues. Access to healthcare has become unaffordable for large parts of the population, most notably secondary and tertiary care and diagnostic services, and many hospitals have been forced to reduce their operations to the bare minimum. The inability to pay for transportation is further hampering access to the few remaining functioning public services for the poorest. Violent inter- and intra-community incidents linked to competition over goods and services, fueled by anti-refugee statements by politicians and hate speech on social media, have increased significantly. Refugees remain subject to raids, curfews, evictions, arbitrary arrest, and movement restrictions, and have limited access to livelihood opportunities. In the absence of a regulatory framework, deportations of refugees without due process and procedural safeguards can amount to refoulement.

In **Jordan**, a steady deterioration of the humanitarian situation can be observed. The protracted crisis is characterised by the presence of refugee populations both in camps and in urban settings. Forced relocations to Azraq camp/Village 5, where 10 000 refugees are residing with no freedom of movement, have continued. The registration of non-Syrian refugees was suspended in early 2019, further restricting their protection space. On average 64% of refugees live below the poverty line.<sup>10</sup> COVID-19 lockdown measures have further exacerbated the lack of access to livelihood opportunities, in particular for urban refugees. A majority of refugee children have encountered serious learning losses. Sexual and Gender-Based Violence (SGBV) has increased. While the number of people stranded in Rukban/the 'Berm' has further decreased, to an estimated 7 500 people, protection, and lack of access to health services remain issues of particular concern. Moreover, Jordan faces long-term water shortages.

DG ECHO's needs assessment for 2022-2023 identified extreme humanitarian needs for Syria, high humanitarian needs for Lebanon, and moderate humanitarian needs in Jordan. The vulnerability of the population affected by the crisis is assessed to be very high in Syria, and high in Lebanon and Jordan.

	SYRIA	LEBANON	JORDAN
<b>INFORM Risk Index</b> <sup>11</sup>	7.2/10	5.1/10	4.4/10
Vulnerability Index	8/10	6.3/10	6.1/10
Hazard and Exposure	8.7/10	4.6/10	3.2/10
Lack of Coping Capacity	5.4/10	4.5/10	4.3/10

<sup>&</sup>lt;sup>8</sup> OCHA Report, April 2022.

<sup>&</sup>lt;sup>9</sup> Vulnerability Assessment of Syrian Refugees (VASyr) 2021.

<sup>&</sup>lt;sup>10</sup> UNHCR Vulnerability Assessment Framework (VAF) (July 2022).

<sup>&</sup>lt;sup>11</sup> INFORM is a global, open-source risk assessment for humanitarian crises and disasters.

Global Crisis Severity Index <sup>12</sup>	5/5	3.6/5	2.7/5
Projected conflict risk	9.9/10	5.6/10	3.2/10
Uprooted People Index	10/10	10/10	10/10
Humanitarian Conditions	4.9/5	3.2/5	2.6/5
Natural Disaster Index	5.9/10	5.2/10	4.1/10
HDI Ranking <sup>13</sup> (value)	0.567	0.744	0.729
Total Population <sup>14</sup>	$21\ 700\ 000^{15}$	6 769 150	10 269 020

### 2. HUMANITARIAN NEEDS

### 1) People in need of humanitarian assistance:

The Syria crisis continues to generate massive levels of needs among the Syrian population across the region. Besides the large-scale displacement of populations internally and in neighbouring countries as well as life-saving emergency needs in active conflict settings, there are also more protracted emergency needs in virtually all humanitarian sectors both inside Syria and in places of asylum. The severe political, socio-economic and financial crisis in Lebanon severely affects both refugees as well as the host population.

	SYRIA <sup>16</sup>	LEBANON <sup>17</sup>	JORDAN <sup>18</sup>
People in need of humanitarian assistance	<ul><li>14.6 million, including:</li><li>5 million in extreme &amp;</li><li>catastrophic need,</li><li>9.6 million in severe need</li></ul>	4 million, including: 1.5 million displaced Syrians 2.2 million vulnerable Lebanese 0.1 million migrants 0.2 million Palestinian (incl. from Syria)	762 710 registered refugees
Refugees and IDPs	<ul> <li>6.9 million IDPs, including:</li> <li>2.8 million in Northwest</li> <li>Syria</li> <li>0.65 million in Northeast</li> <li>Syria</li> <li>3.45 million in Government</li> <li>controlled areas</li> <li>438 000 Palestine Refugees</li> <li>from Syria</li> </ul>	<ul> <li>1.5 million displaced Syrians</li> <li>(825 000 registered Syrian refugees<sup>19</sup>)</li> <li>19 930 refugees of other nationalities</li> <li>180 000 Palestine Refugees from Lebanon</li> <li>29 000 Palestine Refugees from Syria</li> </ul>	<ul> <li>676 322 Syrians, and</li> <li>86 388 refugees of other nationalities</li> <li>2 307 011 Palestinian Refugees from Jordan</li> <li>19 000 Palestine Refugees from Syria</li> </ul>
People in need of health services	12.2 million	1.9 million Lebanese/Migrants/PRL/PRS 1 365 000 Syrian refugees	762 710 refugees

<sup>&</sup>lt;sup>12</sup> http://www.inform-index.org/Global-Crisis-Severity-Index-beta.

<sup>17</sup> OCHA report, April 2022.

<sup>&</sup>lt;sup>13</sup> Humanitarian Development Index (HDI), United Nations Development Programme.

<sup>&</sup>lt;sup>14</sup> World Bank data, as of 2020. Available at: https://data.worldbank.org/indicator/SP.POP.TOTL

<sup>&</sup>lt;sup>15</sup> HNO 2022.

<sup>&</sup>lt;sup>16</sup> HNO 2022.

<sup>&</sup>lt;sup>18</sup> Statistics for Registered Persons of Concern (UNHCR, July 2022) and VAF 2022.

<sup>&</sup>lt;sup>19</sup> UNHCR operations data portal (as of November 2022).

Food insecure people	13.9 million	2.2 million Lebanese/Migrants/PRL/PRS 750 000 Syrian refugees	558 423 Syrian refugees
People in need of WaSH support	13.2 million	1 million Lebanese/Migrants/PRL/PRS 990 000 Syrian refugees	129 000 refugees incl. population in Rukban/the 'Berm'
People in need of shelter support	5.9 million	870 000 Syrian refugees	365 558 Syrian refugees
Children in need of Education in Emergencies	<ul><li>6.6 million people in need of emergency education assistance</li><li>2.45 million school-aged children out of school</li><li>1.6 million at risk of dropping out</li></ul>	<ol> <li>1 230 493 people in need, including 715 000 Syrian refugees<sup>20</sup></li> <li>40% of school-aged Syrian refugees remain out of school</li> </ol>	236 289 school-aged Syrian refugees 84 826 out of school

### 2) Description of the most acute humanitarian needs

### 2.2.1 Food Security and Livelihoods (FSL)

Russia's war of aggression against Ukraine had a substantial impact on Syria, Jordan, and Lebanon, reducing the availability of, and accessibility to agriculture products and leading to sharply rising costs of basic goods and food products, with severe negative effects on large parts of the population, notably of the most vulnerable.

**In Syria**, food security remains of particularly serious concern, with an estimated 13.9 million people requiring food assistance to cover their daily needs, including 12 million people facing acute food insecurity.<sup>21</sup> In Northwest Syria particularly, some 1.4 million people rely entirely on WFP's general food distribution. There are wide-ranging needs for support, from emergency food assistance to targeted livelihood opportunities to help beneficiary households become self-reliable (e.g., agricultural inputs, technical capacity-building). The situation is further exacerbated by the economic and COVID-19 crises, whose main consequences include the loss of livelihoods, reduction in purchasing power and massive inflation of food prices. Mounting food insecurity, eroded livelihoods, escalating debt, and continued displacement continue to erode the resilience of the population to repeated shocks, and lead to widespread negative coping mechanisms such as child labour, early marriage, school drop-out, selling of household assets or informal oil refining with considerable negative impact on the environment.<sup>22</sup>

**Lebanon**: Food insecurity continues to increase. With the local currency having lost 95% of its value since October 2019 and the cost of the food minimum survival basket increasing 16-fold since then<sup>23</sup>, the purchase of staple foods has become unaffordable for many. 65% of Syrian refugees and 34% of the Lebanese are considered food insecure.<sup>24</sup> The economic collapse contributes to reduced livelihood opportunities in a strongly

<sup>&</sup>lt;sup>20</sup> Lebanon Crisis Response Plan (LCRP) (2022-2023).

<sup>&</sup>lt;sup>21</sup> HNO 2022.

<sup>&</sup>lt;sup>22</sup> HNO 2022.

<sup>&</sup>lt;sup>23</sup> WFP Vulnerability Analysis and Mapping (VAM), July 2022.

<sup>&</sup>lt;sup>24</sup> WFP Vulnerability Analysis and Mapping (VAM) analysis, June 2022.

restrictive labour environment for refugees. Amongst Lebanese, unemployment almost tripled between 2018/19 and 2022 to 28%, and youth unemployment reached 49%.<sup>25</sup> Those working see their salaries very significantly reduced in value.

**Jordan:** 64% of the refugee population live below the poverty line<sup>26</sup>, mainly due to a lack of access to livelihood opportunities which has been further exacerbated by the COVID-19 crisis. The food security situation of refugees continues deteriorating, and 90% of refugee families employ at least one negative coping strategy, such as reducing food intake or buying household goods on credit.<sup>27</sup>

### 2.2.2 Health

**Syria**: Only 58% of hospitals and 53% of Primary Healthcare Centres are fully functional. The main needs include comprehensive primary and secondary healthcare, trauma, post-operative care, physical rehabilitation, life-saving obstetric and reproductive health, and Mental Health and Psychosocial Services (MH/PSS). The spiraling costs of health services, lack of health staff, medicines, supplies, as well as the fear of exposure to COVID-19 remain main barriers to access health. Disrupted water networks and waste management, displacement, insufficient shelter solutions and food insecurity contribute to expose populations to epidemic-prone diseases. Chronic malnutrition remains one of the major public health concerns in Syria, where more than 600 000 children, including one out of three among displaced children are stunting every year, and the growing food insecurity due to the economic crisis, natural hazards/drought, and the consequences of Russia's war of aggression against Ukraine, is increasing the prevalence of malnutrition across the county. It is estimated that in 2022-23, 5.5 million people will need nutrition assistance.<sup>28</sup>

**Lebanon**: The public health system is near collapse in all its aspects. The departure of qualified staff and excessive running costs caused many health departments and diagnostic services to close. The removal of subsidies on drugs and medical supplies led to severe shortages and caused a tenfold increase in prices. Financial accessibility forms a major barrier: 73% of Syrian refugees and 71% of Lebanese who did not access health care could not afford treatment.<sup>29</sup> Subsidy schemes for Syrian refugees are increasingly insufficient, with patient cost shares unaffordable for the majority. Financial barriers among Lebanese are seriously aggravated by the complete disruption of public and private insurance schemes. The health sector's struggle is reflected in the deterioration of health indicators, including routine immunisation rates, maternal and neonatal mortality. The cholera outbreak in October 2022 is expected to pose additional challenges to this sector.

**Jordan**: The provision of health services in the refugee camps remains the exclusive responsibility of external aid donors, with acute gaps in primary healthcare and in Sexual and Reproductive Health. While refugees living in urban areas can access healthcare services at a subsidised rate, this still represents an unaffordable cost due to worsening

<sup>&</sup>lt;sup>25</sup> OCHA report, April 2022.

<sup>&</sup>lt;sup>26</sup> UNHCR VAF, July 2022.

<sup>&</sup>lt;sup>27</sup> UNHCR, March 2022.

<sup>&</sup>lt;sup>28</sup> HNO 2022.

<sup>&</sup>lt;sup>29</sup> LCRP 2022 and Multi-Sector Needs Assessment (MSNA) 2021.

economic conditions and a lack of livelihood opportunities. The provision of life-saving assistance in Rukban/the 'Berm' remains paramount.

# 2.2.3 Protection

**Syria**: Critical gaps and challenges remain for all population groups in Syria. 14.2 million people need protection assistance, and severe protection risks are reported at community level in all governorates. Violation of International Humanitarian Law (IHL) continues to be a major cause of human suffering in Syria, particularly for the civilian population. SGBV, early/forced marriage and child labour, arbitrary arrests, and detention, disappearance and forced conscription, as well as access to civil documentation and Housing, Land and Property (HLP) rights, remain of particular concern. In areas directly affected by hostilities, attacks on civilians and civilian infrastructure continue, including on hospitals and schools, causing large-scale displacement, movement restrictions, loss of assets and livelihoods, SGBV and contamination by explosive hazards.

**Lebanon**: Most registered Syrian refugees do not have legal residency (84% in 2021<sup>30</sup>), exposing them to serious protection risks, including threat of deportation. Without the resumption of registration, obstacles to obtain or renew legal stay remain. Equally, non-registered refugees and other stateless persons in Lebanon face grave protection risks, being subject to restrictions in movement, limited access to basic services, livelihood, and education opportunities, among other. Among the stateless, high levels of child marriage to obtain citizenship are being observed. The anti-refugee rhetoric and the perception of aid bias are giving rise to increased social tensions between communities and act as a push factor for Syrians to return to Syria and for host communities to demand greater access to humanitarian assistance. Increasing poverty and accumulation of debt have led to an increase in child labour, child marriage and SGBV.

**Jordan**: Registration (including renewal) and provision of legal assistance is a priority to protect refugees and allow them to access basic services. Around 30 000 Syrian and 7 000 non-Syrian refugees lack proper documentation, putting them at risk of detention, forced relocation to camps or deportation. SGBV is also a major protection concern.

# 2.2.4 Water, Sanitation and Hygiene (WASH)

**Syria**: WASH systems have suffered from significant damages and destruction related to the conduct of hostilities, to lack of adequate maintenance, continuous drain of technical staff and poor water resources management. In many parts of Syria, they require significant repair and operational support. More than 13 million people are highly dependent on humanitarian assistance for access to sufficient and affordable safe water, adequate sanitation, and solid waste management and/or hygiene supplies.<sup>31</sup> In 2022, the situation has even further deteriorated as a result of multiple factors, ranging from a serious water crisis generated by a severe drought, lower water levels in the Euphrates river, significant deficiencies in the main water stations, and a recent cholera outbreak

<sup>&</sup>lt;sup>30</sup> VASyR 2021.

<sup>&</sup>lt;sup>31</sup> HNO 2022.

spreading fast across all Syrian governorates and beyond borders, exacerbating humanitarian needs and putting millions of people at immediate risk.

**Lebanon**: Mainly due to structural shortcomings, more than 3 million people are at risk of losing access to safe water. Water shortages will force households to increasingly rely on unsafe and more expensive alternatives such as collecting untreated water from springs or using water trucking.<sup>32</sup> Access to water is jeopardised further by shortages in electricity and fuel for the generators that power water pumps. These constraints in the WASH sphere are expected to exacerbate the cholera outbreak of October 2022.

Jordan: Around 7 500 Syrians stranded in Rukban/the 'Berm' need access to safe water and sanitation.

### 2.2.5 Shelter and Non-food Items (NFIs)

<u>Syria</u>: 5.9 million people are estimated to need shelter support inside Syria. IDPs and returnees are disproportionately affected. Almost 38% of the overall population lives in substandard, damaged and/or inadequate shelter. The lack of emergency NFIs remains critical, with the overall number of people in need increasing to 4.9 million in 2022.<sup>33</sup>

**Lebanon**: Reduced purchasing power puts a strain on accessing safe and affordable housing, notably as concerns refugees and migrants. 870 000 Syrians (58%) live in inadequate conditions out of whom 150 000 in non-residential shelters and 330 000 in non-permanent informal tented settlements. Policy restrictions and unaffordable rehabilitation costs keep most of the Palestinian refugees in uninhabitable shelters or in shelters that are at risk of collapse. Debt accumulation due to rent increase triggers tension with property owners and eviction notices. A quarter of the households were<sup>34</sup>. Economic pressure forces people to accept cheaper shelter options, often substandard and prone to shocks and hazards and in need of repair.

**Jordan**: Following price increases combined with the new electricity tariffs regulation, many urban refugees are facing difficulties paying their rent. UNHCR has reported a considerable number of evictions. As a result, moves from host communities to refugee camps are being observed, putting pressure on the capacity of camps.

# 2.2.6 Education in Emergencies (EiE)

**Syria**: Education continues to be seriously affected by the conflict. Access remains limited, with. 2.45 million children aged 5 to 17 out-of-school and 1.6 million at risk of dropping out.<sup>35</sup> A third of all schools have been either partially damaged or destroyed. Existing services are unable to meet the different learning needs. Many children in school continue to have reduced learning time. The lack of schools, inadequate and unsafe learning environments, limited teacher availability and capacity, disruptions in learning, difficulty to meet costs, all affect education opportunities and learning outcomes of children, and their very opportunities to live dignified lives in their future.

<sup>32</sup> UNICEF Lebanon.

<sup>&</sup>lt;sup>33</sup> HNO 2020.

<sup>&</sup>lt;sup>34</sup> LCRP 2022-2023.

<sup>&</sup>lt;sup>35</sup> HNO 2022.

**Lebanon**: Due to the ongoing crisis the number of out-of-school children increased significantly, and the switch to online and hybrid education affected the quality of learning. Overall, 15% of all families residing in Lebanon took their children out of school. An estimated 40% of Syrian children remain out of school, with 30% never having attended any form of learning.<sup>36</sup> 35% of refugee households have halted their children's education. Access, retention, and transition from non-formal to formal education all face bottlenecks.

**Jordan**: The dire economic conditions increase the risk of children dropping out of school and being exposed to child labour and early marriage. More than 112 000 children remain out of school.<sup>37</sup>

### 2.2.7 Disaster Preparedness and Disaster Risk Reduction (DP/DRR)

**Syria**: Syria continues to rank among the most at-risk countries, with active conflict still affecting the country, notably in North and South Syria. Large-scale displacement continues, while rapid response remains necessary to cater for emergency needs. Moreover, disasters caused by natural hazards are affecting local populations more frequently and with increasingly heavy effects on the population. Seasonal floods, increasing drought conditions, harsh winters, all largely linked to climate change, are increasingly limiting the availability of water, and negatively affect the agricultural production, limiting yields, and leading to the outbreak of largely preventable diseases such as cholera. In case of sudden disasters, humanitarian actors need to remain able to provide first-line emergency response in a flexible and timely manner.

**Lebanon**: Lebanon is vulnerable to a wide range of natural and human-induced hazards, including the effects of climate change. The 2020 Beirut Port explosion demonstrated shortcomings regarding the response capacity and preparedness of Lebanese authorities, as well as concerning the humanitarian coordination and response structures. The main existing threats are forest fires, floods, disease outbreaks (e.g., cholera) and chemical hazards, as well as the increasing intra- and inter-communal violence.

**Jordan**: Jordan is vulnerable to recurrent flash floods during the period October-January followed by landslides. In addition, Jordan is drought prone in summer, which limits water availability. Climate change is expected to further exacerbate such threats.

#### 3. HUMANITARIAN RESPONSE AND COORDINATION

#### 1) National / local response and involvement

**Syria:** The ability and willingness of public authorities to deliver public services is limited and biased, while outside Government-controlled areas line ministries are almost entirely absent. Humanitarian action is mainly implemented by over 200 national NGOs partnering with the UN and INGOs. National NGOs' capacities vary across the country. INGOs operating from Damascus continue to be subjected to administrative limitations in partnering with local actors. Their access remains limited and is subject to delays and denial by the authorities. In the Northwest, humanitarian assistance is provided by UN

<sup>&</sup>lt;sup>36</sup> VASyR 2021.

<sup>&</sup>lt;sup>37</sup> UNHCR VAF, July 2022.

agencies and INGOs via local organisations and continues to be subject to intense politicisation and access constraints in the context of the relevant UNSC resolution on cross-border assistance. Assistance is provided under close control by local authorities and subject to continued constraints. In the Northeast, the response relies on international/local NGOs operating cross-border from Iraq, and on the UN/NGOs operating crossline from Damascus, with challenges particularly related to the security context.

**Lebanon:** The lack of a functioning Government and development of the public sector has resulted in an inability to service the needs of the population. Given the depth of the crises, the government will face challenges to introduce the necessary reforms to build up capacity and address these needs. Lebanon has an active civil society and an extensive network of national NGOs. To capitalise on local actors' outreach, meaningful partnerships and complementarities with international NGOs and community networks is essential.

**Jordan**: The multi-year Jordan Response Plan (JRP) led by the government is the only national comprehensive plan through which the international community provides financial support for the short- to mid-term response for both refugees and vulnerable Jordanians and for coordination between government and more than 150 national and international partners. The Jordan National NGOs Forum (JONAF) regroups more than 40 Civil Society and Community Based Organisations involved in the humanitarian response and development efforts. JONAF representatives attend the Jordan Strategic Humanitarian Committee (JoSH).

### 2) International Humanitarian Response

Syria: The Whole of Syria (WoS) coordination architecture is composed of the Resident/Humanitarian Coordinator in Damascus, the Regional Humanitarian Coordinator in Amman, and the Deputy Regional Humanitarian Coordinator in Gaziantep. Its objective is to ensure a coherent, efficient, and cost-effective multi-sectoral response in Syria, through direct, crossline and cross-border assistance. The main coordination fora (Humanitarian Country Team in Damascus, Humanitarian Liaison Group in Gaziantep, and Syria Strategic Group in Amman) regularly engage with the donor community through post-meeting briefings and ad-hoc discussions via the Syrian Donors Working Group (SYDWG). Similarly, clusters and sectors provide regular updates to donors. In addition, NGO coordination platforms exist in each operational hub and play a key role in terms of response, coordination, advocacy, and access. The yearly published Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) provide a comprehensive and consolidated analysis of the impact of the humanitarian crisis in Syria and constitute the key reference documents for humanitarian actors. DG ECHO has been at the forefront of supporting the coordination of the response in Syria and will continue to support all existing fora and platforms to ensure an effective, coordinated, 'Whole of Syria' response.

#### In neighbouring countries

The Regional Refugee and Resilience Plan (3RP), developed under the leadership of national authorities, aims to strengthen the protection, humanitarian assistance and resilience of affected populations. It integrates and is aligned with existing national plans, including the Jordan Response Plan (JRP) and the Lebanon Crisis Response Plan (LCRP) and country chapters in Egypt, Turkey, and Iraq. The UNHCR leads the inter-agency

coordination for the Syrian Refugee Response, while UNRWA is responsible for the coordination of the assistance to Palestine Refugees in Syria (PRS). Despite the existence of coordination fora, the response remains fragmented.

**Lebanon**: The humanitarian response is led by the UNHC/RC, supported by OCHA, and overseen by the Humanitarian Country Team (HCT). It includes representatives from the UN, the Red Cross/Red Crescent Movement, donors, and the NGO platforms LHIF (Lebanon Humanitarian INGOs Forum) and LHDF (Lebanon Humanitarian and Development NGOs Forum). Two response plans are in place: the Lebanon Crisis Response Plan (LCRP), targeting Syrian refugees and host communities, and the Emergency Response Plan (ERP), targeting vulnerable Lebanese, migrants, and Palestinian refugees. Sectoral working groups are merged where possible and joint assessments and analyses are planned to streamline data and response. Policy works and coordination is ensured with the Lebanon Reform, Recovery & Reconstruction Framework (3RF) addressing the consequences of the Beirut Port blast, ensuring policy formulation that benefits a "Whole of Lebanon" crisis response.

**Jordan:** The overall humanitarian response is under the supervision of the UNHCR Representative in coordination with the RC. The main coordination forum is the Jordan Strategic Humanitarian Committee (JoSH), chaired by the UNHCR Country Representative. A Humanitarian Donor Group (HDG) aims at facilitating the coordination between all donors and is linking up with the JoSH. The Jordan INGO Forum (JIF) brings together over 50 INGOs, representing them in the main coordination fora and exercising an advocacy role.

Donor contributions to humanitarian programmes amounted to:

- For Syria, the Humanitarian Response Plan (HRP) received USD 2.03 billion, or 45.8% of its funding requirements (as of 16 November 2022).
- The LCRP 2022, requiring UDS 3.2 billion, received USD 1.1 billion, or 34% of its funding requirements (as of 7 November 2022).
- The JRP 2020-2022 appeal was released in June 2020 with an estimated requirement of USD 2.28 billion for 2022. It has so far received USD 316.5 million, or 13.9% of its funding requirements (as of 30 September 2022).
- The Regional Refugee and Resilience Plan (3RP) has received USD 608.1 million, or 10% of its USD 6.08 billion funding requirements.<sup>38</sup>

The EU is the leading donor in the international response to the Syria crisis and has maintained leadership in advocating for a lasting solution to the conflict and an effective response to the massive needs in Syria and across the whole region Together with its Member States, the EU has mobilised more than EUR 27.4 billion in humanitarian, development, economic and stabilisation assistance since the beginning of the crisis. Of this amount, the European Commission/DG ECHO has allocated more than EUR 3.7 billion in humanitarian aid to Syrians and vulnerable host communities inside Syria and the region, including close to EUR 1.4 billion inside Syria, EUR 800 million in Lebanon and EUR 405 million in Jordan.

<sup>&</sup>lt;sup>38</sup> Syria Refugee Response and Resilience Plan (3RP) 2021 | Financial Tracking Service (unocha.org).

In May 2022, the EU hosted the sixth Brussels Conference on Supporting the Future of Syria and the Region, which resulted in pledges amounting to EUR 4.1 billion for 2022, and multi-year pledges of EUR 2.3 billion for 2023 and beyond.

# 3) **Operational constraints** *in terms of:*

i.) Access/humanitarian space:

Syria: Concerns regarding the lack or the denial of access, International Humanitarian Law (IHL) violations, protection of humanitarian workers and duty of care are common in all parts of Syria. Frequent cases of aid-interference and restrictions of humanitarian access continue being reported across the country. In Government-controlled areas, military operations and administrative requirements continue to limit movements of humanitarian actors and their capacity to implement activities independently. 'Cross-line' delivery of assistance from Damascus to Northern Syria is increasing but remains marginal. In Northwest Syria, insecurity continues to hamper access considerably. Continued negotiation is required to ensure the respect of humanitarian space, as remote management and implementation via national actors remain the only modality of delivery. NGOs conducting cross-border operations also continue to face scrutiny and administrative impediments, while the principle of cross-border assistance remains overly politicised. In the Northeast, the multiplication of active frontlines and armed groups, including the Islamic State group (ISg), affect the implementation of humanitarian assistance. Solid risk mitigation measures, including third party monitoring, risk management plans and the early identification of both risks and response strategies, must be promoted by all humanitarian organisations and partners. DG ECHO benefits from its presence in all hubs including its permanent field presence in Government-controlled areas, and frequent monitoring missions.

**Lebanon**: The security situation is extremely fragile, with widespread social unrest, volatility in Palestinian camps, and in informal tented settlement (ITS) areas. The restrictive regulatory framework, including the suspension of UNHCR registration of refugees in 2015, is reducing access to legal residency. Restrictive border entry for Syrians and increased trends of evictions, raids and demolitions contribute to limiting the effectiveness of the response. UN non-accessibility to the border leads to a gap in data on cross-border movements. Perception of aid bias towards refugees as well as difficulties in accessing fuel is further affecting humanitarian movements, the provision of essential health and water services, and supply chains.

**Jordan:** Due to the closure of the Jordanian-Syria border, there is no humanitarian access to the population stranded in Rukban/the 'Berm' area, where about 7 500 people are still displaced with little or no access to the most basic assistance.

ii) Partners (presence, capacity), including absorption capacity on the ground:

**Syria:** While frequent and unpredictable administrative, access and operational limitations have contributed to reducing the effectiveness of the response, there is generally a good absorption capacity of partners in most humanitarian sectors. 28 INGOs are registered in Damascus, in addition to Red Cross and Red Crescent Societies, a high number of local NGOs and most UN agencies. In Northwest Syria, cross-border assistance continues to be provided by UN agencies and NGOs based in Turkey, working through more than 200

Syrian NGOs/CSOs through remote management, which requires stringent risk management. Implementation through and support to local organisations (including capacity-building) actively contributes to the localisation agenda and to ensuring a timely and effective response. In Northeast Syria, humanitarian actors have an established presence in Raqqa, Aleppo, Deir Ez Zor, and Hassakeh Governorates. Assistance is provided by NGOs operating cross-border from Iraq and by UN and NGOs operating from Damascus.

**Lebanon and Jordan:** There is a large presence of international organisations in Lebanon and Jordan, in addition to a stable civil society and NGO presence.

iii) Other:

**Syria:** While the different operational areas and hubs significantly differ in terms of implementation modalities, the risk of instrumentalisation of humanitarian assistance and aid diversion exist in all parts of Syria.

Northwest Syria is one of the most challenging and risky environments for the delivery of assistance due to the presence of various Armed Non-State Actors (ANSAs) and the overwhelming humanitarian needs in all sectors. The widespread insecurity has driven humanitarian operations to be implemented predominantly through remote management. Under this modality, UN agencies and INGOs work with local implementing partners as the most viable way to deliver assistance to an extremely vulnerable population that is heavily concentrated at the Turkish border. Risk management policies, practices, protocols, and tools such as third-party monitoring, risk management plans and the early identification of risks and response strategies, are well-developed in Northwest Syria and there is an important level of scrutiny of humanitarian operations by donors, the UN and INGOs. In the Northeast, humanitarian actors are facing multiple challenges due to unreliable access, increased insecurity, frequent outbreaks of armed violence, and direct attack on facilities, and the constant threat of large-scale military operations. The main constraint for humanitarian assistance in Government-controlled areas is the limited choice of partners due to the NGO registration system that are to a significant extent entrusted by the Government to the Syrian Arab Red Crescent and the Syria Trust for Development. While the risk of instrumentalisation of humanitarian assistance cannot be excluded, control mechanisms as well as risk analysis and risk mitigation policies and measures have been established. The volatility of the exchange rate, the gap between official and informal rates, and issues and delays in the transfer of funds to Syria represent additional constraints to humanitarian partners operating in Syria.

The multitude of armed groups in control of territory, as well as the international sanctions against the Syrian Government, pose additional challenges for humanitarian logistics. While the border-crossing points to Jordan have re-opened at the end of 2021, insecurity in Southern Syria does not allow a scaling up of deliveries through this transit route. Delays in supply chains and increased costs for operating in the ports of Tartous, Latakia and in Mersin is affecting supply lines of humanitarian partners on food and non-food items delivery. Cross-border access to Northeast Syria is depending on one single informal border crossing while crossline access by road is at times limited due to insecurity. Access to Northwest Syria is reduced to the crossing point of Bab al-Hawa, in accordance with the UN Security Council Resolution 2642.

**Lebanon**: Rampant inflation risks eroding the value of external assistance, leading to an increasing 'dollarisation' of assistance. Inflation, increasing fuel prices and the global

impact of Russia's war of aggression against Ukraine affect local and international supply chains utilised by humanitarian partners. Heavy dependence on fossil fuels needs to be reduced, including through investment in greener solutions.

**Jordan**: Long processes to obtain approvals from the Ministry of Planning and International Cooperation (MoPIC) negatively affect the timeliness of the humanitarian response. Additional bureaucratic impediments, such as the Defense Law Order 6, limit operational capacities of INGOs.

### 4. HUMANITARIAN – DEVELOPMENT – PEACE NEXUS

**Syria:** Investments of development actors in longer-term support continue to face significant constraints and challenges inside Syria. Opportunities for stronger synergies and coordination have been identified with other EU instruments (notably with DG NEAR and the Service for Foreign Policy Instruments (FPI)) in targeted sectors and areas, notably in Northeast and Northwest Syria. Relevant sectors include food security and livelihoods, health, (from emergency care/trauma to technical support and capacity-building), WASH, mine-action, including mine mapping, removal and risk education, and Education in Emergencies. In these sectors, existing needs remain largely under-funded and further coordination, with a particular emphasis on resilience and early recovery, will be promoted across donors and instruments, in line with the Strategic Objective 3 of the HRP 2022-2023, and with a view to further promoting a coherent and integrated response between instruments.

**Lebanon:** The Joint Humanitarian-Development Framework (JHDF) governs the coordination and cooperation modalities of DG ECHO and other EU services, defines pathways to align and/or integrate programming into national frameworks and identifies durable solutions. Following the 2020 Beirut Port explosion, the EU achieved further synergies with actors such as the World Bank. After a Rapid Damage and Needs Assessment (RDNA), a recovery plan (3RF) and an associated governance structure were set-up under the auspices of the EU, the World Bank, and the UN. The 3RF builds on humanitarian interventions that were scaled down accordingly. A coordinated approach to addressing the needs of vulnerable Lebanese should be ensured, always considering that additional humanitarian funds are meant to be time-bound and cannot alone provide a sustainable solution to the current situation. An agreement with the International Monetary Fund and the implementation of economic reforms are essential to trigger the necessary larger involvement from development donors, which will facilitate the envisaged exit strategy for humanitarian actors.

DG ECHO supports Multi-Purpose Cash Assistance (MPCA) to address the needs of Syrian refugees. DG NEAR supports cash and food assistance for refugees and vulnerable Lebanese and is working towards social protection for vulnerable Lebanese. In view of the rise in extreme poverty, DG ECHO will focus its advocacy on an expansion of cash assistance by donors until solid and sustainable government systems are put in place and socio-economic conditions have improved.

In the education sector, DG ECHO facilitates access to quality education for Syrian refugees through the provision of non-formal education (NFE) and improving pathways towards the formal education system, the latter being substantially supported by DG NEAR. The Ministry of Education and Higher Education launched a 5-year strategy including NFE, and DG ECHO will focus on strengthening NFE models until the system reaches maturity.

DG ECHO addresses gaps in the health sector, providing for a minimum of continuity of care with a special focus on hospitalisation and (access to) Sexual and Reproductive Health programming integrated in protection programming. Activities are time-bound and linked to capacity building. Emergency interventions may continue to be adopted if needed, while DG NEAR continues to provide long-term Primary Health Care (PHC) support under the auspices of the Ministry of Health.

**Jordan:** A Joint Humanitarian-Development Framework (JHDF) co-led by DG NEAR, DG ECHO and the EEAS is in place, providing joint analysis and priorities for EU funding instruments. The process, reviewed every two years, establishes a division of labour within the main sectors of intervention (health, WASH, education, protection, and rule of law, social protection, and livelihoods), and is exploring a further transitioning from humanitarian to development interventions of relevant segments of these sectors.

In the education sector DG ECHO will continue focussing its support increasingly on refugee camps, whereas transition from DG ECHO out-of-camp supported actions towards longer term actors, including other EU instruments but also USAID and national ministries, will be prioritised.

In the health sector, the last JHDF review has reasserted the existing division of labour between DG ECHO (primary health care as well as sexual and reproductive health care services in refugee camps) and DG NEAR (support to PHC and activities related to non-communicable diseases). DG ECHO will continue to advocate for further progress regarding the discussions with the Ministry of Health, with the objective to allow for the transitioning of services supported at camp level, such as the clinics funded by DG ECHO in Azraq and Zaatari camps, to the state health system.

In the protection sector, DG NEAR has engaged with AECID and GIZ in a 40-month EU funded action aiming at improving access to comprehensive gender-sensitive prevention and protection services for refugees and host communities in Jordan. DG ECHO will seek complementarities with its ongoing support for INGOs providing SGBV protection services, to prepare an eventual transition of relevant activities to longer-term donors.

# 5. ENVISAGED DG ECHO RESPONSE AND EXPECTED RESULTS OF HUMANITARIAN AID INTERVENTIONS

# **5.1 Envisaged DG ECHO response**

**Syria:** DG ECHO's response will be implemented based on the EU Strategy for Syria.<sup>39</sup> DG ECHO will continue to primarily focus on responding to life-saving emergency needs and protection concerns of the most vulnerable. Support will also be provided to meet protracted needs with the objective to reach basic minimum standards and/or to those at risk of life-threatening situations, improving humanitarian outcome and promoting early recovery. DG ECHO will support activities that respond to specific shocks and needs with primary needs assessments and beneficiary targeting. Assistance must be delivered through the most appropriate modalities and entry points, in a timely and principled manner, ensuring the provision of an integrated and flexible life-saving response and a

<sup>&</sup>lt;sup>39</sup> EU strategy for Syria: Reinforcing efforts to bring peace (2017).

coordinated multi-sectoral life-sustaining response according to the needs. Where necessary, DG ECHO will support logistics operations, such as temporary common storage, free-to-user transhipment services, coordinated procurement and air transport, with the aim to support and improve the delivery of principled humanitarian aid including for areas with limited humanitarian access.

The strategy will apply to all operational hubs, in line with the Whole of Syria (WoS) approach, which DG ECHO will continue to support. Wherever possible and appropriate, DG ECHO will also look at supporting resilience-oriented activities in coordination with other EU instruments, in line with the Strategic Objective 3 of the Humanitarian Response Plan. Early recovery is one of the available humanitarian response modalities and it is to be implemented in line with humanitarian principles and IHL. Synergies across early recovery and emergency response should be identified and strengthened.

In line with the needs identified above, DG ECHO's strategy will prioritise the following key sectors and activities:

- Emergency response and preparedness/DRR and First Line Emergency Response (FLER): The FLER approach aims at providing a localised, timely, flexible, targeted, and multi-sectoral response to urgent and emerging needs in the aftermath of a rapid onset crisis. In some specific contexts, the Crisis Modifier could be considered. Essential elements include contingency plans, prepositioning of stocks, well-defined decision processes and triggers for engagement/disengagement. Innovative access strategies/contingency planning that prioritise continuity and complementarity of services remain the basis of DG ECHO's operational approach.
- Humanitarian Food Assistance, Food Security and Livelihoods (FSL): DG ECHO will consider food security interventions aiming at building an integrated approach from emergency response to early recovery and resilience programmes, particularly through livelihood interventions that could benefit from multi-annual intervention strategies. FSL activities should prioritise the use of cash where feasible and appropriate, in line with DG ECHO policy and duly informed risk management.
- **Health:** Focus on improving access to quality essential health services and timely assistance to war-wounded and victims of violence, including basic and comprehensive primary health care services with management and treatment of malnutrition, trauma and post-operative care, physical rehabilitation, life-saving obstetric and reproductive health, MH/PSS, and treatment of outbreaks such as cholera. Multi-annual intervention strategies could be considered to support the provision of essential services. Mainstreaming COVID-19- activities should be considered.
- **Protection:** Support to vulnerable groups including persons with disabilities and children based on a protection risk assessment; prevention and response to SGBV; Psycho-Social Support (PSS); case management; safe and equal access to services, including evidence-based humanitarian advocacy; protection trends and analysis; access to legal aid and civil documentation, in coordination with other EU instruments. DG ECHO will continue to encourage and support efforts to engage with parties to the conflict to enhance respect for IHL, International Human Rights Law and International Refugee Law, as well as strengthen humanitarian advocacy, to ensure the protection of civilians, including humanitarian workers and health personnel, and of civilian infrastructure, as well as to improve access. Protection will also be considered as an essential component to be mainstreamed across all sectors.

• WASH / Shelter: While DG ECHO will continue supporting emergency life-saving responses, the capacity of partners to rapidly transition to more durable life-sustaining interventions will be considered, in coordination with other EU services. In terms of safe water supply, DG ECHO support will encompass community-level light rehabilitation and repair of existing water supply services, including small-scale extension of water systems and operational maintenance, with water trucking remaining a response of last resort. Sanitation (when health risks are demonstrated) and distribution of hygiene kits (in emergency situations, including COVID-19 and cholera) are among the activities that DG ECHO could support. Alternative energy sources for WASH systems (e.g., solar panels, energy-efficient lighting, etc.) and innovative solutions to support provision of water and the continuation of essential services could also be considered. Multi-annual intervention strategies could be considered to support the provision of essential services in this sector.

With regards to **Shelter** (including winterisation and NFIs), emergency interventions will be prioritised, with balanced approach between in- and out-of-camp settings. Rapid, cost-efficient, light repairs of individual buildings, including heat insulation measures where feasible and appropriate, aiming at accommodating the most vulnerable could also be considered. HLP considerations should be factored in.

• Education in Emergencies: DG ECHO will continue to support non-formal education for out-of-school children and children already enrolled in formal education but at risk of dropping out, and to ensure safe and effective access to schools, with the aim to provide the most relevant pathways to enter, re-enter and stay in formal education. Multi-annual strategic interventions will be favoured. Related actions such as light repairs of school facilities, the rehabilitation of basic WASH services as well as provision of hygiene supplies, the provision of learning materials and supplies, or the training of teachers involved in non-formal education activities will also be considered, provided they contribute to reintegration and effective access of children to education. Child protection activities should form an integral part of relevant projects. Multi-annual intervention strategies could be considered to support the provision of essential services in this sector.

**Lebanon:** DG ECHO will support life-saving interventions targeting the most vulnerable at-risk populations in Lebanon, notably Syrian refugees, and Lebanese, explicitly promoting models aimed at enhancing efficiency, effectiveness and accountability of the humanitarian response and coordination. The provision of assistance will be done in an integrated manner, and be provided solely based on needs, considering that overall, Syrian refugees still show the highest vulnerability levels.

Protection, prevention of sexual exploitation and abuse (PSEA), accountability to affected populations (AAP), conflict-sensitive programming/ "do no harm", and project "greening" should be mainstreamed.

Multi-annual intervention strategies could be considered to support the provision of essential services in the following sectors:

- **Basic Assistance**: Addressing the needs, including food security, of people living below survival thresholds. Extremely vulnerable populations will be targeted with the intention to provide services in line with needs ('cash plus') and to integrate them into longer-term assistance schemes.
- **Protection**: Protection monitoring and identifying protection risks, improved access to quality services, SGBV, child protection, legal assistance, and psycho-social support.

- Emergency response / disaster preparedness: Support to emergency response and preparedness; build humanitarian surveillance and response capacity; strengthen contingency planning including through crisis modifiers for medium-scale emergencies.
- Education in Emergencies: Access to inclusive quality education targeting vulnerable out-of-school children in line with relevant regulatory frameworks, with a focus on non-formal education with clear learning outcomes and pathways to the formal education sector.
- **Health:** Life-saving health interventions and continuum of care encompassing access to health services and medication at a primary level and hospital services at a secondary/tertiary level, timely access to chronic disease medication/treatment and hospitalisation, surveillance, integrated protection, sexual and reproductive health, promotion of innovative programming addressing (financial) access, human resources for health, community-based initiatives, and outreach. Outbreak response could also be envisaged if relevant.
- Analysis & Advocacy: Support to identifying critical structural and programmatic gaps in the response; enhancing evidenced-based analysis for programming and advocacy.
- **Coordination**: Support to integrated coordination, enhancing the accountability towards affected populations, and improving access to services/referral systems.

**Jordan**: DG ECHO will continue providing humanitarian assistance to undocumented and unregistered refugees, to the most vulnerable within host communities, persons stranded in border areas and refugees living in camps. As per GoJ regulations, humanitarian actors are required to include up to 30% of most vulnerable Jordanians within their interventions. This approach will continue to be coordinated with other EU instruments. DG ECHO, with the support of the EU Delegation, will continue to advocate with the Ministry of Planning and International Cooperation to accelerate the approval process of DG ECHOfunded projects. Protection will remain a crosscutting component across all sectors and project "greening" should be mainstreamed. DG ECHO support will focus on:

- **Health**: Advocating for continued access to health services for refugees in camps or host communities, and for re-establishment of access to health services for those stranded in Rukban/the 'Berm'. Support will mostly focus on critical interventions and reproductive health care, with a priority on services within camps.
- **Protection:** Promotion of IHL, provision of legal assistance, including support for documentation and enhancing the protection environment for the most vulnerable. Multi-annual intervention strategies could be considered to support the provision of essential services in this sector.
- Education in Emergencies: Activities that enable safe access to quality education, targeting out of school children and children at risk of dropping out, potentially including support to relevant coordination.
- **WASH and Coordination** activities might also be considered, specifically in response to emergencies or increased humanitarian needs.

# **5.2 Other DG ECHO interventions**

The Emergency Toolbox HIP may be drawn upon for the prevention of, and response to, outbreaks of epidemics. Under the Emergency Toolbox HIP, the Small-Scale Response, Acute Large Emergency Response Tool (ALERT) and Disaster Relief Emergency Fund (DREF) instruments may also provide funding options.

In view of the importance of logistics for humanitarian operations, DG ECHO remains also committed to contribute to logistics operations, via funding or any other tool, such as the European Humanitarian Response Capacity (EHRC), at its disposal. The European EHRC is a global initiative, aiming at supporting the delivery of humanitarian assistance with a gap-filling approach. Under the EHRC the Commission has at its disposal several tools that can be activated in case of sudden onset disasters, e.g., a series of Common Logistics Services (including air operations, warehousing services, last-mile ground transportation, etc.), and a stockpile of emergency WASH and shelter items to be prepositioned in regional warehouses worldwide.