This revised Emergency Appeal seeks a total of **30.8 million Swiss francs** to support the Syrian Arab Red Crescent to continue providing **life-saving assistance that meets the critical humanitarian needs of more than one million vulnerable people in 2021** - including food distributions for more than **60,000 households**, emergency household items support for **30,000 households**, winter support for **30,000 children**, income generation support for **33,000 households**. The operation will also support **450,000 people** to access health care services and hygiene promotion interventions.

This revision increases the overall Appeal funding requirement to **208.9 million Swiss francs** for the period of July 2012 to December 2021, of which **184.1 million Swiss francs** have been received (between July 2012 to October 2020). Out of the total funds received: a total expenditure of **178.1 million Swiss francs** has been registered (until October 2020) and approximately **6 million Swiss francs** will be carried forward to 2021, leaving a **funding gap of 24.8 million Swiss francs** and an extended timeframe until 31 December 2021. Funding is very urgently needed to honour Appeal commitments and support an additional one million people taking into consideration the evolving humanitarian situation in Syria and changes in the operational context due to the COVID-19 outbreak.

This revised Emergency Appeal (EA) is one of two complementary planning tools, the other being the Syria Crisis Country Plan (SCCP) which will essentially mirror the EA. The One Plan and Budget approach will enable SARC to continue providing essential services when and where needed throughout Syria. While ensuring the gradual migration of the EA to support the strategic priorities of SARC, the SCCP will accommodate new incoming resources and pledges for 2021. It takes into account the coordinated interventions of the International Red Cross and Red Crescent Movement (the Movement), including the International Committee of the Red Cross (ICRC) and Partner National Societies (PNSs) active in Syria.

**“TO THE ATTENTION OF PARTNERS AND DONORS SUPPORTING IFRC’S RESPONSE TO THE CRISIS IN SYRIA”**

Starting from 1 January 2021, the [Syria Crisis Country Plan 2021 MAASY002 (SCCP)](https://www.ifrc.org/docserver/20210127_SyriaCrisisCountryPlan2021MAASY002_0.pdf?expires=1615781119&node=487&无所发现) became the working platform for all IFRC’s humanitarian interventions in the country. This internal technical decision is based on the Syrian Arab Red Crescent (SARC)/IFRC “One Plan and One Budget” approach. This modality has been announced in the [Syria Complex Emergency Appeal Operational Update n17/17 Nov 2020](https://www.ifrc.org/docserver/20201117_ra_update_complex_syr2020_enforcement.pdf?expires=1615781119&node=487&无所发现) and presented to the in-country partners in several meetings. As the needs of Syrian people are greater in 2021 than ever before the SCCP/MAASY002 mirrors and encompasses all the activities usually presented under this Emergency Appeal/MDRSY003. As such, emergency interventions, as well as resilience, focused activities are addressed in a more coherent way and are well-coordinated with all Movement actors. The SCCP/MAASY002 will exclusively accommodate all incoming contributions for 2021 and onwards. Hence, partners and donors are recommended to access this link [Syria Crisis Country Plan 2021 MAASY002 (SCCP)](https://www.ifrc.org/docserver/20210127_SyriaCrisisCountryPlan2021MAASY002_0.pdf?expires=1615781119&node=487&无所发现).

The Syria Crisis Emergency Appeal (MDRSY003) remains open until 31 December 2021 only to allow for an orderly expenditure of remaining resources and closure, including final narrative and financial reporting by 31 March 2022. This practical decision is also consistent with IFRC’s [Agenda for Renewal](https://www.ifrc.org/docserver/20210127_IFRC-Agenda-for-Renewal-Full-Implementation-Plan.pdf?expires=1615781119&node=487&无所发现). Please contact Adam.haydar@ifrc.org for further information.
The crisis and the Red Cross Red Crescent response to date

- July 2012: Emergency Appeal is launched to support SARC to assist over 200,000 people.
- December 2012: The Emergency Appeal is revised to help SARC to assist up to 650,000 people.
- July 2013: The Emergency Appeal is revised to support SARC to reach up to 910,000 people. People in need reach 6 million.
- November 2013: The Emergency Appeal is revised to support SARC to reach up to 5 million people. People in need reach 9 million.
- December 2014: The Emergency Appeal is revised to support SARC reach up to 8 million people. People in need reach 12 million.
- May 2016: The Emergency Appeal is revised to support SARC in reaching 3 million people in 2016. People in need reach 13 million.
- December 2016: The Emergency Appeal is revised to support SARC in reaching 3 million people in 2017.
- December 2017: The Emergency Appeal is extended until December 2018.
- April 2018: The Emergency Appeal is revised to support SARC in reaching 3 million people in 2018 and respond to new emergencies in Eastern Ghouta and North Aleppo.
- November 2019: The Emergency Appeal is revised and extended until December 2020.
- December 2020: The Emergency Appeal is revised and extended until December 2021 to meet the unmet needs (complementary to OP 2021)

SARC offers a broad range of services to conflict affected communities including relief, livelihoods, health, WASH and protection. Photo: SARC
## Summary of Red Cross Red Crescent Response to date

![Map of the Middle East showing areas affected by the response.](image)

A SARC volunteer, distributing relief items supported through IFRC appeal in the southern Hassakeh. *Photo: SARC*

<table>
<thead>
<tr>
<th>People reached through IFRC Appeal</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020(^1)</th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population Reached - Shelter</td>
<td>15,000</td>
<td>40,000</td>
<td>50,000</td>
<td>520,000</td>
<td>214,000</td>
<td>296,000</td>
<td>479,122</td>
<td>148,092</td>
<td>94,006</td>
<td>1,856,220</td>
</tr>
<tr>
<td>Population Reached - Livelihoods</td>
<td>194,000</td>
<td>794,294</td>
<td>1,159,683</td>
<td>1,121,705</td>
<td>1,250,000</td>
<td>408,080</td>
<td>566,948</td>
<td>553,163</td>
<td>272,683</td>
<td>6,320,556</td>
</tr>
<tr>
<td>Population Reached - Health</td>
<td>138,601</td>
<td>374,199</td>
<td>345,821</td>
<td>750,000</td>
<td>596,197</td>
<td>400,000</td>
<td>630,000</td>
<td>1,362,814</td>
<td>556,021</td>
<td>5,153,653</td>
</tr>
<tr>
<td>Population Reached - WASH</td>
<td>109,410</td>
<td>814,740</td>
<td>338,086</td>
<td>535,000</td>
<td>570,000</td>
<td>330,000</td>
<td>152,862</td>
<td>227,735</td>
<td>20,807</td>
<td>3,098,640</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>457,011</td>
<td>2,023,233</td>
<td>1,893,590</td>
<td>2,926,705</td>
<td>2,630,197</td>
<td>1,434,080</td>
<td>1,828,932</td>
<td>2,291,804</td>
<td>943,517</td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) People supported through IFRC Emergency Appeal for 2020 covers period from January 2020 to September 2020.
Average number of people annually reached through the IFRC Appeal
From 2012-2020
1.8 Million
The Syrian Arab Red Crescent (SARC)
SARC continues to be the main humanitarian actor in Syria. Through its network of staff, volunteers and with SARC’s assigned coordination mandate and its presence across most of the country, it is currently the largest national provider of humanitarian services in Syria. SARC works closely with local communities providing humanitarian assistance to more than 6.5 million internally displaced people, affected host communities and returnees every year and 13 million people in need for 2021. SARC is the main national facilitator to international humanitarian assistance, with formal coordination and cooperation with 29 partners between the International Red Cross Red Crescent Movement, UN agencies and international non-governmental organisations. This assistance is based around the provision of food and household items for shelter, hygiene items and hardware. SARC also provides medical and health care services through more than 200 health facilities. In addition, SARC’s water projects provide services to close to 80 per cent of people in Syria.

SARC delivers food support, both from emergency food distributions, convoys, and regular distributions to more than 5M people per year.

80% of people in Syria gained access to clean water and sanitation through water projects supported by SARC.

In 2020, SARC launched COVID-19 response plan for Syria and ensured PPE kits for staff and volunteers as well as responded to the wildfire in Latakia, Tartous & Homs through DREF. This was also supported by IFRC and partners from within the Movement and outside.

In 2020, SARC continued its support to vulnerable returnees in North-East Syria as well as in Aleppo, Daara, Idlib and Rukban. SARC volunteers from these areas keep ongoing actions including food distribution, household items, livelihoods inputs & hygiene items distribution, and psychosocial support activities.

To date 65 SARC staff and volunteers have lost their lives in the line of duty, as well as 8 volunteers from the Palestinian Red Crescent Society (PRCS).

SARC keeps an emergency response operation to support people from Rukban Camp, providing relief and health services in the humanitarian corridor and in the five makeshift shelters. SARC also activated shelters to receive people from the evacuation and provide further assistance.

SARC delivers essential household items, during emergency response, regular distributions and for winter response to more than 5M people per year.

More than 1M people receive medical consultations, medications, treatment, and emergency health services from SARC health facilities every year.
Situation Update

Syria is entering the 10th year of the crisis which has devastated the country compounded by multiple displacements of people, with hunger reaching record levels and increasing inter-factional fighting. The worsening economic crisis is deepening the poverty and pushing more Syrians into humanitarian needs. According to the latest Global Humanitarian Overview 2021 report, 13 million people are in need of humanitarian assistance in Syria. Throughout 2020, we have witnessed the evolution of the Syria crisis in all its complexity. While in some locations there is increasing stability and an end to the prolonged crisis and with the changing economic circumstances, there is still a need for continued programming that meets the immediate need of people affected by the crisis, particularly in the north surrounding Idlib, with rural Aleppo and Al Raqq and the North East (Hasaka) down the Euphrates to Dier Ez-Zour, where tens of thousands of people, many of whom are women and children are fleeing their homes in search of safety. The south of the country surrounding Darraa has especially seen a worsening security situation for people already suffering from nearly 10 years of crisis. The World Food Programme (WFP) has reported that in Darra Governorate, with a population of some one million people, 41 per cent are food insecure and over a third of the population are returnees.

This continued insecurity in 2020 has been further impacted by economic factors including the ongoing complex and deteriorating economic situation in neighboring Lebanon, the effects of the COVID-19 pandemic and the tightening of sanctions. In addition to that, it is estimated that the wildfire incidents in October 2020 burned more than 30,000 hectares of agricultural and forest land across the coastal region of Syria, affecting at least 100,000 people (19,000 families) through the destruction and damage to homes and livelihoods assets, loss of power and water supply. The current socio-economic situation represents some of the most challenging humanitarian conditions experienced in the past 10 years. As always, SARC continues to respond to immediate needs with emergency relief supported by the Red Cross Red Crescent Movement and alongside INGOs and UN partners. At the time of writing (December 2020), the events underway in the North of Syria are being supported by cross border operations but SARC stands by to activate cross lines support. IFRC is monitoring daily and planning alongside SARC to ensure priority services are delivered to the most affected communities.

The outbreak of COVID-19 and the resulting lockdown for several months impacted Syrian people severely, with movement restrictions, increasing prices, job losses, difficulties in accessing basic services such as business, education and health care. Though not entirely blocked, humanitarian activities suffered delays further affecting those in need of assistance. International delegates were stranded around the world striving to provide support virtually in a country where direct physical contact is essential to conducting effective business. In the words of Syrians “we have three choices: dying because of crisis, economic sanctions or the Coronavirus”. In this context, only partial lockdowns were maintained to stem specific flareups and life resumed. The IFRC was quick in taking a number of steps that enabled SARC to conduct its work. Financial resources were successfully transferred into the country. Procurement of personal protective equipment (PPE) was conducted locally thus limiting international transportation delays. Hence, SARC could adapt to the new threats, resume key activities and catch up with some of the delays. Instead of the usual large groups, food distributions were made to smaller groups and even door-to-door. This resulted in increased logistics costs, but a safer environment for volunteers and the population alike. All ambulance emergency calls were treated as potential COVID risks and measures were taken to protect SARC’s first responders. In addition to the five million people assisted by SARC annually, more than two million people received COVID-19 related response support. With Syria still lacking the capacity and resources to conduct large scale testing and intensive care, the threats of Covid-19 will remain for the months to come.

With no political solution to the Syrian crisis in sight, resources and support for humanitarian work in Syria are steadily diminishing. During 2020, SARC, the IFRC Secretariat and indeed the whole Red Cross Red Crescent Movement conducted intense humanitarian diplomacy and advocacy efforts. In July 2020, the IFRC President and SARC Secretary General (SG) addressed the Brussels EU/UN Syria conference while in November, the SARC SG had the opportunity to address a session of the UN Security Council highlighting the negative impact on Syrian civilians and the work of

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2 [https://reliefweb.int/sites/reliefweb.int/files/resources/GHO-2021-Abridged-EN.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/GHO-2021-Abridged-EN.pdf)
SARC. March 2021 will mark 10 years since the beginning of the Syrian crisis. This provides an opportunity for the Movement to further impress upon governments the urgency of reaching a lasting political solution to the crisis as well as the importance of continuing the support of principled, impartial and neutral humanitarian work in Syria. "Needs have deepened", is how humanitarian actors working within Syria describe the current situation. People in Syria continue to suffer from increasingly localized, intensified hostilities that uproot families from their homes, claim civilian lives, damage and destroy basic infrastructure, and limit freedom of movement. Almost 40 per cent of Governorates of Aleppo, Rural Damascus, Idleb, Al Raqqa, Homs, Al Hasakah, Hama, and Dara are expected to host most of the returnees, the majority of IDPs in the north-west and north east Syria. Contested areas are vast with large populations and the threat of armed crisis has not disappeared, ambushes, sniper and similar ad-hoc, improvised explosive device (IEDs) are still happening in these areas and people still need urgent assistance.

The WFP has stated that 6.7 million people are internally displaced, with 9.3 million people food insecure and 2.2 million people at risk of food insecurity1. Food insecurity has deteriorated over the past two years, and people are sliding deeper towards poverty than at any other time during the crisis. Throughout 2020 the situation in Syria remained fluid with growing complexities as a result of the COVID-19 pandemic which has witnessed the evolution of the Syria crisis in all its complexity. The UNDP multi-dimensional indicators estimate that the national poverty rate in Syria is at 38 per cent. Key aggravating factors include a low supply of USD, high inflation, and a rising exchange rate of the Syrian Pound (SYP) to USD – reaching SYP 1,256 per 1 USD in June 2020 and informal SYP/USD exchange rate reached SYP 3,200 per USD. Financial and other impacts of sanctions, especially inflation, raise costs of basic items in the market and for SARC, a large portion of the funding is reduced due to currency exchange losses. Although the informal exchange rate has remained stable until October 2020, it resulted in significant price rises and USD scarcity in the country. With market prices following the informal exchange rate, the consequence is a more than double loss in purchase power for ordinary citizens and humanitarian organizations alike. This also delayed some of the tendering processes in the pipeline and disrupted overall supply chains for various programmes, as contractors were unable to deliver goods and supplies according to framework agreements. Similarly, contractors and suppliers are reluctant to enter longer-term predictable contracts. Furthermore, the significant devaluation of the Syrian Pound compared to 2019 has had a severe impact on the purchasing power of Syrians in general, with a reduced capacity of the households to cover their basic needs, and has left them with limited strategies to cope with the ongoing crisis.

There is still a high risk associated with the ongoing operation in Syria and health needs remain critical with 11.3 million Syrians in need of health assistance2. The security situation and access to areas can change at short notice and frequently during the implementation of activities keeping operations on an emergency footing. The crisis in North-West Syria continues to impact basic life-saving services to civilians. It is therefore mandatory for the humanitarian community to adjust its strategy towards life-saving support while responding to fluid population movements in a context of limited capacities or funding. The healthcare system in Syria has been weakened by the protracted crisis, impacting every aspect of the health system and reducing the capacity of public and private health care sectors to deliver services. Inadequate health financing for health professionals, support systems and supplies continue to contribute towards this critical lack of access. The return of Syrian refugees to Syria as well as increasing movements of IDPs is expected to cause more burden on the existing overstretched service delivery mechanisms and increase the need to provide protection to people and facilities. Governarates of Aleppo, Rural Damascus, Idleb, Al Raqqaa, Homs, Hassakeh, Hama, and Dara are expected to host most of the returnees, the majority of IDPs. According to the latest Needs Assessment by OCHA and cluster reports, reflect that 0.5 million people in these locations will require lifesaving health services.

Describing the crisis needs to be done through the lens of the people affected; this is very much a crisis that impacts people in different ways. Firstly, recognizing the acute needs in areas that are still disputed and engaged in crisis, such as the North of Syria. Secondly, the needs of households within communities that are no longer experiencing fighting but still bear the consequences of 10 years of crisis through damaged infrastructure, blighted economic conditions and prospects. As sanctions can be expected to continue, poverty will remain while food programmes may become unsustainable. This is factored into SARC’s programming for 2021, with the need to progressively move from food aid to livelihoods assistance, and some level of recovery and resilience, as recognised in the SARC’s Strategic Plan 2020-2022. SARC has been responding to the needs of these communities, and the years of crisis have profoundly changed the National Society. In the months and years ahead, the important subject of analysis is what the nature of these changes are, and how SARC should evolve to retain its relevance in Syria. In order to support SARC to continue responding in the most agile and effective way, donors are kindly requested to provide flexible unearmarked funding.

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2 UNHCR Operational Update for Q3 of 2020
Need assessment and targeting

In the areas where crisis is diminished and access to communities improved, SARC’s staff and volunteers will continue to conduct assessments that move beyond geographically based, and more focused on the household or community level, whichever is more appropriate for the type of intervention.

SARC engages in principled programming to reach people based on needs in areas it has access to. In those areas where the crisis does not allow for safe access, or access may be time-limited, SARC’s operations department and volunteers conduct emergency assessments. At the same time, if there is a possibility to enter the area for a short time, rapid assessments are conducted to supplement the information. The assessments are also conducted by direct observation.

Additional programmatic assessments are done through key informant interviews and focus group discussions with families, community leaders and other local organizations. Trained volunteers (e.g. in disaster management or livelihoods) conduct home visits and use a questionnaire to determine vulnerabilities.

The level of vulnerabilities of selected people is also assessed based on their gender, education level, income, the number of children and their health conditions. Also, considering context-specific vulnerabilities in each governorate using core beneficiary selection criteria, such as IDPs and host communities, youth, female-headed households, elderly and people with disabilities, people who lost their homes, access to a source of income, etc. Once selected, the target people receive a distribution card, usually distributed once per year for each family. There are also tailored responses for different situations.

Coordination and partnerships

Founded in 1942, SARC is an independent humanitarian organization in Syria. SARC was recognized by the ICRC in 1946 and it is committed to the Geneva Conventions and the seven Fundamental Principles of the International Movement of Red Cross Red Crescent. SARC, with 14 branches, 64 active sub-branches and 13,762 staff and volunteers has a presence throughout Syria and remains the largest humanitarian organisation in the country. It is also the main national facilitator of all humanitarian assistance.

IFRC has been present in Syria since the mid-1990s with a permanent representation office since 2007. Currently, the IFRC has a dedicated team based in Syria. A regional office in Beirut supports the response operation and capacity building initiatives. The IFRC team in Syria is integrated with SARC to support the National Society from its headquarters and coordinates operational matters with partner National Societies (PNSs) and the ICRC. IFRC will continue supporting SARC’s emergency response as well as the development of its operational capacity, recognizing the unique role that SARC plays by partnering with organisations both inside and outside the Red Cross Red Crescent Movement. IFRC participates as an observer in the Humanitarian Country Team meetings and in technical sector meetings.

IFRC supports SARC in their role as lead agency within the Movement in the implementation of regular monthly coordination meetings. Additionally, there are now Movement coordination meetings for updates on COVID-19. Regular Movement Health Coordination meetings take place, bringing together representatives of SARC, IFRC, ICRC and in-country PNSs, to ensure good sharing of information, joint planning, efficient coordination of resources and aligned strategies related to Movement partners’ support to SARC’s health programme. Also, IFRC’s Global Humanitarian Services and Supply Chain Management has been providing international procurement services to PNS’s through its established supply chain, as well as assisting with the exemptions. As of early 2020, nine PNSs have delegates in Syria and are operating bilaterally under IFRC’s umbrella: the British, Canadian, Danish, French, Finnish, German, Norwegian, Swedish and Swiss Red Cross Societies. The Austrian, Japanese and Netherlands Red Cross engage in support through their regional representations in Beirut. Many others such as the Australian, Icelandic and Irish Red Cross are engaged in multilateral support. IFRC works together with SARC to promote complementarity and cooperation between different PNSs as well as ICRC to deliver urgent humanitarian assistance in Syria. The strategic and operational coordination approach is also articulated in the Operational Plan 2021 for Syria that mirrors the Emergency Plan of Action (EPoA) of the revised Emergency Appeal. In September 2020, IFRC gained legal status in Syria, through the signature of a Status Agreement with the Syrian Arab Republic. Besides a range of security and administrative services, it will further provide IFRC and future integrated PNS delegates with IFRC’s so-called “diplomatic status” offering a clear and solid legal base for their presence in Syria under the IFRC umbrella. Any Integration Agreements between IFRC and PNSs will be crafted in ways not to duplicate or charge for services that are part of SARC/PNS bilateral contracts.
The ICRC has been present in Syria since 1967 and is working as a key operational partner with SARC. The ICRC has five offices in Syria, employing international staff and resident staff. The main areas of support to SARC are emergency assistance, economic security, health (first aid, prosthesis rehabilitation programme, mental health, and primary health clinic), water and habitat, risk education, restoring family links, forensic, promoting humanitarian values and strengthening SARC capacities.

**Overview of other actors in-country**

SARC is working with many international organizations and agencies present in-country\(^5\), such as UN Agencies including UNFPA, UNHCR, UNICEF, WHO, WFP, and INGOs such as Action Against Hunger, ADRA, AVSI, COOPI, Danish Refugee Council, Lutheran World Relief, MEDAIR, Oxfam, Premiere Urgence, Secours Islamique France and Terre des Hommes and Triangle.

Besides functioning as an implementing partner for these organizations, SARC participates in cluster meetings and working groups for health, shelter and household items, livelihoods, information management, among others. Activities conducted are carried out in coordination with local, national and international stakeholders active in the relevant sectors.

**The Operational Strategy**

IFRC launched its emergency appeal in response to the crisis in July 2012, with the aim of mobilising resources to provide SARC with a certain level of flexibility in delivering lifesaving aid to vulnerable communities across Syria, including hard-to-reach areas, as well as enhancing its capacities to deliver this assistance. These resources have complemented the bilateral support that SARC has received from partners, within and outside the Red Cross Red Crescent Movement.

Through this revised Emergency Appeal, the IFRC will continue supporting a flexible humanitarian response and programmes across the country based on one plan and budget approach, recognising the significant response that SARC has mounted with partners from inside and outside the Red Cross Red Crescent Movement. An increased focus will continue to be placed on strengthening the operational and organisational capacities for delivering the services that SARC prioritises based on the criteria of its own mandate and needs of the people. As the context evolves the IFRC will update its collective approach together with the Movement partners to respond to the protracted crisis and anticipating the future role of SARC in the Syrian humanitarian context. The goal is to enable a joint process of migrating from the current emergency platform towards a more comprehensive country plan when the environment is conducive to doing so. At present, the focus remains on the evolving humanitarian situation in the northwest of Syria which is direly driven by hostilities and displacement, with northwest Syria still hosting some 2.7 million displaced people\(^6\). Some 204,000 spontaneous returns were recorded by a UN partner between January to June 2020, mostly in the southern and eastern Idlib areas. The humanitarian situation remains alarming across northwest Syria where the impact of the crisis continues to have a devastating impact on the lives of an estimated 4.1 million people living in the Idlib area and northern Aleppo governorate. As weather conditions deteriorate, the concern is high for the displaced people who lack adequate shelter and basics such as fuel for heating, blankets, warm clothes, and shoes. Although the North remains a highly volatile environment for humanitarian organizations the need for support for the South and indeed for the whole of Syria cannot be underestimated.

The IFRC’s revised Emergency Appeal and the associated Operational Plan aims to support ongoing humanitarian services as well as sustain and increase SARC’s operational and structural capacity for continued and efficient emergency response through technical support. This will be complemented by a longer-term sustainability approach through operational capacity building and organizational development for SARC’s headquarters, branches and sub-branches. ICRC and PNSs will continue to contribute coherent support to SARC across different thematic areas, both programmatically and institutionally, primarily to ensure SARC’s capacity to keep delivering lifesaving assistance. By the end of 2021 IFRC’s ambition is to have a country plan that will establish a stronger foundation for coordination within the Red Cross Red Crescent Movement in the country. This will outline how the IFRC Secretariat and PNSs collectively support SARC in the coming years, collaborating closely with the ICRC, a key SARC long-term partner.

The proposed intervention will capitalize on successful Movement and shared leadership approaches developed during 2020. Several examples include enhanced operational logistics and capacity building with German and Danish Red Cross; cash and food security/livelihoods interventions with British Red Cross expanded and applied from an initial pilot project to the wildfire DREF operation; National Society development (NSD) in an emergency with Danish,\(^\)\(^5\) SARC Annual Report 2019
\(^6\) OCHA, Recent Developments in Northwest Syria, Flash Update-as of 7th August 2020
German and Swedish Red Cross; finance development, essentially a Norwegian Red Cross endeavour where the IFRC facilitated obtaining licenses for software; health with Canadian, Danish, Finnish, French, Swedish and Swiss Red Cross; Swiss and German Red Cross with logistics surge, COVID-19 response, etc.

The IFRC’s security plans – including Covid-19 adapted measures - will apply to all IFRC staff and any future integrated PNS throughout Syria. An area-specific Security Risk Assessment will be conducted for the operational area should any IFRC personnel deploy there: risk mitigation measures will be identified and implemented. This will include security briefings for all IFRC personnel, movement monitoring for field travel and availability of safety equipment. Specific guidance on immediate actions in the event of an attack will be disseminated. Close security coordination with the SARC, ICRC and PNSs will also be observed through regular information-sharing channels.

All SARC staff and volunteers are urged to complete the IFRC Stay Safe e-learning courses, i.e. Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training and Prevention and Response to Sexual Exploitation and Abuse (PSEA) online training. IFRC will coordinate with SARC to identify and support additional safety and security needs. Insurance of volunteers involved in the operation will also be ensured.

Proposed Areas for intervention

The overall objective of this operation has been to respond to the most urgent needs during emergencies and displacements and contribute to improve the resilience of people and communities affected by the crisis in Syria, by enhancing the SARC’s capacity.

This objective remains as relevant now as at any previous stage of the crisis. Over the last few years, SARC’s branches have been conducting numerous essential operational activities with many humanitarian organizations including its Movement partners. The year 2021 heralds a critical phase for SARC, irrespective of the operational dynamics which continue to be unpredictable (as currently being seen in the North-East, North-West and South). Nevertheless, even in the current context, SARC continues to prioritise the strengthening of its institutional capacities as an essential step enabling it to continue to respond to sudden crises and deliver humanitarian assistance to Syria’s most vulnerable people. It is equally an important part of the effort of building a more sustainable National Society. This objective is aligned with the SARC strategic plan 2020 – 2022.

Areas of Focus

<table>
<thead>
<tr>
<th>Shelter</th>
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<tbody>
<tr>
<td>People targeted: 140,000 people</td>
</tr>
<tr>
<td>Male: 68,600</td>
</tr>
<tr>
<td>Female: 71,400</td>
</tr>
<tr>
<td>Requirements (CHF): 3,358,000</td>
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</table>

Proposed intervention

As per the latest Global Humanitarian Overview 2021 report, 13 million people are still in need of humanitarian assistance in Syria. There is a reduction in household items required compared to previous years; this still leaves 4.4 million people in need of core relief items in Syria7. For shelter, there are still 4.7 million people in need of support because of the inadequate conditions in existing accommodation, and the overall lack of available, adequate and affordable shelters. Providing household items to vulnerable IDPs, returnees - IDP and refugee- and crisis-affected communities is still a life-saving priority. Hence, it is recognised that there is an urgent need, in concert with decreasing dependency on general emergency assistance, of improving the situation of households in terms of resilience and self-reliance.

As in all such crises, a significant number of IDPs are able or would like to return to their communities of origin, increasing the need to repair and rehabilitate damaged houses and infrastructure to move towards solutions for those able to return. Housing Land and Property (HLP) issues are integral to the shelter and housing situation, as the availability of documentation is a pervasive issue, and the infrastructure to recreate documents is not equally functional,

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7 UNHCR Operational Update for Q3 of 2020.
across the country. The damage to housing and infrastructure has been extensive throughout Syria, rebuilding will take many years and is beyond the scope of the humanitarian response resources in general as people seek a durable solution now and into the future. There are increased housing needs. Host communities face significant pressures in terms of shelter capacity and adequacy, as well as services. Syrians themselves remain the largest supporter of housing support by hosting others less fortunate. Displacement continues in some areas requiring emergency response, most recently in the North-West, while other areas have reached their capacity in shelter options with no more shelter capacity available. Newly displaced persons resorting to IDP sites face immediate and acute needs related to access to shelter, food, basic services and livelihoods is only exacerbated by the economic impact of the COVID-19 which has negatively impacted the coping strategy of most Syrians as employment opportunities dwindle.

The relevance of SARC’s relief assistance in response to household basic needs is well recognised, and it should be appropriately prepositioned and used when specific triggers require fast action to save lives. Household items, which Federation-wide stock usually hovers around 8–10 per cent of SARC’s total stock will now be complemented with core relief items (such as tarps for 50,000 people, mattresses and blankets for 50,000 people, and family dignity kits for 10,000 people) which provide SARC with flexibility and immediate response capabilities until further assistance becomes available. ICRC and UNHCR continue to distribute, through SARC, a range of household items, IFRC supports 30,000 children’s winter kits (rubber boots, woollen socks and thermal underwear) with the targeted provision of core relief items to enhance SARC’s contingency stocks ahead of the winter season. As in previous years, these will be used by SARC when and where they are required based on needs and preparedness pre-positioning and used to complement items of greater scale from other agencies. Newly accessible areas and areas where populations are remaining will have greater needs. An example is currently the North-West (Idlib) area which at this stage is serviced from cross border support. SARC remains vigilant to the situation and when the opportunity arises will begin its cross lines support to one of the worst affected regions of the country.

**Livelihoods and basic needs**

**People targeted:** 484,400 people

 Male: 236,000
 Female: 248,400

**Requirements (CHF):** 13,100,000

**Proposed intervention**

Food insecurity is still prevalent throughout the country and large-scale vulnerabilities persist, further increased because of limited access to basic services, as well as lost and damaged infrastructure and productive assets. The protracted nature of the crisis in Syria has been impacted over the past year by a series of shocks that have caused the highest number of food-insecure people ever recorded. According to WFP, the number of food-insecure people increased from 6.5 million in 2019 to 9.3 million people in 2020. Key aggravating factors include the displacement of people in north-eastern and north-western areas, the escalation of the crisis in the north-west, the economic sanctions (June 2020 Caesar Act Sanctions came into force), devaluation of the Syrian Pound against USD, the complex and deteriorating economic situation in neighbouring Lebanon and outbreak of the COVID-19 pandemic. This has resulted in an overall decrease in household purchasing power, and household incomes that cannot cover average expenditure due to lack of income opportunities, limited employment, the increase in the price of basic commodities and inputs. These factors in turn severely undermine the ability of communities to recover and pay for services that they require, such as medical care. Based on WFP Vulnerability Analysis and Mapping in Syria, the national average price of a standard reference food basket[1] increased by 91 per cent since March 2020 and is 21.8 times higher than the five-year pre-crisis average for September 2020. More than 80 per cent of households engage in one or more negative consumption-based coping strategies since April 2020. Communities continue to report the spending of savings, buying less expensive food, borrowing food, limiting portion sizes or a reduced number of meals per day.

The relevance of SARC’s food assistance is undeniable. Without support it is by far the most severe, life-threatening need; a need that must be addressed during any sudden population movement, emergency crossline operation, or sudden onset “emergency within the emergency”. For 2021, IFRC’s strategy for supporting SARC in providing food parcels for 60,000 households (standard food parcel – 30,000 and canned food parcel – 30,000) is small in number, but flexible to meet the essential needs of affected people compared to that of SARC’s major partners. However, the provision of food at such a scale is not sustainable nor does it provide a pathway to recovery for the recipients. In recognition of this and as a means to better support people’s resilience, IFRC with partners and SARC have several livelihoods projects. In rural areas, the focus is on agricultural input provision for 25,000
households and the support for at least 8,000 households through community-based interventions. This will contribute to restart people’s livelihoods activities and the provision of an initial set of inputs that can quickly improve the household’s food availability and income. The intervention is developed on the basis of household and community consultations where community members decide the implementation modality based on their priority vis-a-vis need. For urban areas, the focus is on vocational trainings addressing needs identified through labour market assessments and the provision of in-kind assets to start income-generating activities or business start-up kits depending on further assessment (for 800 individuals). An internal review will also be carried out to ascertain the impact and future options of livelihoods interventions.

### Health

**People targeted:** 300,000 people  
**Male:** 138,000  
**Female:** 162,000  

**Requirements (CHF):** 10,500,000

### Proposed intervention

The latest 2020 Humanitarian Needs Assessment Programme (HNAP) report for Syria, of which SARC is also a partner, shows that the health care requirements are in the top three priority needs along with food and livelihoods. In particular, the demand for health care services is higher in North-East Syria and Central and South Syria where 38 and 33 per cent of households report it as one of their top three priority needs, compared to 29 per cent nationally. Another highest need reported was for construction and repair of healthcare infrastructure (health facilities), which was most prevalent in the North-East (28 per cent) and least prevalent in North-West Syria (14 per cent). Nationwide the poor access to basic health services and psychosocial support are evident from figures as low as 35 per cent and at places where needs are not huge this is as high as 87 per cent, proving the paradox of health care and inequality. In half of Syria’s 14 governorates, the minimum number of health care staff required per 10 000 people is well below the international standards. Displacement has contributed to a reduction of up to 50 per cent of qualified medical personnel in some areas. The quality of health care is further compromised by the deterioration in the functionality of medical equipment. During the pandemic, patients presenting symptoms similar to those of COVID-19 (not confirmed with a test), have created an additional burden and led to additional disruptions on the health system. COVID-19 has had an immense impact on Syria’s health operations with the subsequent waves of community transmission. From January to December 2020, there have been 9,041 confirmed cases of COVID-19 with 506 deaths in the Syrian Arab Republic⁸. The protection of staff and volunteers on health and safety has been viewed as a critical component to the successful continuation of Syria’s emergency operations. To ensure this, IFRC issued guidelines to be followed which are in line with WHO guidelines. This was shared with all SARC teams both at the HQ and branch level. The staff in clinics have been catching up with trainings on personal protection and implementing services of an acre and health promotion adapted to COVID-19. Some 46 per cent of Syria’s health facilities, including maternal health services, are either partially functional or not functional⁹. The lack of spare parts for medical equipment and ongoing sanctions prohibit their importation and subsequent maintenance services, by the Ministry of Health (MoH). Additionally, a shortage of staff, drugs, and medical supplies place a burden on health facilities in general, but especially on those without support from international agencies. There are discussions between IFRC and SARC on developing a SARC framework for international procurement for Syria in 2021. This plan will define which items can be sourced locally and/or internationally.

While the emergency response phase is ongoing, SARC’s health programme in 2021 will be focusing on health services in clinics, mobile health units (MHUs) and first-aid ambulances for 215,000 people, with IFRC providing support to 7 Emergency Health Points (EHPs), 9 clinics and 6 mental health clinics, 11 MHUs, 4 physiotherapy centres and up to 28 mobile teams. All of these are in all Governorates of the GoS (Government of Syria accessible territory) and IFRC partners will support this, with increasingly the IFRC helping to broker support for the transformation of health services to the necessary capacity building to emergency health, mental health and psychosocial support (PSS) and community-based health and first aid (CBHFA). SARC, supported by the IFRC will do joint planning for a longer-term health plan to ensure that partners are able to provide the necessary support, guided by SARC’s health strategy. The scaling up of preventive and promotional tiers will be particularly important in a protracted crisis. These efforts contribute to strengthening the Syrian Health system by sharing the load of health care with MoH and by being present in places that are considered as the last mile. This is great burden sharing in a

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⁸ [MoH Syria - official website](https://www.moh.gov.sy)  
⁹ [https://www.who.int/health-cluster/countries/syria/Syria-Health-Sector-Bulletin-April-2020.pdf?ua=1]
context where nationwide the poor access to basic health services and PSS, as well as implementing health care services and health promotion that are adapted for COVID-19 context. Activities during 2021 will improve the access and quality of health services to the population, expand community outreach programs by using CBHFA approach (in 8 communities to cover 75,000 people), and recruiting and training of community volunteers as Community Health Workers to address non-communicable diseases, a nutritional programme implemented in the existing health facilities. This will focus on identification of anaemia among the pregnant women and women of reproductive age group, promotion of a holistic view of malnutrition among community members, promotion of healthy diet and physical activities to reduce stunting and growth monitoring of children under five years to reduce the risk of malnutrition and in supporting health promotion and care in reproductive mother, newborn, child and adolescent health (RMNCAH).

The HNAP special report on disability is based on the results of a national household survey conducted in June 2019. The analysis provides humanitarian stakeholders with insight on the prevalence of persons with disabilities (aged 12+) throughout Syria by area, age group and population type, including resident, or non-displaced host communities; IDPs; and returnees within 2019. The finding shows 27 per cent of people aged 12 and above within Syria were found to have difficulties, as compared to 17 per cent of residents. Older, disabled and injured are often neglected by humanitarian responses (Calvot 2014). The highest estimates of persons with disabilities are due to the trauma of the Syrian crisis, 30 per cent of people with acute severe trauma are estimated to end with permanent disability and demand rehabilitation treatment (Thompson, 2017). Many of them have a combination of mobility and/or psychosocial difficulties. Majority requiring medical and/or physical rehabilitation services which are either not accessible or not available. In Syria communities’ beliefs and opinions play a huge part in people's lives. Social stigmatization, disability discrimination remains a substantial issue. It is a necessity to raise awareness starting from persons with disabilities themselves and their families, reaching employers, society, and decision-makers.

Throughou 2021, increasing the functional independence of people with long-term mobility disability and improving their quality of life is the vision of SARC’s Disability Inclusion and Physiotherapy Programme. SARC will focus on three areas under this programme to support 10,000 people - (1) supporting up to 28 mobile teams across 11 Governorates and 4 physiotherapy centres in 3 Governorates to strengthen identification, registration, physical rehabilitation, referrals for general health services and increase the functionality and self-empowerment of persons with mobility disabilities which enables them to take an active involvement in society; 2) increase awareness of disability inclusion and removing barriers SARC staff and volunteers as well as communities through training, and (3) behavioural change in communities thorough campaigns and advocacy in order to minimise social stigma and discrimination related barriers.

**Water, sanitation and hygiene**

**People targeted:** 150,000  
**Male:** 73,000  
**Female:** 77,000

**Requirements (CHF):** 840,000

**Proposed intervention**

Some 15.5 million people need assistance to cover basic water, sanitation and hygiene (WASH) needs. Access to enough quantities of safe water remains limited. Water chlorination is insufficient, and people are still forced to complement water received from the network or to solely rely on alternative sources. The change in control of many areas across the Syria has resulted in a disruption of water service delivery to extremely vulnerable populations. Particularly vulnerable groups in water, sanitation and hygiene are children under two years, women of reproductive age and people with disabilities living in camps. Among the 30 per cent of internally displaced persons in the north-east reports that access to water, sanitation and hygiene services is their first priority, second priority among 40 per cent and the third priority among 30 per cent. Internally displaced in host communities are consistently worse off than resident communities in accessing water, sanitation and hygiene services and items. Internally displaced persons and female-headed households have more difficulties to afford most hygiene items in comparison with female-headed households in host communities.

The One WASH initiative, a tentative collaboration between SARC with IFRC and the Norwegian Red Cross may enter into a scoping phase once travel restrictions due to COVID-19 are lifted or reduced. Start-ups for One WASH programming has effectively been postponed to at least mid-2021 for all countries including Syria. This will focus upon long-term reduction of AWD\Cholera among vulnerable groups. Access to safe and sustainable water
supplies, sanitation, and hygiene facilities as well as hygiene promotion with both hardware and software response activities. Based on assessments, the support will target affected IDPs and host communities. Rehabilitation/installation of appropriate permanent water and sanitation facilities is a key priority, with ICRC, Norwegian Red Cross and Swiss Red Cross actively supporting SARC in-country. Community water users’ committees will be formed and trained on water treatment, repair, and maintenance. Community volunteers will be trained to mobilise communities and conduct campaigns on hygiene promotion and zero open defecation practices, and relevant activities in schools.

IFRC’s support to SARC will be, aside from technical consultation and potentially on the public health components of One WASH, amounts to WASH ‘Software’ activities such as hygiene kits that will be distributed together with community awareness sessions on hygiene. As part of the WASH programme, therefore, IFRC will support SARC’s activities to reach 30,000 households (150,000 people) with hygiene promotion through CBHFA interventions and the distribution of 15,000 hygiene kits.

![Protection, Gender and Inclusion](image)

**Protection, Gender and Inclusion**

People targeted: 6,000

Male: 2,400

Female: 3,600

**Proposed intervention**

The Syrian crisis has exacerbated gender inequalities and risks of violence for both women and men, though disproportionately for women and girls. It is estimated that 75 per cent of young girls living in camp settings inside Syria are not going to school for fear of sexual violence. Protracted crisis has resulted in large scale displacement, increased family separation, the breakdown of traditional community protection structures and the large-scale destruction of basic infrastructure and livelihoods. Roles within families are changing with many women having to assume the role of head of household and primary breadwinner. Protection concerns are increasingly interlinked, for example, dependency on assistance, sexual exploitation, early marriage, child recruitment, and labour, and need to be addressed comprehensively to ensure impact. At the same time, issues around civil documentation limit freedom of movement and exacerbate other protection risks such as access to safe locations, basic services, humanitarian aid and livelihoods. The lack of livelihoods coupled with the depletion of resources forces affected populations to unsafe coping mechanisms such as child labour, child marriage and in some cases, as an act of last resort, survival sex. It is estimated that one in three school-age children are not attending school due to the destruction or re-dedication of many schools, displacement or because they have to contribute to the family income. Elderly persons and persons with disabilities are particularly exposed to protection risks including exploitation and abuse.

As a cross-cutting operational priority, PGI interventions will continue into 2021. Special attention will be given to particularly vulnerable individuals through community centres, providing a safe space and open and welcoming environment that promotes the sense of community, dialogue and sharing. The community centres supported through IFRC’s appeal, have a role to implement more structured and advanced activities for small groups of children or adults who might need additional basic psychosocial support as well as recreational, educational and handicraft activities. They are also locations where vulnerable people can be given information about other SARC services that they may require a holistic approach to wellbeing or be referred to other organisations that can advise on a range of legal and social issues something much appreciated within the communities they serve. Community engagement and accountability activities in PGI are being adopted in the community centres. To some degree, SARC undertakes different activities within the community engagement and accountability (CEA) framework which in 2021 will be mapped across all areas as a means to identify and build a more comprehensive understanding and approach. In the community centres, promoting the participation of the community and building on their own resources is one of the most important roles of the centres. The activities will be carried out together with SARC’s staff and volunteers as well as by community volunteers that are the local examples for behavioural change, who can play a leading role in promoting protection and resilience. SARC and IFRC staff and volunteers will also receive training on addressing sex and gender-based violence (SGBV).
Strategies for Implementation

Requirements (CHF): 3,090,000

SARC is a very different National Society from the one in 2011 as the crisis began and when it was appointed to coordinate international humanitarian assistance and assumed the role of conducting operations and providing services across the country, as the only organisation, through its volunteers that enjoys national coverage across the country and could access the communities that needed them. In October 2019 SARC completed its Strategic Plan for 2020-2022 which is a key reference document for partners’ support NSD priorities and will continue to be adapted where necessary so that it informs future direction through the transition phase. SARC has prioritized to develop its capacity and respond to sudden crisis events while raising institutional strengthening as an essential priority to its long-term sustainability. IFRC has been coordinating with the Movement partners to ensure required NSD support such as Preparedness for Effective Response (PER) and Branch Development.

Since the beginning of the Syria crisis, interventions by all Movement partners have had components that gradually strengthened SARC’s capacity to deliver humanitarian assistance. The National Society now has a network of 12,000 volunteers delivering essential aid to more than 5.6 million people on a yearly basis through the combined support of Movement partners, UN Agencies and INGOs. This gives a fair idea of SARC’s current operational capacity. To reach this level the following non-exhaustive examples of NSD initiatives are being undertaken by the Movement partners:

- establishment of a modern finance management system and obtaining the authorization for export licences, the rollout and training of staff is ongoing,
- the establishment of an Organizational Development and Strategic Planning Unit which is now the motor towards more harmonious operational cycles across departments and partners,
- strengthening of the information management (IM), planning and reporting systems as demonstrated through the Covid-19 response,
- finalisation of a logistics manual is ongoing for improved management of warehouses and stocks and a constantly improved local procurement gradually moving closer to IFRC standards procedures,
- strengthening of HR systems and procedures
- significant steps towards introducing and applying PGI, CEA and SGBV in a cross-cutting manner in all interventions,
- an increased strengthening of capacities of branches operating in conflict and protracted crises
- a constant improvement of capacities and services of the health, livelihoods, relief as well as disaster response networks and,
- improved capacities in cash-based assistance in emergency response.

All of the above will continue and more elements will be added during 2021. With SARC in the lead, and based on their 2020-2022 Strategic Plan, a logically phased plan will be developed that can be implemented as the National Society maintains its primary focus on assisting ever-increasing numbers of people in need. A comprehensive mapping of the technical support available through Movement partners in Syria or in the wider Movement network will be put in place with clearer prioritization and resource mobilization. The IFRC will ensure that all developments are captured, reflected, and shared through its reports. The Strategies for Implementation under this revised emergency appeal are no different from the ones to be articulated under the country plan platform, whose main reason will be to better accommodate both emergency and longer-term contributions. One of the 2021 NSD priorities will be to improve SARC’s volunteer protection in the multiple crisis contexts of Syria. For instance, training packages will include knowledge transfer on the use of and access to insurance schemes or funds available through SARC or other Movement volunteer funds.

Based on the demand for the technical and coordination support required to deliver in this operation, the programme support functions will be supported to ensure an effective and efficient technical coordination: human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration. IFRC will continue focusing on the development of SARC’s PMEAL and reporting capacities including standardised tools for monitoring purposes. IFRC, together with SARC, will also work with in-country PNSs to enhance its ICT infrastructure to follow disaster management and increase connectivity between the headquarters and branches and defining the transition path from an emergency appeal to long-term strategic priorities. More details are in the Emergency Plan of Action.
## FUNDING REQUIREMENTS

International Federation of Red Cross and Red Crescent Societies

**REVISED EMERGENCY APPEAL**

*MDRSY003 - Syria - Complex Emergency*

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<thead>
<tr>
<th>Category</th>
<th>November 2020 - December 2021</th>
<th>July 2012 - December 2021</th>
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<td>SHELTER</td>
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<td>PROTECTION, GENDER AND INCLUSION</td>
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<td>MIGRATION</td>
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Jagan Chapagain  
Secretary General
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How we work
All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO’s) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable. The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:

- Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
- Enable healthy and safe living.
- Promote social inclusion and a culture of non-violence and peace.