Emergency appeal №: MDRSY009
Emergency appeal launched: 07/02/2023
Operational Strategy published: 12/03/2023

Glide №: EQ-2023-000015-SYR

Operations update #1
Date of issue: 20/04/2023

Timeframe covered by this update:
From 06/02/2023 to 15/04/2023

Operation timeframe: 24 months
(06/02/2023- 28/02/2025)

Number of people being assisted: 2.5 million people

Funding requirements (CHF):
CHF 100 million through the IFRC Emergency Appeal
CHF 200 million Federation-wide

DREF amount initially allocated:
CHF 2 million

A boy displaced by the earthquake tells how he got a wheelchair after the earthquake damaged his house and had to flee to a temporary shelter. Latakia, Syria, 4 April 2023. Source: SARC

To date, this Emergency Appeal, which seeks CHF 100,000,000, is 32.8 percent funded. This includes hard and soft pledges and contributions. Further funding contributions are needed to enable the Syrian Arab Red Crescent, with the support of the IFRC, to continue to address people’s immediate needs, and to implement mid- to long-term interventions to build the resilience of people affected by the earthquakes. See the donor response list here.
A. SITUATION ANALYSIS

Description of the crisis

As the Syria crisis enters its 13th year, the scale, severity, and complexity of needs across the country remain overwhelming. More than 15 million people need humanitarian assistance and an estimated 6.5 million people have been affected by the February earthquakes.

At least 116 health facilities reported damages (including at least seven hospitals) in Aleppo, Hama, Lattakia, and Tartus as a result of the earthquake. In Northwest (NW) Syria, at least 55 health facilities have been damaged with 15 health facilities having suspended activities. Suspected cholera cases have been widespread, particularly in NW Syria. Meanwhile, in mid-March 34 measles cases were confirmed in Aleppo. There are also reports of an increasing number of acute watery diarrhea cases within shelters in the affected governorates.

Soaring prices and insufficient income mean millions of families are struggling to make ends meet, amid an unparalleled economic crisis. According to the World Food Programme (WFP) Syria Weekly Market Update, nominal food prices remain high in the earthquake-affected areas. The price of bread increased by 20 percent, week-on-week, in Aleppo, and by six percent in Hama and Idlib. Soaring prices were observed for staples such as lentils, oil, sugar, and rice across the governorates.

The already fragile water and sanitation infrastructure was extensively affected by the earthquake, with damage and collapse of water reservoirs, water towers, water stations, and networks of sanitation facilities. The living conditions within collective shelters continue to put girls and boys at risk of child protection concerns, with an increase in reported cases of gender-based violence and girls experiencing harassment. This is mainly due to the overcrowded rooms, lack of privacy, absence of adequate WASH facilities, and lack of proper reporting mechanisms that ensure accountability of perpetrators. The lack of adequate lighting in several collective shelters has also been highlighted as a main concern, especially by girls and women.

Intense rainfall from 17-20 March resulted in flooding and further damage to earthquake-affected areas. At least 42 IDP sites in Syria are affected, with floods destroying or damaging more than 1,600 tents sheltering some 7,500 internally displaced people (IDPs).

Summary of response

Overview of the host National Society and ongoing response

More than seven weeks after the earthquake, the Syrian Arab Red Crescent personnel continue to respond. The multiple impacts of an ongoing conflict of 12 years have been compounded by the new impacts of the earthquake on the population.

The Emergency Appeal was revised on 16 February and the Operational Strategy was published on 12 March, reflecting the objectives of SARC’s response plan.

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1 WHO Syria Earthquake Situation Report, 15 February
2 NW Syria Health Cluster, 26 February
3 UNICEF Syria Humanitarian Situation Report No. 5 (Earthquake)
4 UNICEF Syria Humanitarian Situation Report No. 5 (Earthquake)
5 UNICEF Syria Humanitarian Situation Report No. 5 (Earthquake)
6 UNHCR EQ emergency response update
Federation-Wide Approach

The Emergency Appeal is part of a Federation-Wide approach, based on the response priorities of SARC and in consultation with all Federation members contributing to it, integrating holistic planning within the operational strategy, taking into consideration the programmatic sectorial experiences of in-country Partner National Societies with SARC, and assigning lead coordination positioning, in addition to utilizing surge personnel with relevant technical role profiles through the Rapid Response mechanism. The approach will ensure linkages between all response activities (including bilateral activities) and will assist to leverage the capacities of all members of the IFRC network in the country, to maximize the collective humanitarian impact integrated under one plan. Reporting on SARC’s earthquake response plan, up to 15 April, 7.4 million humanitarian services have been provided, where a single beneficiary may have received more than one service depending on the needs. The cumulative services and numbers presented in the infographic below reflect all in-kind support assistance received by SARC since the onset of the emergency. This includes support from international governments, local institutions, ICRC, UN, and Red Cross partners are described as follows:

**Syria Earthquake: Syrian Arab Red Crescent Response**

From 6th Feb 2023 to 15th Apr 2023

**Situation:**
- 6.5M people affected / at risk
- 1,414 people killed
- 2,357 people injured
- 276 buildings destroyed
- 293K people live in their house
- More than 300 buildings damaged
- 248 schools destroyed
- 1 SARC facility destroyed
- 9 SARC facilities damaged

**SARC Response:**

Targeted people 2.5M

- 5.425M services provided by the disaster management team
- 3,756 cases responded to by the emergency medical services team
- 1.5M medical services provided by health department
- 185K services provided by the protection and community services team
- 217.3K services provided by the water and rehabilitation team
- 66K legal services provided by the legal services team

More than 2K logistic services provided.

SARC received humanitarian aid support through 249 planes from various international communities.

Close to 500 vehicles from various departments are used in the response including almost 53 ambulances.

4,000 active volunteers and staff participate in the response.

**Legend:**
- Directly affected areas
- No. SARC’s shelters
- Bodies transferred
- Injuries transferred
- Casualties treated at the place
- Displacement movement
- No. displaced families
- # Distributed items
**Syria Earthquake: Syrian Arab Red Crescent Response**

During the earthquake response, the Syrian Arab Red Crescent mobilized all operational teams from all departments within the sectors concerned in the response, and the following services were provided:

### Medical Services:
- **3,756** cases responded to by the EMS team.
- **254** beds transferred
- **1,765** injuries transferred
- **1,737** cases treated at the place

### Medical Services:
The total medical services reached **13,235,033** services for **1,261,956** beneficiaries, as follows:

<table>
<thead>
<tr>
<th>Program</th>
<th>Beneficiaries</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobile Health Units</td>
<td>63,052</td>
<td>Consultations and medicines</td>
</tr>
<tr>
<td>Community-Based Health and First Aid</td>
<td>856,956</td>
<td>Medical services</td>
</tr>
<tr>
<td>Physical Rehabilitation Program</td>
<td>75,524</td>
<td>Medical services</td>
</tr>
<tr>
<td>Mental Health</td>
<td>4,253</td>
<td>Psychological support services for 124 paramedics</td>
</tr>
<tr>
<td>Medical Mobile Team</td>
<td>47,254</td>
<td>Medical services</td>
</tr>
<tr>
<td>Clinics</td>
<td>84,851</td>
<td>Medical services</td>
</tr>
<tr>
<td>Nutrition</td>
<td>4,744</td>
<td>Medical services</td>
</tr>
<tr>
<td>Maternal, Newborn and Child Health</td>
<td>10,525</td>
<td>Medical services</td>
</tr>
<tr>
<td>671 hospitals/treatment</td>
<td>2,782 emergency cases</td>
<td></td>
</tr>
<tr>
<td>- Intensive care unit</td>
<td>398 hospitalizations</td>
<td></td>
</tr>
<tr>
<td>- Maternity care</td>
<td>109 emergency surgical operations</td>
<td></td>
</tr>
<tr>
<td>6,236 diagnostic services (lab test, ECG, X-ray, medicine, bandages, and others)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Protection and Community Services:
- **Protection and Community Services** provided services for **98,045** beneficiaries, as follows:
  - Providing awareness sessions and distribute posters for **112,099** beneficiaries about safety and security measures in earthquakes, panic, dealing with the injured, grief & loss, and sessions about sex and gender-based violence, and others, in addition to running 109 focus group discussion sessions.
  - Providing psychological first aid services to **34,157** beneficiaries, especially for children, in addition to providing services in shelters such as activities for 10,003 kids.
  - Case management services and referral to medical, legal, and mental health services for all age groups to **89,740** beneficiaries.
  - In addition to 10,003 structured activities for all ages, 6,756 education services, and 107 peer support activities.

### Legal Services:
The legal services provided to **66,025** beneficiaries as follows:

<table>
<thead>
<tr>
<th>Legal Services</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>40,391 beneficiaries from legal awareness assessments</td>
<td></td>
</tr>
<tr>
<td>11,500 beneficiaries from legal visits and monitoring</td>
<td></td>
</tr>
<tr>
<td>6,180 beneficiaries from legal communications &amp; cooperation services</td>
<td></td>
</tr>
<tr>
<td>5,550 beneficiaries from interventions before administrative bodies</td>
<td></td>
</tr>
</tbody>
</table>

### Water and Rehabilitation:
- Implement rapid assessment for water & sanitation infrastructure, and electricity networks across all affected governorates. 310 Ma'shad were also stocked, in addition to assessment for 32 SARC facilities.
- Assessment of 275 shelters including schools, and 43 motors rehabilitation.
- Assessment of the damages of 50 central water tanks, and installing 14 water tanks with different capacities, side by side supplying (32,275 m³) of water through systems.
- Distribute 96,239 water bottles and 10,725 jerry-cans and 244 bread portions in shelters, in addition to distributing 14,628 hygiene kits and 96,825 other items.
- Following up and supervising the rubble removal work resulting from the earthquakes and demolishing cracked buildings, in cooperation with the Aleppo City Council and the ICRC.
- Provide 5 electricity generating sets for bakeries in Lattakia, and 14 electrical transformers in Aleppo, and Hvma in coordination with the Public Establishment for Electricity.
- Maintenance of two collective kitchens in Aleppo.

### Disaster Management Services:
- Evacuating families from their cracked homes toward shelters.
- Implement need assessments for 30,697 beneficiaries, in addition to an assessment for 217 buildings that benefited 5,271 beneficiaries in all affected governorates.
- Organizing the movement of 3,994 families (90,970 people) from their places of residence to other places (1,000 families in Hama, 1,890 families in Tartus, 172 families of them internally displaced), 1,986 families in rural Damascus, 124 families in As-sweida, 108 families in Idlib, 63 families in Daraa, and 29 families in Damascus.
- 44 shelter kit services, including maintenance of windows, doors, water tanks, electrical panels, and cables, with all the necessary supplies for installation, in addition to infrastructure assessment and studies.
- Received 56 cases for facilitated restoring family links by the body management and restoring family links team, 35 of them closed successfully, and the others are still in the process.
- More than 200 shelters have been served by SARC teams since the beginning of the response, and currently, 54 shelters hosting 11,543 people, are designated for response by the SARC, as services are being provided to them.
- Deliver a convoy with relief and medical items to Sheikh Maasoud in Aleppo consisting of 31 trucks, and a convoy with relief items to Tellal neighborhood in Aleppo consisting of 12 trucks.
- **5,190,233** distributed items (including convoy items).

### Livelihoods
- **IFRC**
- **ICRC**

### Supporting Partners
- **British Red Cross**
- **Danish Red Cross**
- **German Red Cross**
- **Swedish Red Cross**
- **Swiss Red Cross**

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**Red Cross Red Crescent Movement partners currently actively involved in the operation:**

Currently, 8 Partner National Societies are directly supporting SARC, including the British, Canadian, Danish, German, Norwegian, Swedish, and Swiss Red Cross Societies. Furthermore, before the earthquake, the Austrian, Australian, Finnish, Italian, Japanese, and Netherlands Red Cross Societies also engaged through the IFRC, or remotely from regional representations in Beirut and their headquarters. As part of the Federation-wide approach, see below partner support by sector:

<table>
<thead>
<tr>
<th>Sector &amp; Support Service</th>
<th>Programmatic Coordination with SARC</th>
<th>Supporting Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disaster Management</td>
<td>IFRC ICRC</td>
<td>British Red Cross</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Danish Red Cross</td>
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<tr>
<td></td>
<td></td>
<td>German Red Cross</td>
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<td></td>
<td></td>
<td>Swedish Red Cross</td>
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<tr>
<td></td>
<td></td>
<td>Swiss Red Cross</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>IFRC ICRC</td>
<td>British Red Cross</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Danish Red Cross</td>
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<tr>
<td></td>
<td></td>
<td>Swiss Red Cross</td>
</tr>
<tr>
<td>Service Type</td>
<td>British Red Cross</td>
<td>Canadian Red Cross</td>
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<tr>
<td>----------------------------</td>
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<td>--------------------</td>
</tr>
<tr>
<td>Multi-Purpose Cash</td>
<td>ICRC</td>
<td></td>
</tr>
<tr>
<td>WASH &amp; Shelter</td>
<td>ICRC</td>
<td>IFRC</td>
</tr>
<tr>
<td>Community Services</td>
<td>Danish Red Cross</td>
<td>IFRC</td>
</tr>
<tr>
<td>Community Services (including PSS)</td>
<td>Danish Red Cross</td>
<td>IFRC</td>
</tr>
<tr>
<td>Health &amp; Care</td>
<td>IFRC</td>
<td>British Red Cross</td>
</tr>
<tr>
<td>PGI</td>
<td>ICRC</td>
<td>IFRC</td>
</tr>
<tr>
<td>CEA</td>
<td>Swedish Red Cross</td>
<td>IFRC</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>IFRC</td>
<td>IFRC</td>
</tr>
<tr>
<td>Logistics</td>
<td>German Red Cross</td>
<td>IFRC</td>
</tr>
<tr>
<td>Communications</td>
<td>IFRC</td>
<td>IFRC</td>
</tr>
</tbody>
</table>
In addition, on 17 February 2023, the Palestinian Red Crescent Society (PRCS) was allocated CHF 282,339 from DREF to support the Palestinian refugees in the earthquake-affected areas of Lattakia, Aleppo, and Hama for six months. In the initial phase supported by this DREF, a total of 2,500 people will receive support to cope with the effects of the earthquake through the provision of shelter, food, non-food items, and assistance. To view the DREF operational strategy, click here.

**Needs analysis**

SARC's initial assessment and analysis identified five governorates that were directly affected by the disaster: Aleppo, Lattakia, Hama, Idleb, and Tartous. The affected population in these five governorates is estimated to be 6.1 million people. Of these, SARC is targeting 2.5 million through its response plan. Many people were displaced across Syria, extending the geographic reach beyond the directly affected governorates to include areas hosting internally displaced people, such as Rural Damascus. Targeting the affected population in this operation and its activities prioritizes the most vulnerable groups, such as separated families, female-headed households, children, people with disabilities, and the elderly, among other groups with special needs.

**Shelter, Housing & Resettlements and NFIs**

According to the World Bank, housing damages across the urban and rural areas of six affected governorates are estimated at US$880.6 million, with some 87,330 housing units, representing 4.8 percent of the total housing stock, considered to have been partially damaged or destroyed. Losses (comprising loss of rental income, housing expenditures of families with destroyed houses, loss of housing assets, and loss of income to governments) are estimated at US$69.2 million across the six governorates. Aleppo and Idlib Governorates incurred 92 percent of estimated damage costs and 90 percent of estimated losses related to housing. About 21 percent of units damaged are from the informal sector, occupied by vulnerable lower- and middle-income families.

Most affected households need food and non-food items (NFIs), including basic household items, as their priority needs. While food insecurity pre-dated the earthquake, the situation has been exacerbated as the earthquake left thousands of households unable to access food and livelihoods. As such, the provision of food and assistance for basic needs remains a priority.

The housing recovery strategy encompasses the mass rehabilitation of damaged and destroyed housing stock based on middle-income Building-Back-Better standards and the use of participatory recovery approaches, particularly targeting displaced populations. The early recovery phase should include damage assessment; vulnerability mapping and technical support to local governments for seismic-resilient urban planning and development; and community and area-based inclusive and sustainable resilient approaches. According to a recent study carried out by REACH Initiative, the need for shelter has been identified as the top priority for 51 percent of newly arrived IDP households, highlighting the urgent need for adequate housing solutions followed by winterization and cash assistance.

**Livelihoods**

Prior to the earthquakes, the livelihoods of the population living in affected regions were significantly impacted by the conflict. Social inclusion was a significant challenge to sustainable development outcomes, with a significant portion of the population living in IDP camps and those living in communities being confronted with barriers to

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7 World Bank Rapid Damage and Needs Assessment (RDNA)
accessing aid and services. The majority of IDPs likely face a substantial drop in income post-earthquakes as a result of disrupted employment or livelihoods.

Given the extensive loss of jobs and livelihoods due to the earthquakes, support for microenterprises, jobs training, and other household-level livelihood interventions should be priorities for job creation in the affected areas. Farmers will require assistance to adapt to new farming techniques that are more resilient, particularly to climate change. This will help farmers increase their crop yields and improve their livelihoods while supporting food security. Therefore, the provision of agricultural livelihood support is a priority as agriculture is the most prominent economic sector in the impacted areas.

Food and commodity prices have risen noticeably in the affected governorates, lowering people’s purchasing power and negatively impacting income-generating activities. In addition to the loss and damage of their homes and possessions, the directly impacted population has also suffered losses in their assets and means of subsistence. Vulnerable groups will struggle to access sufficient quantity and quality of food, meet their basic needs, and restore their livelihoods in the coming months.

The post-disaster effects will intensify pre-existing poverty and vulnerabilities. Vulnerable people affected by the earthquake have now become even more highly vulnerable. Loss of jobs, tools, sheds, crops, livestock, or reduction in incomes, among others, may cause more people to become food insecure.

**Multi-Purpose Cash (MPC)**

Families are impacted in different ways by the earthquakes, but almost all who are directly impacted need money to replenish in-kind items; buy food; access health services and medicine; pay for shelter repairs, rent, and utilities; and for recovering and protect their livelihoods. While multipurpose cash alone cannot cover all the sectors and needs, it is a valuable complement for affected households, and being unrestricted in nature, supported households can prioritize according to their individual needs. The Minimum Expenditure Basket (MEB) for the earthquake includes multiple sectors including food, hygiene, health, energy, transport, clothing, and NFIs.

Alongside shelter support, multi-purpose cash assistance is the second priority need amongst IDPs. Due to the needs highlighted above, emergency cash transfers to households that became further vulnerable following the earthquake are indicated as a priority for the ongoing response. Following the emergency phase of the response, it is expected that a substantial number of impacted households will remain in need of social cash assistance. It is therefore expected that the cash transfers initiated under the early recovery phase may be maintained for poor and vulnerable households—with flexibility in revising coverage, targeting, and transfer values—throughout the resilience-building period and as complementary support to shelter, livelihoods, and health.

Markets in the affected areas are overall functional and traders can supply as needed, and affected populations generally have safe access to markets. Financial service providers also function throughout the country and are reported to have the liquidity to support a scale-up in cash disbursements. People had a high preference for and acceptance of cash assistance already before the Earthquake, which is maintained post-crisis.

**Health & Care**

The health response and resilience strategy should address the compounded impacts of the conflict, COVID-19, the cholera outbreak, and the earthquakes on the health system. The World Bank estimates a health system requirement of US$ 385.4 million. The near-term priority is to restore essential health services in functional facilities while continuing to provide services through mobile units to impacted areas without functional health facilities. This includes obtaining vaccines and medicines for pregnant women, children, and people with non-communicable diseases (NCDs); providing mental health and psychosocial support services; re-equipping hospitals and laboratories with medical and diagnostic equipment; monitoring children and pregnant women for malnutrition; and working with the water sector to prevent water-borne disease outbreaks. In the medium to longer term, it will be important to build
human resources, restore damaged healthcare facilities, strengthen emergency care and pandemic preparedness, and engage all actors across the health sector to provide affordable services.

While most health facilities have remained operational, they are overstretched and in need of medicines, supplies, equipment, fuel, and lighting. Medical services and mental health and psychosocial support are priority needs.\(^8\) Most of the visitors to the health centers in the affected areas since the earthquake are presenting with cases of respiratory infections.\(^9\) Acute watery diarrhea, jaundice syndrome, influenza-like illness, suspected measles, leishmaniasis, lice, Tuberculosis and scabies cases have been reported across Aleppo and Lattakia.\(^10\) There is an urgent need for medicines, specifically for pediatric use, respiratory infections, and non-communicable diseases. Different levels of malnutrition are detected in pregnant and lactating women, along with children under five years old, who have been found to be moderately acute malnourished and severely acutely malnourished.\(^11\)

There is a need for long-term psychosocial support interventions for people in collective centres. Adults and children who have lost family members, their homes, and their communities have suffered psychological distress, with many affected by diagnosed posttraumatic stress and other mental health disorders likely to have long-lasting effects on their mental health and development. It is critical to continue to provide the full spectrum of mental health and psychosocial services in collective shelters, among hosted families, and for the broader community in affected areas.

**Water, Sanitation and Hygiene**

With tens of thousands of displaced people living in shelters, there is an increased risk of disease due to crowding, unsafe water, and poor sanitation and hygiene. The immediate requirement of the WASH sector is to provide basic minimum services, restore infrastructure, and ensure continuous operation for water supply and sanitation to limit the risk of water-borne diseases. Efforts to build post-earthquake resilience should aim to improve services beyond the levels before the earthquake. Activities will prioritize the resumption of basic public services, notably water provision, and sanitation, to protect vulnerable populations. Moreover, disruption in access to critical services, notably in water, sanitation, and health risk further worsens the ongoing cholera outbreak and further exposes the population to water-borne diseases.

Ensuring essential health care, water, and hygiene to displaced people, particularly those living in collective shelters, is important to minimize the risk of disease outbreaks and transmission due to crowded conditions, including the spread of respiratory illness (COVID-19, measles, and influenza), as well as those related to pre-existing outbreaks which are seeing an increase (cholera, hepatitis A, and acute watery diarrhea, along with scabies and lice). It is recommended to continue to screen and monitor sanitation, hygiene practices, and water treatment to reduce morbidity and mortality from cholera and other conditions.

**Protection, Gender, and Inclusion**

Protection concerns exacerbated by the earthquake include psychological distress, child labour, intra-family violence against women and children, limited availability of protection services, and scarcity of specialized services for people with disabilities and older people. There is an ongoing need for safe spaces in camps and shelters to conduct activities and awareness-raising sessions for the local community.\(^12\)

Vulnerable segments of the population, such as women, children, the elderly, the disabled, and the poor, were hit hardest by the effects of the earthquake. At least 100,000 families have been displaced in Aleppo, Homs, Hama, and Lattakia. The rise in the number of IDPs has led to a significant deterioration in living conditions in IDP camps and in informal housing, with many female-headed households, unaccompanied and separated children, the elderly, and persons with disabilities have taken refuge in these shelters. Women have become increasingly vulnerable to gender-

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\(^8\) Syria Earthquake March 2023 Government-Controlled Areas, Bi-Weekly Highlights - 03/03/2023.

\(^9\) Earthquake in Syria: Rapid assessment report- Latakia, Aleppo and Homs. UNRWA

\(^10\) Syrian Arab Republic: Earthquakes Sitrep no. 1- OCHA

\(^11\) Syrian Arab Republic: Earthquakes Syria situational updates As of March 1- OCHA

\(^12\) Protection Sector update-16 March
based violence in these shelters. The elderly and disabled remain particularly vulnerable to displacement and loss of public services.

**Operational risk assessment**

The operational risk context has not significantly changed and will not affect the anticipated risks shown in the Operational Strategy. A risk management delegate will shortly join the team and will work to raise the overall risk maturity of the IFRC for this operation, providing ongoing risk management training and guidance to the teams within the operation. Additionally, the role will coordinate the response to risk-related inquiries primarily relating to the Syria Earthquake Appeal and beyond from partners and donors, in alignment with the global risk management strategy.

**B. OPERATIONAL STRATEGY**

**Update on the strategy**

The Operational Strategy for the Syria Earthquake Operation outlines the approach to deliver a comprehensive earthquake response to address immediate life-saving and dignity-preserving activities and outlines the mid-to-long-term needs of the affected population to become more resilient, with particular emphasis on the most vulnerable communities, including host communities. However, as the Operational Strategy was drafted in the first weeks of the response, SARC’s multisectoral teams along with IFRC surge counterparts are preparing a multisector rapid needs assessment in the affected governates which will direct the refining of strategies, objectives, and targets across the intervention area. The Operational Strategy will be revised to reflect those assessed needs, considering approaches to build sustainable resilience within the affected populations.

Increasingly the attention of the Syrian Government and the international and humanitarian communities are turning towards the considerable task of resilience building. SARC, with IFRC support, is planning the early recovery and resilience-building strategy to enable community recovery and promote community resilience. While SARC will continue to provide basic humanitarian assistance and services to address the most urgent and immediate needs of affected communities, it is starting to plan the transition to programming which strengthens resilience, supports durable and sustainable solutions, and builds capacities and skills in long term displaced populations to be more self-sufficient. The upcoming plan will outline the key approaches and milestones for linking the immediate humanitarian assistance plans and the longer-term programming and ensure all efforts contribute to strengthening community resilience in the earthquake-affected area and beyond.

As per IFRC’s operational intent, SARC is the lead in this operation and the only operating partner in Syria, while IFRC has prioritized its mandate to coordinate the international elements of this response in line with the Principles and Rules. This extends to Membership Coordination and coordination with UN and international partners. This operation is building on SARC’s local response capacities as well as on the comparative advantage of the IFRC. Information production has been of critical importance to inform a strong operational strategy built on the best evidence.

**C. DETAILED OPERATIONAL REPORT**

**STRATEGIC SECTORS OF INTERVENTION**

On May 2023, SARC will carry out a planning workshop where headquarters, branches, and partners will share, advise and provide feedback for the immediate, medium, and long-term activities. The date still needs to be confirmed. The planning workshop will be the platform to revise the response plan and standard indicators along with targets will be
The updates below reflect the coordination activities each sector has accomplished in support of SARC and with Partner National Societies.

### Shelter, Housing, and Settlements

#### Objective:

1. **Emergency phase:** Communities in crisis-affected areas restore and strengthen their safety through emergency shelter and household items provision.
2. **Resilience building:** Meet the medium-term shelter needs and urban resilience in line with principles of dignity, protection, and an integrated approach.

The Shelter, Housing, and Settlements plan is currently being defined. Nevertheless, SARC has distributed non-food items as an immediate response with bilateral contributions as shown in the above infographic. International procurement of 10,000 Kitchen sets, 20,000 jerrycans, and 10,000 tarpaulins is currently ongoing.

The affected governorates are in the process of selecting which of the current 222 collective shelters will be retained for a period of 6 to 12 months. Only 17 shelters in Aleppo and 7 in Latakia will be retained, and more information on Tartous, Hama, and Idleb will be released in the coming days. Shelter options are currently being discussed to determine how to best assist the affected population. In accordance with the shelter sector strategy, the Partners will respond through:

- Prioritization of emergency shelter & and provision of Household Items HHIs to those affected. This is achieved through the identification and adaptation of collective centres to ensure their suitability for temporary occupancy in accordance with humanitarian standards. Emergency tents and other forms of temporary shelters will be provided, where needed, and upon the authorization and guidance of the Government of Syria. HHIs kits contain both core and winter HHIs items.
- Supporting households who continue to reside in buildings that have experienced minor damage and have been cleared by authorities as ‘structurally safe’. This assistance will include emergency shelter kit/ material assistance and minor repairs through in-kind or cash modalities which will support household-level safety & security (doors, door frames, locking mechanisms), protection from the elements (window frames, glass, plywood, plastic sheeting), access to basic services (water/ sanitation related plumbing, piping, fixtures & fittings) in addition to household level energy provision.

The European Union through the European Humanitarian Response Capacity (EHRC) provided 500 tents including a winterization layer and cooking stove, 51 family tents, 3,600 plastic sheets, and 1,695 sets of rope. 27 high-quality tents with electrical equipment (lights and sockets) are also provided by the Finnish Red Cross. Visit to Aleppo, Latakia, and Hama by the shelter surge personnel is ongoing to assess the needs of the collective centres to improve the living condition of the hosted families. In Aleppo, the rapid structural assessment was undertaken in 4,159 buildings and classified 169 buildings as ‘high risk of collapse’ and 644 as ‘medium risk of collapse’. Based on the Lattakia Operation room report dated 18 March, it is estimated that approximately 28,279 buildings have been assessed so far as part of the Rapid Structural Assessment. Preliminary information indicates that 10,320 buildings are classified as green, 16,998 as yellow, and 961 as red.

SARC’s Disaster Management Services have carried out needs assessments of approximately 217 buildings in all affected governorates. 3,994 families (19,970 people) were evacuated from their homes to Homs, Tartous, Rural Damascus, As-Sweida, Idleb, Qunietra, and Damascus. 44 shelter kit services, including maintenance of windows, doors, water tanks, electrical panels, and cables, with all the necessary supplies for installation, in addition to infrastructure assessment and studies have been undertaken. Up to 15 April, 661,277 non-food items and shelter kits have been distributed thanks to bilateral and in-kind support (donations).
Livelihoods

Objective: Communities in crisis-affected areas and the displaced can cover their immediate food needs and protect and build resilient livelihoods.

The relevance of SARC’s food assistance remains critical, and food remains the most severe, life-threatening need as the provision of food for affected people is still a life-saving priority. The livelihoods plan is currently being defined.

Nevertheless, SARC through its branches and community-based volunteers has distributed 1,200,381 food items (which include standard and canned). It is important to highlight that the food parcels distributed come from bilateral contributions. The local procurement of 3,000 food parcels has started and progress on the status will be reported in the next operations update. 1,200 food parcels in SARC stocks are being prepared to be distributed. Each food parcel contains the following items:

<table>
<thead>
<tr>
<th>#</th>
<th>Item</th>
<th>Specification*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Rice</td>
<td>(3 packs of 2kgs. each filled in high humidity/water resistant packaging) option 1 (RICE, white medium grain, Camolino grade No 2 - broken grains max 6%)</td>
</tr>
<tr>
<td>2</td>
<td>WHITE SUGAR, FINE WHITE</td>
<td>(2 packs of 3 kgs. filled in high humidity/water resistant packaging)</td>
</tr>
<tr>
<td>3</td>
<td>BLACK PECO TEA LEAVES</td>
<td>(1 pack of 900g or 2 packs of 450g each filled in high humidity/water resistant packaging)</td>
</tr>
<tr>
<td>4</td>
<td>COOKING OIL VEGETABLE</td>
<td>(SUNFLOWER OIL) – 2 bottles of 1.5 Litres</td>
</tr>
<tr>
<td>5</td>
<td>TOMATO PASTE</td>
<td>28% - 30% concentrate, canned, long preservation (net weight – 800 grams)</td>
</tr>
<tr>
<td>6</td>
<td>OLIVE OIL</td>
<td>1 bottle – 1 Litres</td>
</tr>
<tr>
<td>7</td>
<td>Dry iodised SALT</td>
<td>1 x 500 gm packing - homogenous granulation</td>
</tr>
<tr>
<td>8</td>
<td>Vegetable Ghee</td>
<td>(1 pack of 1 kg)</td>
</tr>
<tr>
<td>9</td>
<td>Lentils - (brown/red)</td>
<td>1 pack of 1 kg filled in high humidity/water resistant packaging</td>
</tr>
<tr>
<td>10</td>
<td>Pealed/Split Lentils - (orange/red)</td>
<td>(1 pack of 1 kg filled in high humidity/water resistant packaging)</td>
</tr>
<tr>
<td>11</td>
<td>Beans, White</td>
<td>Medium size (2 kg – packed in 1 pack of 2 kg filled in high humidity/water resistant packaging)</td>
</tr>
<tr>
<td>12</td>
<td>Bulgur, Dry</td>
<td>(4 kg – packed in 2 packs of 2kg each filled in high humidity/water resistant packaging)</td>
</tr>
<tr>
<td>13</td>
<td>Halwa</td>
<td>1 box of 1 kg</td>
</tr>
</tbody>
</table>

SARC’s Livelihoods Unit has been monitoring markets and reporting on how livelihoods have been affected as well as working on possible response options and coordinating with different actors. More detailed livelihood assessments are needed and will be carried out.

Coordination meetings have been held with Movement partners and a Movement Livelihoods Working Group has been established to provide a platform for cooperation and coordination among Movement partners and to be responsible for overall livelihoods policy and positioning; coordinating and harmonizing all livelihoods support led or supported by SARC; and appropriate internal and external coordination on the livelihoods file.
Multi-purpose Cash

**Objective:** The affected households are provided with unconditional multipurpose cash assistance to address their basic needs (life-saving and longer-term) in an accountable and participatory manner.

SARC is carrying out comprehensive registration across all governorates, identifying the most affected groups (loss of income/livelihoods and/or shelter as well as additional vulnerability criteria). Furthermore, the registration form will be used as a starting point for targeting the sectoral shelter and livelihood responses using a cash modality. SARC is planning rapid market assessments in all target areas prior to the first installment of CVA.

The British Red Cross continues to support an expansion of the current model of partnership, where BRC leads all the support on CVA in SARC, including the scale-up for the earthquake response. SARC CVA has multiple commitments bilaterally and multilaterally from partners including ICRC and IFRC as well as from external partners and is planning to reach a caseload of up to 50,000 HHs with multipurpose cash in the initial response. Registration and verification are ongoing. The SARC CVA programme engaged branches in briefings on and planning of the Cash Assistance (Aleppo, Homs, Hama, Lattakia, and Tartous). In addition to the briefings and in collaboration with SARC CEA, CVA Programme conducted rapid market assessment (RAM) and CEA trainings for CVA staff, CVA and DM volunteers in Aleppo and Hama (incl. Homs staff and volunteers) to prepare for the upcoming CVA intervention.

On 20 March, SARC volunteers in Aleppo branch received RAM and CEA training in preparation for the CVA intervention. Source: SARC

Health & Care

(Mental Health and psychosocial support/community health / medical services)

**Objective:** Restored access of affected populations to essential health care services (emergency, primary, secondary, community/public health) including mental health and psychosocial support.

Up to 15 April, SARC has provided 1,551,053 medical services reaching approximately 1,126,956 affected people since the beginning of the emergency. These services include consultations through mobile health units, community-based health, physiotherapy including the provision of assistive devices for persons with disabilities, psychosocial support for affected people and responders, distribution of nutrition-related products; and maternal, newborn, and child health services. For more details, please see the infographic above. It is important to highlight that the medical services done, have been provided with bilateral and IFRC support. Nevertheless, funds through this Appeal will be allocated to the above activities.

From 15 to 19 February, the IFRC ERU Advance Team conducted assessments in Aleppo and Lattakia governorates. The ERU advance team focused on assessing the health needs and gaps (including trauma care, clinical, public
health, and mental health) and the feasibility to deploy different health ERU modules based on the needs and context. A final assessment report was completed and shared.

A clinical ERU team of medical experts in a mobile clinic configuration is being deployed to Lattakia. The mobile clinic will grow over time, eventually providing comprehensive primary care services including maternal and child, infectious disease, and non-communicable disease services. The German Red Cross is contributing bilaterally with two MHUs to be part of the ERU in Lattakia including one additional MHU provided by the Portuguese Red Cross and 2 standard kits with consumables and equipment provided by the French Red Cross and Japanese Red Cross.

As health is a strategic pillar of the earthquake response, significant efforts have been done by SARC and RCRC partners to streamline coordination. Given the organizational structure within the SARC Health Department and the health expertise of the various RCRC partners in the country, various health technical working groups have been formed with the aim of harmonizing approaches, ensuring an integrated results-based approach, and identifying gaps in terms of budgetary needs and additional technical support. These working groups include Primary and Secondary Care, CBHFA, Mental Health, Mobile Health Teams, and medical logistics among others. A productive Movement-wide meeting took place on 30 March where SARC, PNS, and ICRC were able to clearly identify budgetary gaps and agree on ways to address these, in addition to in-kind contributions and other technical support.

Water, Sanitation and Hygiene

**Objective:** Reduce the risk of waterborne diseases and ensure the dignity of the affected population through the provision of inclusive WASH services.

In the days after, the earthquake-affected people were hosted in temporary shelters. These shelters were mainly comprised of schools with inadequate access to water, sanitation, and hygiene facilities. As there is a need for students to return to the educational system, this is not a sustainable solution. Semi-permanent collective shelters are being rehabilitated to facilitate those who cannot return to their homes. Priority is placed on ensuring that these facilities have acceptable standards and access to safe and dignified WASH facilities.

The earthquake caused severe damage to the water and sewage network in the affected areas. The damages have caused certain areas to be cut off from the water supply, receiving no or insufficient water resulting in the need for water trucking to meet minimum standards. To reduce dependency on water trucking and to reduce the risk of cross-contamination due to leakages between sewage and drinking water systems, repairing these networks is of high importance. These projects are complex, costly, and require Movement-wide joint efforts. Projects are being identified in Aleppo, Lattakia, Idlib, Tartous, and Hama in collaboration with SARC and relevant authorities. Focus on improving the water and sanitation infrastructure and promoting and supporting good hygiene practices remains of utmost importance to avoid outbreaks of waterborne and other communicable diseases.

SARC reports 880,664 WASH items have been distributed with bilateral support from several partners.
Protection, Gender and Inclusion

**Objective:**
Ensure that Dignity, Access, Participation and Safety (DAPS) is considered a safe and inclusive response, by strengthening SARC’s PGI capacities, mainstreaming of PGI and safeguarding in relevant technical sectors, and strengthening of protection services.

Safeguarding will be integrated into the response activities, aiming to ensure minimum PGI standards are met, and referrals to safeguarding allegations are survivor-centred, safe, and confidential through referral channels to mitigate protection risks and enhance inclusive response and protection services. Mainstreaming of CEA and PGI in operations and services will be upheld.

Branches will be supported in carrying out systematic CEA/PGI work based on CEA community-based assessments and lessons learned.

The institutionalization of the CEA approach and PGI principles and their integration in operations and services, as well as in SARC programmes and plans, are crucial for SARC, which, in turn, will allow the organization to comply with the Code of Conduct and the Fundamental Principles of the International Red Cross and Red Crescent Movement.

The PGI plan is currently being defined for this operation, however, the following activities are planned:
- Workshop on PGI Minimum Standards and DAPS Framework
- Workshop on SGBV, PSS, and safe identification
- PSS+ protection kits for children
- Toys and materials for children

There are 8,000 dignity kits (4,000 for women, 4,000 for men) being locally procured. The dignity kits will be distributed once per person and each kit contains the following:

<table>
<thead>
<tr>
<th>Male Dignity Kits</th>
<th>Female Dignity Kits</th>
</tr>
</thead>
<tbody>
<tr>
<td>No.</td>
<td>Item Description</td>
</tr>
<tr>
<td>1</td>
<td>male Underwear -set of 2 pieces</td>
</tr>
<tr>
<td>2</td>
<td>Roll Deodorant</td>
</tr>
<tr>
<td>3</td>
<td>Shaving Cream</td>
</tr>
<tr>
<td>4</td>
<td>Razor, disposable</td>
</tr>
<tr>
<td>5</td>
<td>Hairbrush</td>
</tr>
<tr>
<td>6</td>
<td>Shaving brush</td>
</tr>
<tr>
<td>7</td>
<td>Bath Towel</td>
</tr>
<tr>
<td>8</td>
<td>Face Towel</td>
</tr>
<tr>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
Risk Reduction, climate adaptation, and Recovery

**Objective:** Strengthen resilience and capacities of disaster and crisis affected communities through climate-smart community-based risk reduction actions informed by enhanced Vulnerability Capacity Assessments and advanced planning.

SARC’s DRR approach includes resilience with communities and has already started to identify hazards in each governorate and create hazard scenarios.

After the earthquake, SARC identified the possible scenarios. The DM team has conducted capacity-building workshops to enhance SARC’s staff and volunteer competencies in earthquake related topics including evacuation plans and corrective actions before, during, and after an earthquake while working with the communities to understand the risks, mitigation, and adaptation.

SARC has started projects in two governorates and up to 4 April 2023, 50 workshops have been conducted with the participation of 718 volunteers and 334 staff.

Risk Reduction and Climate adaptation are expected to be central components of recovery planning. Currently, SARC with the support of the IFRC, its membership, and in coordination with other UN Agencies, is discussing plans for early recovery assessments to inform the subsequent planning.

The following activities will be prioritized, depending on funding:
1. Climate change adaptation training
2. Training on improvements and early action mechanism
3. Training on risk context and identification of high-risk areas
4. Community-based interventions
## Enabling approaches

### National Society Strengthening

**Objectives:**
To reinforce SARC HQ and branch capacities to respond to the operation (repair structures) and enhance volunteer and staff competencies in preparedness and response and continued service delivery in an inclusive manner.
SARC responds effectively to the wide spectrum of evolving crises and its auxiliary role in disaster risk management is well-defined and recognized.

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Since the onset of the earthquake, SARC Headquarters has maintained regular communication with the staff and volunteers of the affected branches to ensure their safety and security by providing instructions and protective equipment and has established solid coordination mechanisms to ensure a timely and effective response. SARC is focused on strengthening its organizational and operational capacity by linking NSD priorities with the emergency response at headquarters and branches and, in both cases, securing all forms of resources to support branches and improve the integrated response. This will ensure that they can deliver life-saving assistance and services through branch staff and volunteers, who in turn need to be managed well and equipped with the necessary knowledge and safety gear and to have an enabling work environment.

SARC has prioritized the following areas and sub-sectors in order to provide the necessary support to response operations while also ensuring the relevance, quality, and coverage of services:

- HQ & Branch capacity strengthening and development through implementing the Branch Plan of Action based on self-assessments using the PER tool in Aleppo, Lattakia, Hama, and Tartous, including software and hardware support.
- Volunteer management and development (volunteering policy, the duty of care, volunteer management system, SARC CoC, policies).
- Financial development underpinned with a solid resource mobilization plan, including core cost policy.
- Mainstreaming CEA and PGI in operations and services.
- Logistics capacity enhancement and increase of warehousing capacity and fleet.

While providing humanitarian aid and services, SARC is focused on a thorough understanding of the needs and priorities of affected people by integrating meaningful community engagement, timely and transparent communication, and feedback mechanism for effective response. Moreover, by adhering to PGI minimum standards, SARC ensures that no one is left behind, and services are available for all. Dignity, Access, Participation, and Safety (DAPS) is considered a safe and inclusive response, as well as a means of strengthening protection services. SARC continued meetings with the IFRC NSD regional and country staff on volunteering in emergencies to support the National Society in improving the volunteer management in the earthquake response and, in coordination with relevant departments, particularly the HR department, assist the SARC NSD team in developing volunteering policy, insurance for volunteers and solidarity mechanisms to ensure the duty of care.
Coordination and Partnerships

Objective: Ensure a well-coordinated emergency operation and availability of funding.

IFRC Membership
IFRC has been actively supporting SARC through Membership coordination that sets the standards for partners to collaborate under a shared leadership model. Adopting Federation-wide planning has resulted in a consistent approach, allowing participation and collaboration by all partners in planning and implementation.

Each programmatic area (e.g., Health & MHPSS, WASH & Shelter, Livelihoods, Relief) is organized under one lead or co-leads working as a counterpart to SARC to ensure coherence and consistency for partner input, and in turn, provide information to partners for reporting. The technical leads build on existing structures and capacities in-country, provided by each of the partners present. Support from SARC technical advisory functions in NSD, CEA, PGI, Cash, and Logistics is organized following the same principle of shared leadership, allowing for partners best placed to co-lead with SARC in these cross-cutting functions.

In its role as membership coordinator, IFRC has been co-leading with SARC the structure for the overall operation, and ensuring relevant and timely technical, HR, and financial resources. The intent behind this approach is to have larger humanitarian impact from combined and coordinated resources and position SARC’s critical role in the response.

Some of the ongoing activities include:
- Ongoing information sharing, inter alia in coordination at the technical working group level, on all activities by IFRC-membership partners.
- Feeding into a harmonized Federation-wide MEAL plan; including a logframe that aligns with the SARC response plan and the IFRC Operational Strategy for a coordinated approach to measuring the impact of the membership-wide response.
- Coordination of field movements of membership partners, including visits by IFRC, National Societies, and donors, to affected regions to reduce the burden on impacted persons, and SARC branch staff and volunteers.
- A unified voice vis-à-vis SARC with respect to approach, standards, and expectations (both technical and strategic).

Movement Coordination
IFRC coordinates with ICRC and NSs on support to SARC and to the earthquake operation. Prior to and since the onset of the emergency, weekly coordination meetings, led by SARC, have brought together Movement actors to scale up actions in response to the earthquakes and increase the collective impact of the Movement in Syria. Partners mobilized resources and re-allocated in country resources to support the SARC response plan. In line with the Seville Agreement 2.0, SARC holds the role of convener for all aspects of the response and has the central role in co-creating, delivering, and coordinating the Movement’s collective response, in accordance with its operational plans and capacity. In that spirit, a mini summit was held on 2 March, and a joint statement issued which articulates the commitment, roles, and responsibilities of SARC, IFRC, and ICRC to move toward a Movement Security Framework agreement for all Movement partners, including in-country PNS, thus strengthening existing Movement Coordination mechanisms. A collaborative approach to drawing up and disseminating guidelines and key messages related to the earthquake was also agreed upon during the mini-summit.
Fundraising and Engagement with External Partners

Interested donors and external partners, including RCRC National Societies, governments, the private sector, and other humanitarian organizations, have been solicited to bring together resources and expertise under the launched Emergency Appeal. The engagement has been ongoing and continues to generate interest and buy-in from stakeholders to commit funding toward critical components of the SARC response plan. The funding for the EA is currently at 33%. The appeal may increase based on ongoing assessment findings and the need to invest in the resilience of the affected communities. By working together with its partners and developing its resources, the IFRC can provide effective and efficient support to those in need and able to mitigate the impact of the devastating earthquakes in Syria.

IFRC, together with SARC, has been disseminating key messages and audio-visual content developed for the earthquake response operation with international partners and through IFRC communications channels to support the fundraising for the Emergency Appeal. IFRC has also been promoting messages in the international media to highlight the humanitarian needs in Syria.

Interagency Coordination

IFRC has been liaising actively with country-level coordination structures, including the Shelter and Health Clusters, and the Cash Working Group, to ensure that gaps are identified and contribute to collaboration at the national level. Engagement is also ongoing for the response in hard-to-reach areas in northwest Syria, with support from the IFRC. Despite efforts to reach impacted people in NWS, SARC has not been granted regular access for the purpose of delivering humanitarian assistance.

Grants Management

IFRC has been working closely with donors to ensure compliance with the requirements and conditions of funding. IFRC is also completing a harmonized project MEAL framework that incorporates all Movement partner indicators and activities, to facilitate and streamline reporting by SARC against donor criteria.

Humanitarian Diplomacy and Influencing

IFRC is playing a crucial role in humanitarian diplomacy in response to the earthquake emergency in Syria. Engaging with a range of actors, including governments, inter-governmental organizations, other humanitarian players, and the media, to ensure that the needs of those affected by the emergency are well addressed and met. IFRC is working closely with SARC to continually assess the changing needs and respond accordingly. The IFRC uses its humanitarian diplomacy efforts to engage with relevant actors to secure support for the response efforts and emphasize SARC’s neutral, impartial, and independent position. Additionally, IFRC is working closely with SARC to advocate for access to quake-hit areas and to ensure that the delivery of assistance is not hindered by political or security considerations. IFRC continues its constant support to SARC to reach the earthquake-affected areas all over the country, and to support SARC’s continued efforts to carry out effective crossline humanitarian activities. So far, SARC has deployed convoys to reach Tal-Rifa’at, Fafin, and Sheikh Maksoud towns in Aleppo and Aleppo’s northern countryside. IFRC facilitated the transfer of funds and goods into the country to support the earthquake response and ongoing support to affected people, which was not possible earlier despite significant humanitarian needs due to sanctions.
Objective: The IFRC is working as one organization, delivering what it promises to National Societies and volunteers, and leveraging the strength of the communities with which they work as effectively and efficiently as possible. The Secretariat provides strategic orientation, facilitation, and coordination considering long-term positioning and further capacity development of the National Society. This will be done by building on existing structures for large-scale programming, toward strong guardianship and accountability for all programming. The IFRC Secretariat will facilitate channeling global resources to sustain the localized response and recovery efforts.

Human Resources
Since the beginning of the earthquake response, IFRC Syria Delegation has taken the following steps to ensure a coordinated response across the Membership:

- Duty of care, including establishing a security structure that allows consistent access for staff to support and monitor ongoing programming in affected areas.
- Identification and recruitment of key positions to provide continuing Secretariat services to SARC and the wider Membership in Syria, focusing on the specific value add of IFRC and the services and leadership provided by in-country members.
- Shared leadership structure model, allowing all partners to co-lead with SARC to ensure coherence and consistency across the Movement, with the best-placed partners as technical leads and supporters to SARC toward a coordinated Membership-wide response. This builds on existing structures and capacities in the country.

Resource Mobilization
The main accomplishments have been:

- Support SARC in identifying and developing of project proposals.
- Coordinate and liaise between donors and SARC on programmatic planning and implementation.
- Organize call for support meetings on government, private and movement levels to raise funds for the Emergency Appeal.
- Develop a resource mobilization strategy to ensure that outreach to Movement and non-Movement partners, as well as the tracking of pledges and development of fundraising materials, is shared effectively and efficiently.
- Initiate and lead on developing the resource development and sustainability strategy exercise for SARC.

Logistics and Supply Chain
In the immediate aftermath of the earthquake IFRC Global Humanitarian Services and Supply Chain management (GHS&SCM) operations and the IFRC country delegation logistics team supported SARC supply chain efforts.

- In close collaboration with SARC, a mobilization table based on rapid assessment of the most urgent needs was launched in February.
- IFRC supports PNSs to organize the delivery of IKDs to Syria through SARC.
- IFRC launched procurement of NFIs – 10,000 tarpaulins, 20,000 jerry cans, and 10,000 kitchen sets and preparing procurement of 10,000 hygiene parcels and 10,000 dignity kits. Also preparing procurement of 25,000 food parcels.
- Agreement signed with Lebanese Red Cross for supporting clearance and transportation of goods arriving in Lebanon with final destination Syria.
• IFRC procured from Global Fleet Unit for SARC seven 4x4 vehicles to support SARC activities on the ground and three vehicles for IFRC Delegation in the country to support the movement of IFRC teams.

**Communications**

Since the earthquake struck, SARC and IFRC have continued working together on ensuring the communities have **access to lifesaving information**, receive regular updates on the humanitarian response, highlight the needs and showcase the aid distribution through social media, media, and other communications channels. March 2023 marked 12 years since the start of the Syrian crisis. Both SARC and IFRC published content showing how the earthquake is a crisis on top of a crisis.

Earthquake Response Key Messages have been developed and updated regularly. SARC Communications Unit has been dispatched to the affected areas for content production and to support the branch communications units. IFRC has deployed a Communications Coordinator to support SARC, IFRC, and Movement Partners on communications, providing capacity-building and enhancing the coordination of communications. IFRC Communications Coordinator has been providing support both at the SARC headquarters as well as at the branches. IFRC has continued sharing content, produced by SARC, with the partners to be distributed and used in their respective markets.

**Planning, Monitoring, Evaluation, and Reporting (PMER)**

Situation Reports (SitReps) have been prepared since the onset of the emergency and shared with stakeholders and are also available on the Go platform. A PMER framework and plan have been completed for the operation and will be adapted after the revision of SARC’s response plan.

**Federation-wide reporting:** Standard Indicators are being aligned to SARC’s response plan. IFRC PMER team has coordinated with each sector focal point to provide global indicators for Federation-wide reporting. A platform will be developed with the SARC Information Management team. Achievements against the indicator values will be collected on a regular basis to report on the Emergency Appeal and SARC’s response plan. A Reporting schedule will be established to provide Operations Updates as per our standard reporting procedures. SARC Performance and Partnership Department will produce Monthly updates to share the latest achievements in the operation with all partners. Donor reporting will be monitored to ensure timely reporting.

**D. FUNDING**

To date, 32 percent (which includes hard, soft and in-kind contributions) of the Appeal’s multilateral funding requirements has been covered. The IFRC kindly encourages increased donor support for this Emergency Appeal to allow the Syrian Arab Red Crescent to continue to provide support to the immediate and mid-to-long-term needs to the earthquake-affected populations through cash and voucher assistance, food security interventions, shelter, and health.

[Click here for the donor response](#) (only reflects hard and in-kind contributions).
Contact information

For further information, specifically related to this operation please contact:

In the Syrian Arab Red Crescent
• Secretary General: Khaled Erksoussi, email Khaled.erksoussi@sarc-sy.org, phone +963 968 500 800.
• Operational coordination: Tammam Muhrez, Head of Operations, email tammam.muhrez@sarc-sy.org, phone +963 953 666 635.

In the IFRC
IFRC Regional Office for MENA:
• Dr Hosam Faysal, Regional Head of Health, Disasters, Climate & Crises, email hosam.faysal@ifrc.org, phone +961 71 802 916
• Nader Bin Shamlan, Operations Coordinator, email Nader.BINSHAMLAN@ifrc.org, phone +961 81 131 074

For IFRC Resource Mobilization and Pledges support:
• Francesco Volpe, Regional Head of Strategic Engagement and Partnerships, francesco.volpe@ifrc.org, +961 70146103

For PMER support (planning, monitoring, evaluation and reporting inquiries)
• IFRC MENA Regional Delegation: Nadine Haddad, Regional PMER Manager; phone +961 71 802 775; email: Nadine.haddad@ifrc.org

IFRC Syria Country Delegation:
• Mads Brinch Hansen, Head of Delegation, email: mads.brinch@ifrc.org, phone: +963 959 999 869
• Gwendolyin Eamer, Head of Emergency Operations, email: gwen.eamer@ifrc.org, phone: + 963 94 11 74 669

IFRC Geneva:
• Rena Igarashi, Operations Coordination Senior Officer, email: rena.igarashi@ifrc.org, phone +41 79 960 2532

For In-Kind Donations and Mobilization table support:
Global Logistics Services - Goran BOLJANOVIC, Head of Unit, Global Humanitarian Services & Supply Chain Management (GHS & SCM), MENA, email goran.boljanovic@ifrc.org, phone +36 20 453 6960

Reference documents

Click here for:
• Revised Emergency Appeals and updates
• Operational Strategy

How we work

All IFRC assistance seeks to adhere the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable, to Principles of Humanitarian Action and IFRC policies and procedures. 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.