

ACT Alliance

**Syria Protracted Crisis - Developing the
Resilience of Affected People and Emergency
Response for Affected Communities of Syria-
Türkiye Earthquake**

Appeal

SYR231 – Revision 3

actalliance

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Project Summary Sheet															
Project Title	Syria Protracted Crisis - Developing the Resilience of Affected People and Emergency Response for Affected Communities of Syria-Türkiye Earthquake														
Project ID	SYR231														
Location	Syria - Türkiye														
Project Period	Start Date: 1 January 2023 End Date: 31 December 2024 No. of months: 24 months 12 Months for HIA- (May 2023- April 2024)														
Requesting Forum	<i>Syria ACT Forum</i> <input checked="" type="checkbox"/> The ACT Forum officially endorses the submission of this Appeal														
Requesting members	<ul style="list-style-type: none"> - Middle East Council of Churches - MECC - Department of Ecumenical Relations and Development of the Greek Orthodox Patriarchate of Antioch and all the East - GOPA-DERD - Christian Aid - CA - Swiss Church Aid - HEKS/EPER - Lutheran world Federation- LWF - Hungarian Interchurch Aid- HIA 														
Contact	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Name</td> <td>Jana Nasr</td> </tr> <tr> <td>Email</td> <td>actalliance.syria.coordinator@gmail.com</td> </tr> <tr> <td>Other means of contact (whatsapp, Skype ID)</td> <td>+961 70 643 922</td> </tr> </table>	Name	Jana Nasr	Email	actalliance.syria.coordinator@gmail.com	Other means of contact (whatsapp, Skype ID)	+961 70 643 922								
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Local partners	CA will work with 1 local partner in northwest Syria. For confidentiality / security, their name has been left off of the appeal but more details can be directly provided to funding members. <ul style="list-style-type: none"> - Partner B (Aleppo and Idleb) - MIDMAR (Aleppo and Idleb) - Hurras Network (Aleppo and Idleb) LWF: <ul style="list-style-type: none"> - Caritas Syria- Aleppo - Another local partner- still in process to identify. MECC: <ul style="list-style-type: none"> - St. Ephrem Patriarchal Development Committee (EPDC) - GOPA-DERD HIA <ul style="list-style-type: none"> - International Blue Crescent Relief and Development Foundation (IBC) 														
Thematic Area(s)	<table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> Cash and Vouchers</td> <td><input checked="" type="checkbox"/> Shelter and household items</td> </tr> <tr> <td><input type="checkbox"/> Camp Management</td> <td><input checked="" type="checkbox"/> Food and Nutrition</td> </tr> <tr> <td><input type="checkbox"/> Disaster Risk Management</td> <td><input checked="" type="checkbox"/> MHPSS and CBPS</td> </tr> <tr> <td><input checked="" type="checkbox"/> WASH</td> <td><input checked="" type="checkbox"/> Gender</td> </tr> <tr> <td><input checked="" type="checkbox"/> Livelihood</td> <td><input checked="" type="checkbox"/> Education</td> </tr> <tr> <td><input checked="" type="checkbox"/> Health</td> <td><input checked="" type="checkbox"/> Advocacy</td> </tr> <tr> <td><input type="checkbox"/> Other: _____</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Cash and Vouchers	<input checked="" type="checkbox"/> Shelter and household items	<input type="checkbox"/> Camp Management	<input checked="" type="checkbox"/> Food and Nutrition	<input type="checkbox"/> Disaster Risk Management	<input checked="" type="checkbox"/> MHPSS and CBPS	<input checked="" type="checkbox"/> WASH	<input checked="" type="checkbox"/> Gender	<input checked="" type="checkbox"/> Livelihood	<input checked="" type="checkbox"/> Education	<input checked="" type="checkbox"/> Health	<input checked="" type="checkbox"/> Advocacy	<input type="checkbox"/> Other: _____	
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Project Outcome(s)	<p>1.1 People affected by the conflict received multi-sectoral (WASH, Education, health and Energy) support to alleviate their hardship through a coordinated approach.</p> <p>1.2 People affected by Syria-Türkiye earthquake receive multi-sectoral (Food, WASH, Health, NFI's, CASH and Shelter) lifesaving humanitarian support.</p> <p>2.1 People affected by the conflict receive support and training to find jobs or means of livelihood.</p> <p>2.2 People affected by the conflict given the necessary access to emergency mental health, psychological well-being support and proper education</p> <p>2.3 People affected by the conflict were given the necessary access to nutritious food.</p> <p>2.4 Institutions restored / rehabilitated in conflict affected areas to allow citizens to regain some normalcy and independency</p> <p>3.1 Members, partners and church capacities are strengthened through awareness and Social cohesion is promoted among targeted communities</p>																																																																																																																																			
Project Objectives	<p>1. Provide multi sectorial humanitarian support to people affected by the Syrian conflict in all governorates and Northern Syria, and affected people of Syria-Türkiye Earthquake in both Syria and Türkiye.</p> <p>2. Build on the resilience of the people affected by the conflict by providing livelihood, PSS and restoration support.</p> <p>3. Enable the community to be agents of change by capacity building and advocacy on different issues.</p>																																																																																																																																			
Target Recipients	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #c00000; color: white;"> <th colspan="11">Profile</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Refugees</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;">IDPs</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;">host population</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;">Returnees</td> <td colspan="3"></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td colspan="10">Non-displaced affected population</td> </tr> </tbody> </table> <p>No. of households (based on average HH size): 300,000</p> <p>Sex and Age Disaggregated Data:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #c00000; color: white;"> <th colspan="11">Sex and Age</th> </tr> <tr> <th rowspan="2"></th> <th colspan="2">0 - 5 yrs</th> <th colspan="2">6 - 18 yrs</th> <th colspan="2">19 - 65 yrs</th> <th colspan="2">Above 65+</th> <th colspan="2">total</th> </tr> <tr> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> </tr> </thead> <tbody> <tr> <td>CA</td> <td>0</td> <td>0</td> <td>16480</td> <td>16912</td> <td>6323</td> <td>19563</td> <td>3536</td> <td>6712</td> <td>26339</td> <td>43187</td> </tr> <tr> <td>MECC</td> <td>800</td> <td>800</td> <td>12620</td> <td>13620</td> <td>19075</td> <td>19030</td> <td>14605</td> <td>16605</td> <td>47100</td> <td>50055</td> </tr> <tr> <td>GOPA-DERD</td> <td>543</td> <td>427</td> <td>669</td> <td>533</td> <td>805</td> <td>640</td> <td>649</td> <td>534</td> <td>2666</td> <td>2134</td> </tr> <tr> <td>LWF</td> <td>5,045</td> <td>5,235</td> <td>8,325</td> <td>10,545</td> <td>6900</td> <td>7700</td> <td>5275</td> <td>5275</td> <td>25545</td> <td>28755</td> </tr> <tr> <td>HEKS-EPER</td> <td>40,800</td> <td>38,200</td> <td>106,180</td> <td>96,080</td> <td>181,384</td> <td>177,184</td> <td>346,996</td> <td>340,976</td> <td>665,900</td> <td>661,900</td> </tr> <tr> <td>HIA</td> <td>2516</td> <td>2516</td> <td>2223</td> <td>2223</td> <td>2737</td> <td>3139</td> <td>2727</td> <td>2829</td> <td>10203</td> <td>10707</td> </tr> </tbody> </table> <p>5% of CA target will be PwD's <i>Total Beneficiary Number: 1,572,338</i></p>	Profile											<input type="checkbox"/>	Refugees	<input checked="" type="checkbox"/>	IDPs	<input checked="" type="checkbox"/>	host population	<input checked="" type="checkbox"/>	Returnees				<input checked="" type="checkbox"/>	Non-displaced affected population										Sex and Age												0 - 5 yrs		6 - 18 yrs		19 - 65 yrs		Above 65+		total		M	F	M	F	M	F	M	F	M	F	CA	0	0	16480	16912	6323	19563	3536	6712	26339	43187	MECC	800	800	12620	13620	19075	19030	14605	16605	47100	50055	GOPA-DERD	543	427	669	533	805	640	649	534	2666	2134	LWF	5,045	5,235	8,325	10,545	6900	7700	5275	5275	25545	28755	HEKS-EPER	40,800	38,200	106,180	96,080	181,384	177,184	346,996	340,976	665,900	661,900	HIA	2516	2516	2223	2223	2737	3139	2727	2829	10203	10707
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Project Budget (USD)	16,243,918																																																																																																																																			
Balance requested on this revision (USD)	5,568,708																																																																																																																																			

REVISION 3

The 3rd revision of this appeal is primarily an update of the results framework, this is a result of coordination efforts and assessment of different programmatic and geographic areas that ACT Requesting Members have undertaken to refine activities and address changing needs. Bases on this updates and funds received, the new budget requested is **USD 5,568,708**.

Reporting Schedule

Type of Report	Due date
Situation report	7 March 2023 <i>Bi-weekly SitReps (1st SitRep covering till 28/2/2023,) for the 1st 3 months, and then Quarterly</i>
6 months Reports (narrative and financial)- Emergency Funds- back donor request- cover till 30/60/2023	15 July 2023
9 months Reports (narrative and financial)- Emergency Funds- back donor request- cover till 31/10/2023	30 November 2023
Interim Reports (narrative and financial) till 31-01-2024	29 February 2024
Final narrative and financial report (60 days after the ending date)	28 February 2025
Audit report (90 days after the ending date)	31 March 2025
External Evaluation	31 May 2025

Please kindly send your contributions to the following ACT bank account:

US dollar

Account Number - 240-432629.60A
IBAN No: CH46 0024 0240 4326 2960A

Account Name: ACT Alliance

UBS AG
8, rue du Rhône
P.O. Box 2600
1211 Geneva 4, SWITZERLAND
Swift address: UBSWCHZH80A

Please note that as part of the revised ACT Humanitarian Mechanism, pledges/contributions are **encouraged** to be made through the consolidated budget of the country forum, and allocations will be made based on agreed criteria of the forum. For any possible earmarking, budget targets per member can be found in the “Summary Table” Annex, and detailed budgets per member are available upon request from the ACT Secretariat. For pledges/contributions, please refer to the spreadsheet accessible through this link [00 Appeals reports](#). The ACT spreadsheet provides an overview of existing pledges/contributions and associated earmarking for the appeal.

Please inform the ACT Secretariat Humanitarian Team [<humanitarianfinance@actalliance.org>](mailto:humanitarianfinance@actalliance.org) of all pledges/contributions and transfers, including funds sent direct to the requesting members.

As Syria is a sanctioned country, contributions to this appeal should be communicated to ACT secretariat **before any transfer is made.**

If funds pledged are uniquely for Turkey, please note that any reference to Syria or the appeal code SYR231 should not be mentioned in the bank transfer, nor any supporting documents provided to your bank. Funds can be sent to our USD bank account with notification to the above email address.

Please also be sure to inform us at the time of your pledge of any back donor or other special requirements relevant to the donation. In line with Grand Bargain commitments to reduce the earmarking of humanitarian funding, if you have an earmarking request in relation to your pledge, a member of the Secretariat’s Humanitarian team will contact you to discuss this request. We thank you in advance for your kind cooperation.

For further information, please contact:

Middle East and North Africa

ACT Regional Representative, Rachel Luce (Rachel.Luce@actalliance.org)
Humanitarian Advisor, George Majaj (George.Majaj@actalliance.org)

Visit the ACT website: <https://actalliance.org/>

Niall O’Rourke

Head of Humanitarian Affairs
ACT Alliance Secretariat, Geneva

BACKGROUND

Context and Needs

After nearly 12 years of conflict, Syria remains a complex humanitarian and protection emergency characterized by ongoing hostilities and their long-term consequences, including widespread destruction of civilian infrastructure, economic collapse, explosive ordnance contamination, Covid 19, and one of the largest number of internally displaced people in the world.

An earthquake with a magnitude of 7.8, with at least 1,200 aftershocks have been reported, followed by a second earthquake of 7.5 magnitude, at a depth of 17.925 km (11.14 miles) has occurred at Central Turkey near the city of Gaziantep, as reported by the National Earthquake Information Center (NEIC) of the USGS on February 06, 2023, 01:41:15 UTC.

The earthquakes which hit communities at the peak of winter, have left hundreds of thousands of people, including small children and older people, without access to shelter, food, water, heat and medical care in freezing cold temperatures. The death toll from earthquakes in Turkey and Syria has surpassed 50,000 people—including 45,968 confirmed deaths in Turkey and 7,259 in Syria as of March 2023.

Close to 9 million people in Syria have been affected by the devastating earthquakes. The damage is worse in the north-west, where more than 4.2 million people have been affected in Aleppo, and 3 million people have been affected in Idlib. More than 7,400 buildings have been completely or partially destroyed.

In many ways, the humanitarian needs across the whole of Syria are currently at their highest since the start of the conflict, and households are reverting to negative coping mechanisms more frequently than before. This includes child labour, child marriage, sale of productive assets, and borrowing (69% of households have taken on more debt since mid-2020) – all of which increase protection needs and/or reduce households' capacity for self-sustenance in the future. As household resilience decreases, humanitarian needs increase.

- Across the whole of Syria there are 14.6 million people (67% of the total population) who require support to meet their needs, an increase of 1.2 million people from 2021¹.
- 6.9 million are internally displaced people (IDP) - many having been displaced multiple times and up to 80% of those are internally displaced and in need of assistance are women and girls.
- 5.37 million people affected by the quake will need shelter assistance across the country, according to the Syria representative of the UN high commissioner for refugees, Sivanka Dhanapala².
- On 27 April, Ms Lisa Doughten, Director of the Humanitarian Finance and Resource Mobilization Division, briefed the Security Council on the humanitarian situation in Syria on behalf of the Under-Secretary-General for Humanitarian Affairs, Mr Martin Griffiths. The statement noted the United Nations (UN) and humanitarian partners' ongoing efforts and pointed out that much more needs to be done. Ms Doughten flagged the exacerbated needs in the country following the earthquakes noting that 15.3 million people - more than half of the total population - required humanitarian assistance and protection support even before the earthquake.³
- The small area of opposition held northwest (NW) Syria is home to some of the most severe humanitarian needs and densely populated camps. The population is over 4.4 million alone and 93% of those are in need of assistance - virtually everyone. Over 2.8 millions of those residing in the NW (over half) are IDPs, and 1.7 million of them living in overcrowded camps or informal settlements that lack access to basic services. Over half of those in camps are under the age of 18.
- The constant threat of violence, repeated displacement, and lack of available services has a profound impact on the psychological wellbeing and education of children and young people. More than 75% of Syrian children in the NW displace PTSD symptoms and need critical MHPSS. There has also been an increase in attempts and suicides amongst children, this is incredibly worrying and shows how desperate and hopeless the situation has become.

¹ UNICEF annual report, 2022

² Ibrahim, A., Stepansky, J., & Mayberry, K. Turkey-Syria earthquake updates: Syrian Gov't approves NW aid. Earthquakes News | Al Jazeera, February 10 2023.

³ Humanitarian update syrian arab republic - issue 11: April 2023 - Syrian Arab Republic. ReliefWeb. (2023, June 1). <https://reliefweb.int/report/syrian-arab-republic/humanitarian-update-syrian-arab-republic-issue-11-april>

Since the beginning of 2022, Syria has faced an accelerated economic collapse, which is the worst economic crisis since the conflict began⁴. The attempt of the Central Bank of Syria to change its official exchange rate of the SYP towards the USD is unfortunately not catching up to what is actually happening in the market and in everyday life of those who suffer the most. The ongoing economic collapse has made people's access to basic services across Syria more difficult, hampered by damaged infrastructure, lack of critical supplies, and a decreasing purchasing power, including challenges to safe and free movement.

The situation has been exacerbated by the COVID-19 pandemic, which has affected the entire socio-economic system and has led to a dramatic loss of livelihoods across the country. The impact of this is expected to be the hardest for 90 per cent of the Syrian population who are living below the poverty line. Due to COVID-19, there has been a decrease of 19.8 percent in the average number of employees in the Micro, Small and Medium Enterprises (MSME) sector. The unemployment rate was estimated at close to 50 per cent of the working-age population at the end of the first quarter of 2021. In particular, there was a decrease in employment of 18.2% for males and 19.7 % for females. Most enterprises lost significant revenue ranging from 40 percent to 100 percent, and about 13% had to close their operations. The impact on livelihoods and the gloomy economic prospects poses an even higher risk of individuals joining armed groups and committing crimes, and due to the fear of livelihoods loss, parents are encouraging early marriages and sending their children to work more, and some 2.45 million children inside Syria are out of school, while 1.6 million are at risk of dropping out.

Add to this the more recent Cholera outbreak in September 2022⁵, and the 2023 earthquake which is challenging a health system that is struggling to meet existing basic needs. As well as the uncertainty around the renewal of the UN cross-border mechanism in January 2023. With few viable alternatives to it, this would affect millions of already vulnerable Syrians in the NW of the country, during the harsh winter months.

The ongoing Unilateral Coercive Measures imposed on Syria are aggravating the vulnerability of the Syrian population at several levels: Affecting the access to basic services provided by the state, impeding the rehabilitation of damaged infrastructure, limiting the import of essential materials such as agricultural inputs or crude oil derivatives and creating goods shortages. UCMS are thus significantly destabilizing the economy, impacting the energy sector (leading to prolonged electricity outages, constantly increasing transportation costs and increasing the need for humanitarian aid).

According to the UNOCHA situation report⁶, the primary needs identified include: 1) heavy machines for debris removal, 2) cash distribution, 3) tents, isolation sheets and NFIs, 4) heating materials, 5) emergency food and bread assistance, 6) water trucking and garbage removals, 7) ambulances and medicines, 8) fuel for hospitals and health centers, 9) rental trucks and vans to transport people, 10) reception centers for IDPs and 11) safe spaces for women and girls. These needs were in line with preliminary findings of the assessments that ACT Alliance members in Syria are undertaking, and based on these findings, the response was designed.

Major power outage has resulted in fuel shortages in hospitals. Hospitals and blood donation centers need support to treat the injured and are operating with limited resources. The Health Cluster report that urgent medical needs in hospitals include serums, gauze bandages, painkillers, medical plaster and blood bags.

Other urgent needs include fuel for generators and heating as well as burial bags.

Supplies of daily bread is a primary priority need currently many people are reported to only have received limited water, apples or bread slices.

Three months since two devastating earthquakes and numerous aftershocks hit south-east Türkiye and Syria, millions of people are still in need of urgent humanitarian support. The earthquakes have pushed many families to the brink and left numerous people without access to essential services including safe water, education and medical care.

⁴ Country profile, Syria, The Economist Intelligence Unit, 2022. 27 June 2022

⁵ Cholera outbreak in Northeast Syria – NES NGO FORUM- September 2022

⁶ NORTH-WEST SYRIA Situation Report Last updated: 10 Feb 2023; [Situation Report - North-west Syria - 10 Feb 2023.pdf](#)

Millions of people are still internally displaced after being forced from their damaged or destroyed homes and continue to live in temporary shelters. The earthquakes also caused widespread damage to schools and other essential infrastructure, further jeopardizing the well-being of children and families.

By mid-May, an estimated 1.6 million people were still living in informal sites or next to their damaged houses, sheltered in tents or makeshift shelters with limited or no access to services. An additional 800,000 people were living in tents in formal settlements across earthquake affected areas. Families in informal settlements are still in need of improved shelter, basic household items and improved water and sanitation services.⁷

In Türkiye, AFAD's (Disaster and Emergency Management Presidency of Turkey operating under the Turkish Ministry of Interior) relief efforts were hampered by damaged roads, winter storms, and disruption to communications hampered relief effort, which included a 60,000-strong search-and-rescue force, 5,000 health workers and 30,000 volunteers. Following Turkey's call for international help, more than 141,000 people from 94 countries joined the rescue effort. Almost two million people have been evacuated from Kahramanmaraş, Gaziantep, Şanlıurfa, Diyarbakır, Adana, Adıyaman, Osmaniye, Hatay, Kilis, Malatya and Elazığ by the Gendarmerie and with their own means and registered by applying to the governorships and district governorships in the provinces at destination.

Initial assessments were conducted by HIA and its local partner through two separate field visits to the most affected provinces (Gaziantep, Kilis, Şanlıurfa, Hatay, Kahramanmaraş, Malatya, Adıyaman). Although thousands have been evacuated and local stakeholders do their best to provide for everyone, basic needs have not been met yet in the region. Drinking water and toilets are the most needed. Nutrition packages: including canned foods, dried food (long lasting foods such as legumes, rice, etc.), oil is needed especially by people staying in tent/container camps. Distribution of dried food packages needs to be prioritized. Hygiene packages, sanitary toilets, shower cabins, sanitary pads etc. are also essential needs and finally, underwear for all ages is urgently needed.

Based on HIA's multiple needs assessments and face-to-face meetings with local authorities and representatives of international aid agencies in the earthquake-affected regions, most urgent needs were identified as follows:

1) WASH facilities (portable toilets and shower cabins); 2) containers; 3) baby kits (formula, diapers, wet wipes); 4) female hygiene kits; 5) durable food packages and drinking water; 6) infant formula packs; 7) Psychosocial assistance

According to the HNO 2022, needs continue to be high in all areas of Syria and for all sectors, compounded by the challenge of less funding according to the overall estimated budget.

Food and Nutrition: prices are on the rise while food availability is decreasing. The top barrier to accessing food is the inability to afford essential food items. A deepening economic crisis, coupled with the significant destruction of infrastructure over a decade of conflict primarily by the Syrian government and its allies, have led to severe wheat shortages. As the situation only gets worse, a necessary sustainable food access approach is needed.

According to the HNO 2023, It is estimated that 12 million are facing acute food insecurity and 1.9 million people are at risk of sliding into food insecurity. As of September 2022, the national average price of a WFP standard reference food basket reached a new record, marking a nearly four-fold increase in the past two years only. Furthermore, 77 percent of households in Syria reported that their income was insufficient to cover the cost of basic needs⁸.

Bread is the main food staple in Syria and therefore public bakeries provide subsidized bread for a price of around 5% of its real cost (a bread packet weighting 1.1 Kg is sold for 200 SYP while the production cost is

⁷ UNICEF. (2023, May 9). Recovering from earthquakes in Syria and Türkiye. UNICEF. <https://www.unicef.org/emergencies/Syria-Turkiye-earthquake>

⁸ WFP, '11 years of conflict: with hunger at historic levels, millions of Syrians hang by a thread,' 08 May 2022. accessed on 27 June 2022.

3,700 SYP), giving access to basic food to the most vulnerable layers of the Syrian population. To achieve this goal, a network of state-owned public bakeries across the country sells subsidized bread and is managed by the Ministry of Internal Trade and Consumer Protection (MoITCP) through the Directorate of Bakeries (DoB). The DoB is responsible for constructing bakeries, providing new or repairing bread production lines, supplying the bakeries with subsidized inputs such as wheat; yeast and fuel, recruiting bakeries' staff and paying for their salaries as well as conducting quality assurance spot checks. Before 2011 the country produced enough wheat to satisfy domestic consumption needs. But the fractioning of the country and the UCMs (affecting importing of agricultural inputs such as fertilizers and pesticides) led to a decline in domestic wheat production and at the same time drove millions into poverty, making them even more reliant on subsidized bread in their diet.

The Turkish Red Crescent, AFAD, the Ministry of National Defence, the Gendarmerie and NGOs sent 370 mobile kitchens. 90,937,628 units of hot meal, 12,292,878 units of soup, 14,847,975 lunch boxes and packaged food, 38,870,435 liters of water, 120,189,866 pieces of bread, and 4,673,376 units of beverage were distributed to the quake-hit areas.

WASH: Access to sufficient and affordable safe water, adequate sanitation, solid waste management and/or hygiene supplies remain a challenge for more than 2 million people in IDP sites. Systems have suffered from damage owing to hostilities, strain from years of functioning at high capacity due to the growing demand, limited or no maintenance, continuous drain of technical staff and poor water resource management, exaggerated by cascade effects of climate.

According to the Humanitarian Needs Overview for 2023 (HNO 2023), 13.55 million people are in need of WASH assistance, 2,6% more than in 2022. Furthermore, according to the ICRC report on 01/10/2021, Syria now has up to 40 % less drinking water than before the crisis period. All functioning water supply infrastructure depends on electricity in a context where the power generation capacity is down by 60% to 70 percent and the majority of areas are receiving less than 2 hours of grid electricity a day⁹.

Local authorities, specifically the Ministry of Water Resources, are responsible for constructing, operating and maintaining water networks, boreholes and pumping stations. Similar to bread, water is also subsidized by the Syrian state as it charges fees that do not cover the operational costs. Since the outbreak of the Syrian crisis, water infrastructure has sustained widespread damage and suffers from the lack of electricity/fuel to pump the water due to the UCMs. In many areas, people have reduced access to potable water and are mostly relying on expensive water trucking from untrusted sources. This has contributed to an outbreak of cholera, in September 2022, with cases appearing across the country.

Shortage of electricity remains the root cause for water supply systems underperformance or cessation and is mostly related to the significant shortages of fuel for power plants.

Health: needs in Syria are already significant. Thousands of children are suffering from severe malnutrition. Thousands of more people suffer from cancer, diabetes, and other chronic conditions for which treatment is limited. 70% of the sub-districts (188 out of 268) have most severe health needs and severity score of 3 and above¹⁰. One million children are in need to primary health care assistance.

One of the most pressing concerns is the lack of technical staff required to deliver and maintain basic health services or to operate potable water supply systems, as a consequence of displacement, death or impairment, and lack of technical training. Half of Syria's sub districts are at emergency levels because of the lack of healthcare workers alone.

COVID-19 & Cholera outbreak: the situation has been further aggravated in light of the easing of the precautionary measures for COVID-19 and the lack of proper clean water and sanitation for the most vulnerable areas. Needs are rising, especially for those with limited immunity are increasing continuously. Lack

⁹ [HNO 2022](#)

¹⁰ [Reliefweb, 2022 Humanitarian Needs Overview: Syrian Arab Republic, 22 February](#)

of consistent funding, vaccination hesitancy, infections among frontline health workers, high transmission rates in IDP camps, lack of oxygen supplies, limitations of the cold chain capacity, and limited technical/management capacity are further hampering COVID-19 prevention and response across Syria. The most vulnerable people already facing struggles to access clean water are in need of awareness raising, PPE, medicines, health care services, that in light of Syria's fragile health system.

Gender Based Violence (GBV) / Psychosocial Support: Protection issues are a grave concern, with increasing reports of violence taking place. Women and girls are subjected to increased denial of economic resources and education, movement restrictions, exploitation, forced and child marriage, intimate partner and family violence, technology facilitated violence, and physical, psychological, emotional, sexual, and social violence. This violence pervades all walks of life. 19 per cent of household mentioned that women and girls feel unsafe in certain areas. 71% of communities mention that child marriage is an issue for adolescent girls¹¹.

Four mobilized Social Service Centres are charged in Kahramanmaraş, Hatay, Osmaniye, and Malatya provinces. 3,772 personnel have been transferred to the earthquake zone, 3 thousand 620 personnel and 1 thousand 655 vehicles were dispatched outside the earthquake zone. A total of 1,025,291 people, 691,388 in the earthquake zone and 333,903 outside the earthquake zone have received psychosocial support in Turkey.

Education: Some 2.4 million children, aged 5-17 years, are out of school. They represent nearly half of the about 5.52 million school-aged children. These children fall prey to child labour, early and forced marriage, trafficking, and recruitment into the fighting. More children are likely to miss out on education and are at risk of permanently dropping out¹². The top barrier to accessing education services is that families cannot afford to send their children to school. Support is needed in covering tuition fees, safe transportation, school supplies are essential.

Livelihoods: 8.7 million Syrians need early recovery and livelihoods support in the absence of decent, long-term jobs and livelihoods opportunities. The job market lost 3.7 million jobs since the crisis begun. More than 50% of the potential workforce are in need to have access to sustained employment¹³.

Shelter: 358, 037 Disaster Sheltering Groups have been set up in the region in Turkey. Tent cities have been established at 332 points in 11 provinces. Container city installations continue in 10 provinces at 162 points. In the disaster area and outside the disaster area, a total of 1,915,687 people were provided with accommodation in tents, containers, dormitories under the Ministry of Youth and Sports, hotels, public guesthouses, MEB facilities and other facilities.

Capacity to respond

The **ACT Syria Forum (ASF)** was established based on the decision of the Jordan, Syria, Lebanon (JSL) forum and on the strategy of ACT alliance to establish individual local forums to strengthen the relationships among local ACT members and local churches.

The ASF implementing members (CA, HEKS / EPER, MECC and GOPA-DERD, LWF) of this appeal are reputable organisations that have strong roots in the community either directly or through their partners, with some operating within Syria since the start of the crisis back in 2011. They also have taken part in previous humanitarian relief operations implemented as an ACT appeal in the different and respective geographical areas. Throughout, members will continue to coordinate with each other through the ASF forum.

ASF members participate directly or through their local partners in the UN-led working groups and/or cluster meetings, such as WASH, Food Security, Health, Protection, Shelter, and Logistics and have developed Memorandums of Understanding (MoUs) with various local and international actors. CA as well as HEKS/EPER

¹¹ [HNO 2022](#)

¹² [Unicef, Flagship report, Every Day Counts, 2022](#)

¹³ [Unicef, hno_2022_final_version](#)

are observers within the Syria International NGO Regional Forum (SIRF), CA is an active member in the Northwest Syria NGO Forum and its various working groups.

The members also bring technical expertise in programmatic areas, such as education in emergencies, psychosocial programming, community-led approaches (SCLR/PVCA), vocational training using the “linking Learning to Earning” (L2E) approach through the provision of educational, technical and recreational skill trainings, and supporting PWDs. The members also not only implement quality programs with consistency and determination, but also provide capacity building support to local implementing partners to enhance the learning of international standards and implementation in programming. Through working closely with local churches, LNGOs and targeted communities, members have access to and can respond in a timely manner with responsibility and accountability. Members, through local partnerships inside Syria have been able to access most areas across the whole of Syria, providing the necessary response to the most vulnerable and hard to reach areas.

Christian Aid has extensive experience in delivering community led humanitarian response in conflict and non-conflict settings globally. Christian Aid’s signature is survivor and community led response (SCLR) and localisation with the goal to link response, preparedness, and recovery. The learning generated from Christian Aid is used to adapt the programme and advocate for more community led reform in the humanitarian sector including with publications and sectoral level discussions on letting go of power through SCLR.

Turkey

Prior experience in the region – Qudra programme

Turkey is currently hosting 3.6 million registered Syrian refugees, which accounts for nearly two-thirds of all refugees registered in the region. Over 90% of these refugees live in local communities. As a result, the local government units (LGUs) which provide services such as health, education and social services are facing significant challenges in meeting the increasing demands of the population.

Regions most seriously hit by current earthquake include those covered by the Qudra program. **Hungarian Interchurch Aid** is one of the implementing partners of the program (Iraq) that started in 2018, which is a regional multi-annual multi-partner development program responding to the Syrian refugee crisis regionally, in four countries bordering Syria, namely Iraq, Jordan, Lebanon and Turkey co-financed by the EU Regional Trust Fund in Response to the Syrian Crisis (EUTF Syria – the Madad Fund), the German Federal Ministry for Economic Cooperation and Development (BMZ) and the Spanish Agency for Inter-national Development Cooperation (AECID). The Overall Objective of the program is to contribute to mitigating the destabilising effects of the protracted Syrian and Iraqi crises and to better respond to the resilience needs of refugees, IDPs, returnees and host communities.

The Implementing Partners build on proven working structures, effective networks and strategic partnerships in the four partner countries, which are also integrated into long-standing bilateral and regional cooperation structures in the partner countries.

Ongoing response under current crisis

To help the people affected by the earthquake in Turkey and Syria, **HIA has launched a fundraising campaign** and has been supporting its local partner organisations from the first days, with staff on the ground continuously to engage in relief and reconstruction activities and to carry out assessments for emergency relief and longer-term relief and reconstruction programmes. At the same time, **HIA has started its registration as an international NGO with the Turkish authorities.**

HIA’s partner organisations in Turkey - whose work HIA supported with emergency grants, in a total of EUR 46,000 - are helping to evacuate people who want to move out of the area, provide psychological support, set up winterised tents, mainly for families with young children, and provide drinking water, heating equipment, hygiene kits, mattresses and blankets.

In addition to the province of Hatay, HIA also wanted to focus on areas that receive less international attention. On 7 March, it continued its humanitarian aid programme in Adiyaman city, the capital of Adiyaman province, Turkey. In total, **210 hygiene kits, including childcare items, soap, toothbrushes, toothpaste, shampoo, detergent, dishwashing liquid and disinfectants, were distributed** by HIA in cooperation with its

local partner organisation to more than **150 large families**, totalling around **800 people** affected by the earthquakes.

Working closely with the local Christian churches involved in the relief effort, HIA is supporting their irreplaceable work: an agreement has been reached to support the **emergency school in the Iskenderun Orthodox Church**, which will provide safe supervision and education in a dangerous environment for around **150 children** with nowhere else to go. During a visit on 1 March, an aid worker handed over **school kits and toys to the children**.

On 8th of March HIA started its multi-component **humanitarian response program in Antakya** (Hatay province) by distributing **food packages** with its local partner. The packages contain dry and non-perishable food, assessed and requested by local governorates: rice, bulgur, pasta, oil, salt, sugar, tea, tomato paste, bean, chickpea, lentil, halva, wheat flour, olive, instant soup. Packages were distributed in an informal tent camp, reaching **200 people (25 packages for 25 families with more than 5 people per family)**.

The rest of the programme will continue in the coming weeks: the activities/services will target affected individuals through provision of the most urgent basic and hygiene needs by distribution of hygiene kits, and baby kits.

The total program aims to reach 3,650 beneficiaries in total in 1 month.

HIA regularly participates in coordination mechanisms organised by the UN and local disaster management on the ground in order to have relevant information on the situation in the area, the needs and the details of the assistance. On 22 March, **HIA organised a charity concert in Budapest**, the proceeds of which will be used to support the relief programme.

Project preparation, coordination

HIA's staff in the region takes part in coordination meetings, and cluster meetings coordinated by UNDAC. AFAD is the primary partner for all NGOs involved in relief activities. HIA's local partner is already in coordination and close contact with local governorates to implement its services and place container shelters in the area.

Current project will be coordinated by HIA's staff (delegated to the region from HIA's Iraq office and/or HIA HQ), and the Budapest HQ with the involvement of IBC (International Blue Crescent Relief and Development Foundation) based on an MoU signed by the two parties. The selected project locations are - Hatay, and Gaziantep, two of the most hardy-hit provinces.

RESPONSE STRATEGY

The Results Framework should be annexed to this appeal proposal

The ACT SYR231 appeal builds upon work undertaken in previous Syria Humanitarian response appeals. Implementation will be by ACT members and in some cases through local partners in Syria and Türkiye. The appeal maintains a strong focus on supporting the most vulnerable communities and protecting the rights of all and addresses the protection and assistance needs of affected Syrian people due to protracted crises, earthquake effects, economic collapse and the impact of the quick spread of COVID-19 and cholera. Through a comprehensive and holistic implementation strategy, the appeal continues to address the most pressing basic needs while and answering the devastating effects of the earthquake and adding a more sustainable approach to resilience and capacity development. Appeal requesting members will be focusing on restoring and supporting pre-existing basic services infrastructures as the most sustainable and resilience-oriented interventions and will be delivering lifeline support to areas that have suffered from the earthquake such as winterization support, Food, CASH, Health, MHPSS, Shelter and NFIs. This approach aims at contributing to the recovery process and facilitating the return to normality thus paving the way toward development-oriented interventions in conjunction with the Triple Nexus approach (Humanitarian, Development and peacebuilding).

This response will focus on reducing the vulnerability of people affected by the protracted Syrian conflict, the earthquake and worsening economic situation through activities and services that enhance the ability of

affected populations to lead a dignified life by enhancing their capabilities to acquire necessary tools and knowledge to become active parts in income generating activities and answer their eminent needs to lead a somewhat independent life. All interventions are participatory and inclusive with a focus on strengthening local initiatives and community-based activities and approaches. ACT Syria members will answer the needs of locals and individuals by providing sustainable solutions to the accumulated crises.

CA approach is characterized by strengthening local structures through supporting grassroots organizations and networks to put communities at the center of everything we do. This includes working through local faith and non-faith actors recognizing the unique bond of trust with communities which enables them to deliver services in hard-to-reach areas.

Turkey:

By 23 February 2023, the Ministry of Environment, Urbanization and Climate Change conducted damage inspections for 1.25 million buildings; revealing **164,000 buildings were either destroyed or severely damaged**. A further **150,000 commercial infrastructures were at least moderately damaged**. The International Organization for Migration estimated about **2.7 million people were made homeless**. A damage assessment by the Turkish government revealed at least 61,722 buildings had to be demolished including 11,900 in Gaziantep Province, 10,900 in Hatay Province, 10,800 in Kahramanmaraş Province and 28,914 in Malatya Province. Broad fissures appeared on roads. During recovery efforts, body parts were often found in the rubble.

The most extensive damage to buildings and infrastructure occurred in **Hatay, Kahramanmaraş, Gaziantep, Malatya and Adiyaman provinces**, which together account for 81% of the estimated damages and are home to around 6.45 million people (around 7.4 percent of the total population of Turkey).

According to the **GRADE Report** (Global Rapid Post-Disaster Damages Estimation) made by the World Bank Group, Hatay province suffered damages in a total value of 12, 448 million USD, and damages in Gaziantep province are estimated at 4,867 million USD (third biggest damages in Turkey).

Locations targeted by current project:

Kirikhan area, Hatay Province

Nurdagli and Islahiye districts, Gaziantep Province

Hatay Province : Severely affected by the first quake, it became epicenter in the 20 February quake. Damages for residential infrastructure estimated at 42%, non-residential 40% and infrastructure 34%. Estimated 344,880 people are displaced; shelter solutions are still reportedly lacking, particularly in villages. Hatay and Kirikhan are reportedly the most damaged districts; Semandag (60% of buildings damaged) and Defne also report heavy damages, no health facilities functioning in those two districts. In Hatay, many facilities evacuated. Lack of access to WASH still widespread, including lack of running/drinking water as reported by AFAD. In temporary sites, running water for latrines and bathing is lacking. Hatay has highest estimated number of subscribers without electricity. The province is reportedly hard to access in general; Antakya particularly difficult to reach.

Gaziantep Province: High damages reported in Nurdagli and Islahiye districts. Estimated 213,700 people displaced. Latrines lacking in sites. Main building of Gaziantep hospital closed. Approximately 50% of assessed mukthars indicated shelter as highest need. 30% indicated need for hot meals and baby food. WASH continues to be a problem, particularly in rural areas ((report by DFS, Data-Friendly Space).

Beneficiaries:

People affected by the earthquake living in container camps and rural areas at the two project locations / **20.910 beneficiaries** during 12 months

The identification and mobilization of beneficiaries will be done with the involvement of the local authorities, who will also ensure the safety of the sites and assist project team for easy access and delivery to the field.

HIA's planned activities in Turkey within the Appeal:

Food Security

- 1. Distribution of Food Packages:** Food packages will be distributed to the families in the project locations in Turkey. The package will contain dry and long-lasting food, assessed and requested by

local governorates: rice, bulgur, pasta, oil, salt, sugar, tea, tomato paste, bean, chickpea, lentil, halva, wheat flour.

Shelter & NFI

2. **Establishment of Shelter:** 20-Container Shelters will be setup for earthquake-affected people who lost their homes.

WASH

3. **Distribution of Female Hygiene packages:** Female hygiene packages containing sanitary pads, wet wipes, deodorant, lip balm and hand cream against cold weather, comb and mirror will be distributed to the women separately. According to the observations in the fields, women are hesitating to say their needs regarding female-hygiene products, therefore, a separate kit from the general hygiene kits will be provided directly to them.
4. **Distribution of Family Hygiene packages:** Family hygiene packages containing shampoo, soap bar, washing detergent, toilet paper, etc. will be distributed to be used by all family members.
5. **Distribution of baby kits** (diapers, baby wet wipes, baby food in jar) will be provided.
6. **Providing 5 sanitary containers**

Protection and PSS activities

7. In child-friendly tent, child care and child protection activities will be held with psychologists and animators to help children dealing with fear, anxiety, stress, and offer them moments of relaxation and entertainment activities

Number of beneficiaries per sector

Food Security

1. 500 food packages for families (appr. 2500 people)
2. 500 baby food kits

Shelter&NFI

3. 20 containers to establish a container camp for earthquake victims / 20X8=160 individuals

WASH

4. hygiene kits (500 female and 500 family packages)
5. 500 baby kits (containing diapers, baby wet wipes)
6. 5 sanitary containers

Protection and PSS activities

Child Care Activities: In child-friendly tent, child care and child protection activities will be held with psychologists and animators to help them dealing with fear, anxiety, stress, and offer them moments of relaxation and entertainment activities (3.000 children).

Goal

Developing the resilience of affected people as a result of the Syria Protracted Crisis, COVID-19, and responding to the urgent needs of population affected by the earthquake in Syria and Turkey.

Outcomes

- 1.1 People affected by the conflict received multi-sectoral (WASH, Education, health and Energy) support to alleviate their hardship through a coordinated approach.
- 1.2 People affected by Syria-Türkiye earthquake receive multi-sectoral (Food, WASH, Health, NFI's, CASH and Shelter) lifesaving humanitarian support.
- 1.3 Increased protection and improved psychosocial well-being among earthquake victims with special emphasis on children, women and girls.
- 2.1 People affected by the Türkiye Syria earthquake receive support and training to find jobs or means of sustainable livelihood.
- 2.2 People affected by the conflict given the necessary access to emergency mental health, psychological well-being support and proper education.
- 2.3 People affected by the conflict were given the necessary access to nutritious food.
- 2.4 Institutions restored / rehabilitated in conflict affected areas to allow citizens to regain some normalcy and independency

2.5 People and communities affected by the earthquake in Aleppo and Idlib are engaged and empowered to meet their specific needs through SCLR and micro cash grants

3.1 Members, partners and church capacities are strengthened through awareness and Social cohesion is promoted among targeted communities

Outputs

- 1.1.1. Provision of clean water access, hygiene kits and COVID-19 and Cholera awareness sessions to target population
- 1.1.2. Health services provided through the provision of medication to patients
- 1.1.3. Safe learning spaces and access to quality education through the provision of tuition support and remedial classes for targeted students
- 1.1.4. Provision of electricity through the installation of solar panels to schools
- 1.2.1 Provision of essential food items such as hot meals and food kits
- 1.2.2 Rehabilitate bakeries that provide essential subsidized bread to citizens
- 1.2.3 Medication is distributed to those affected by the earthquake
- 1.2.4 Hygiene kits (dignity female sanitary kits, baby kits, hygiene kits) and necessary hygiene products are distributed to those affected by the earthquake
- 1.2.5 Cash for work is provided for earthquake reconstruction support
- 1.2.6 Community awareness campaigns and capacity building for staff: earthquake awareness sessions and cholera awareness sessions are delivered as well as gender sensitive awareness for partner and community
- 1.2.7 Distribution of NFIs and winterization kits
- 1.2.8 Individuals are supported with grants, capacity building and shops are rehabilitated to regain economic independence
- 1.2.9 Rehabilitation work is delivered to homes and schools and people are provided with shelter assistance
- 1.2.10 Children are provided with necessary tools to return to normalcy and education after earthquake
- 1.2.11 Psychosocial wellbeing for vulnerable individuals affected by the earthquake, including children are supported so they can meet their urgent survival and development needs.
- 1.2.12 Provision of urgent and comprehensive health support and services to vulnerable individuals, especially children, affected by the earthquake to address their immediate health needs.
- 1.2.13 Increased access to shelter among earthquake victims.
- 1.2.14 Increased protection and improved psychosocial well-being among earthquake victims with special emphasis on children, women and girls.
- 1.2.15 Increased access to food among earthquake victims.
- 1.2.16 Increased access to WASH facilities among earthquake victims.
- 2.1.1 Men and women and youth are able to meet their own basic needs through increasing access to employment, vocational training and restoration of sustainable livelihood opportunities.
- 2.2.1 children, men and women are provided with necessary mental health and protection assistance
- 2.2.2 Provide children with access to an improved educational environment conditions in North West Syria (NWS)
- 2.3.1 Provision of essential food items such as bread and food kits
- 2.4.1 Support to Syrian communities through the rehabilitation of existing diaconal services in faith-based entities is provided. Provision of quality food assistance and subsidized bread to people affected by the economic collapse
- 3.1.1 Independent, good governed and inclusive local community groups that prevent violence and promote inclusion and social cohesion are increased
- 3.1.2 Awareness sessions for ACT Alliance Syria members, their partners and the community

Exit strategy

The main focus of this Appeal is on building resilience of affected communities, investing in local capacities increases the sustainability and expedites the departure of INGOs and being adhere to localization. ACT Syria members commit to this strategy and provide guidance to partner organizations, churches and any governmental bodies, line ministries, municipalities on capacity building, managerial and administrative support. By working alongside and building the capacity of local communities and actors and CBOs, ACT Syria members ensure greater sustainability of projects. Once the projects end (or should international funding decline), these organizations are well positioned to continue supporting vulnerable peoples. Additionally, by utilizing their network of volunteers and local knowledge, ACT members are able to maximize the intended outcomes of the proposed project.

Throughout the Appeal, ACT members will continue to identify ways to ensure program sustainability. The transition of specific project activities will be carried out gradually as local capacities are strengthened. Some activities may also have direct continuity through new projects developed by ACT members/or other institutions and NGOs. Furthermore, the coordination and capacity building of all project stakeholders will sustain the interventions, as ACT Syria members will work with local community representatives to form local committees to maintain the projects and to coordinate on new initiatives.

Apart from the existence of core staff, ACT Syria members specifically select project local staff from the targeted areas and build their capacities through trainings so that targeted communities have local skills and knowledge beyond the life of the project. Moreover, coordination with municipalities, line ministries, primary health centres, water establishment, and other local stakeholders is done throughout the project and when needed a MoU is signed with a specific stakeholder to clarify responsibility and develop an agreed common exit strategy or handover. Capacity building for the municipalities and line ministries, will be done as part of the handover and by the contractors in charge of the execution of the civil works to know how to operate the facilities after the project timeline ends.

MECC has followed the modality of tripartite or multi- lateral agreements with its partners in order to build their capacity and ensure that churches can continue implementing with same activities through the funds they received from partners outside appeal mechanism.

The exit strategy for HEKS/EPER's conflict-sensitive reconstruction interventions, revolves around handing over the infrastructure sites and technical drawings to the relevant authorities as well as providing them with the needed spare parts and tools for maintenance in the future. The concept behind HEKS/EPER approach is to respect the initial standards of the country and restore the infrastructure without a long-term commitment from HEKS/EPER in order not to create a parallel system or reliance on aid in the targeted community.

LWF exit strategy is clarified through the model of implementation via local partners that follows a sustainable approach. By working with well-established local partners, and invest in their programs and structure. This leads to long term continuity of the appeal objective and maximize the benefit of the fund. In alignment with building the capacity of the local partner and exchange expertise

HIA, will continue to raise funds both from international donors and the Hungarian public when current project ends. HIA's staffs in its HQ and in the Iraq field office will continue their activities as long as the situation requires it. In its activities, HIA always lays much emphasis on building the resilience of displaced communities and investing in strengthening local capacities, thus increasing the likelihood of a sustainable recovery. Through close coordination and collaboration with local authorities, faith actors, CSOs, NGOs and community organizations, experiences gained during the implementation of the project, the developed methods and good practices will be used in further activities to strengthen the resilience of local communities. Once the projects end (and as international funding decreases), these locally rooted organizations are well positioned to continue supporting the displaced people.

HIA's local partner, IBC has been a very active NGO in Turkey's Southeast region since 2013. Kilis, Gaziantep, Şanlıurfa, and Hatay provinces are IBC's main implementation or coordination fields to conduct protection, education, child protection, GBV, social cohesion, basic needs, and health projects.

One of the main service areas of the Foundation is emergency assistance and humanitarian aid in the difficult regions of the world and disaster-affected areas of Turkey. IBC is experienced to operate and coordinate emergency response in many parts of the world, and is in close contact and coordination with AFAD and authorized bodies.

PROJECT MANAGEMENT

Implementation Approach

ACT members adopt a participatory approach and local partnership including the beneficiaries in all aspects of program planning and management cycle. Participation of beneficiaries is a key component of this appeal and the Requesting Members (RMs) have through their local partners or directly voluntary teams who have a direct access to local communities and prove to be effective and in needs assessment and translation of programs and activities. Implementation of activities will be either through tripartite or multi-lateral agreements with local partners or through direct implementation for members who have offices and team on the ground. All activities will be implemented with respect of COVID-19 protection regulations with the provision of PPE to all field staff and protection accessories to beneficiaries such as face masks and sensitizations in distribution places. Coordination will take place whenever possible with existing sector groups lead by different UN agencies as well as with local directorates of different civil services such as; education, health and municipalities.

ACT Syria forum member's proposed activities have multiple modalities of implementation, including direct provision of items (such as food parcels, medications for cancer patients, hygiene and COVID-19 kits, and educational supplies), early recovery/livelihood (vocational training, business grants), community empowerment through necessary capacity building for initiating a bakery that would supply its neighboring villages.

The Syria members will respond to the Syria-Türkiye earthquake on 2 phases, the direct emergency relief 3-6 months, during the period they will be re-assessing the needs on ground based on the changes resulted from the support provided and the need to start more of the recovery and rehabilitation phase.

In previous responses to the Syria Humanitarian crisis, ACT members have ensured that gender-related issues are addressed in program design, implementation, reporting, security, and recruitment of staff at both management and field levels. Prioritizing gender analysis as a core element of program design, monitoring, evaluation, and reporting helps ensure that girls and boys, women and men, have equal opportunity to participate in, influence and benefit from the project. Similarly, specific vulnerabilities of women- and elderly-headed households and households with persons with disabilities will be considered, as well as the number of individuals who can work per household and their legal status.

Despite challenges related to different groups' perceptions of gender roles, ACT Members have sought to ensure women's participation by inviting both husbands and wives to consultations and assessments, and by organizing separate discussion groups for women, that are facilitated by women. ACT Syria Member's selection of staff is based on qualifications and aims to keep equity between women and men both at the national office, as well as at the field level and provide a safe space for all who require it, with no discrimination and support within their capabilities if need be.

During the selection of project beneficiaries, ACT members target the most vulnerable among affected and displaced families, including: orphans, widows and divorced women, elderly persons, PWDs, people who have been exposed to traumatic events (e.g. loss of a family member or kidnapping); and unaccompanied children who live with a relative or caregiver. Child protection and wellbeing, inclusion of people with disabilities and gender sensitivity are cross-cutting components that guide the work of ACT and its partner through the programs.

Protection concerns are taken into account by ensuring respect for the rights of vulnerable groups. This includes children, people with special needs, the elderly, and girls and women, in particular those most at risk of abuse and exploitation. All members are committed to strict adherence to the Core Humanitarian Standards, the ACT Alliance Code of Conduct and the Sexual Exploitation and Abuse policy. With respect to any activities or affected persons, ACT members do not discriminate based on ethnic, religious or political backgrounds of the populations served. In order to reduce the potential for harm, members emphasize cooperation and consultation with local organizations and volunteers.

ACT members have adopted the IASC Gender and Age marker in project design and implementation. Program implementation furthermore sees the inclusion of GBV awareness sessions, training, case management and referral of GBV cases, in addition to specific outreach activities meant to increase the participation of women. Dedicated Gender focal points are in place to support and train field staff and volunteers, check if project implementation is in line with the gender ambitions and adapt plans if necessary.

HIA's proposed activities in Türkiye were designed based on the needs assessments conducted in the earthquake-hit provinces, **consultations with AFAD, camp leaders, church representatives and local authorities**. HIA's response focuses on most urgent needs of earthquake victims living in rural areas and in container/tent camps in the most affected regions. Understanding that boys, girls, men and women experience conflict and displacement in different ways, this project has been designed to assess, analyze and address these different needs.

Needs assessment revealed that some goods distributed by aid agencies are not appropriate for the region's conservative culture (e.g. clothing). **Female field workers** are badly needed as women do not communicate their special needs towards male workers. Thus, the proposed response has a special focus on needs of women and girls, especially in the field of hygiene.

HIA will ensure accountability to beneficiaries by the implementation of a participatory approach that is based on 4 main cross-cutting points. These are **the provision of timely and accurate information, consultation in the project design and implementation phases** through continuous assessments and focus group discussions (both gender-segregated and mixed), participation of beneficiaries and local authorities who can provide valuable inputs throughout the project, programmatic approaches and the availability of a **complaint and feedback mechanism** both for beneficiaries and staff members. HIA will enable and encourage the affected populations to play an active role in the decision-making processes for the project through clear guidelines and practices and also ensure that the most marginalized are represented.

Implementation Arrangements

ACT appeal members employ a strategy, based on the premise of constant interaction with representatives of the population. The earthquake intervention is designed to address emerging needs at field level. A follow up assessment will be undertaken in 3 months to re-assess needs and to help determine if the emergency response needs to be further adapted with another potential revision of the appeal. Requesting members through the local partners or directly by their local staff will be meeting whenever needed with local community leaders, local officials, local informant people, and country government officials to facilitate the implementation of designed activities and monitor closely the needs of the ground. Regular meetings are held with decision makers as well as with beneficiaries in order to share information and knowing the emerging needs so that the implemented activities meet its end result objectives or to change the modality of Implementation to match the needs of served communities. ACT Syria requesting members also believe in beneficiary led programming, which ensures buy-in from the communities in which members work. Stakeholders include both duty bearers (Ministries, local government, businesses, NGOs, INGOs, UN agencies, local initiatives, charities and related clusters) and rights holders (beneficiaries, targeted communities) in both public and private sectors, each meriting a different engagement approach.

CA will work with one local partner to reach 3,000 children in NW Syria through individual and group MHPSS & PSS support, as well as 300 children with individual protection assistance (emergency case management). The work will also support 35 (5 of which will be newly established) community protection & peacebuilding committees in the NW with training and grants to implement community initiatives. The partner staff under this will include: MHPSS facilitator, case workers and a response officer, with support from a logistic officer, MEAL office and program officer.

LWF is joining the appeal and is committed to supporting local communities affected by the earthquake through multi-sectoral activities, including WASH, livelihoods, education, shelter and schools rehabilitation and household items, food, MHPSS and community psychosocial support, gender, health, and cash assistance. This response effort will be carried out in collaboration with Caritas Syria in Aleppo, with a focus on providing case management, psychosocial first aid, and counseling activities to children and individuals in need. The core protection services will be complemented by health, WASH and kit distribution services. Additionally, LWF places great importance on education and will work towards encouraging engagement in schools.

To further expand the reach and effectiveness of its humanitarian response, LWF is in the final stages of selecting new local implementing partners.

The proposed response is one of joint programming, each requesting member's sectoral expertise and geographic coverage will be complementary with other requesting members ensuring that the targeted affected population's needs are covered.

Through strong coordination with local churches, LNGOs and sector cluster workings groups in Syria, ACT requesting members are well-informed and prepared to continue their humanitarian response in key priority areas (health, food security, livelihoods, WASH, protection/psychosocial and education). ACT Syria requesting members, will work together in vulnerability assessments, data gathering, and focus group discussions for various sector related programming to adapt to best practices, changing regulations and security situations to ensure a timely and coordinated response and to benefit from lesson learned to improve future programming. Through regular contact with the relevant working groups in order to avoid duplication of activities, coordinate with other actors, and keep up to date on the most current, relevant issues and developments within the different sectors. Each requesting member is responsible for coordinating with the relevant national line ministries associated with the area in which the member is working.

Coordination between ACT Members will be facilitated through regular ACT forum meetings attended by the Country Directors/Team leaders which will harmonise operations and encourage information sharing and reporting on the dynamic political and security context within Syria.

Each requesting member of the ACT SYR231 appeal is responsible for the implementation of the activities as laid out in their individual log frames and proposals; abiding by their internal rules and regulations concerning the Project Management Cycle. A joint coordination appeal committee will be established in order to share information, to coordinate in order to implement all designed activities with utmost efficient way and to submit the required reports on time. The forum / appeal coordinator will facilitate the coordination meetings among requesting member, gather information and drafting sitreps, interim and final report and liaise with ACT secretariat in Jordan.

The requesting members in SYR231 appeal in Syria will work either directly through their existing offices and staff or through local partners in coordination with their registered umbrella organisations in Syria.

HEKS and GOPA – DERD will implement all their activities directly with dedicated field teams.

MECC will be working closely with ACT Alliance member GOPA-DERD on supporting in the implementation of certain activities as well as EPDC. MECC will be implementing rehabilitation work and livelihood support through its teams, and will allow its partners to focus on the basic needs support.

Christian Aid is working in partnership with a local partner, a leading NGO in Syria in the field of child protection. CA has previous experience implementing work with this partner, and the partnership is supported by a joint Partnership Agreement, as well as funding & reporting agreements for specific projects.

LWF is working in partnership with Caritas Syria, a well-established NGO in Syria, working with local communities in several sectors. LWF has worked with Caritas for 2 years in implementation and monitoring activities. The partnership is supported by a partnership agreement. LWF will identify a new local partner in 2023 to support in implementation of their program.

HIA has signed Memorandums of Understanding with its local partner, IBC which is already part of the multiple UN-related working groups such as Protection, Education, Legal Consultancy, Child Protection, and SGBV. For the earthquake response, IBC will be part of Shelter, WASH, and Food Security & Nutrition Coordination groups led by UN-related organizations.

Apart from that, IBC has the necessary protocols from the local governorates (such as Gaziantep, Islahiye, Nurdagi, Kahramanmaraş Elbistan, Hatay Kırıkhan, Malatya Doğanşehir, Kilis and Şanlıurfa) in the earthquake-affected regions to implement activities and is part of the official local governorates and AFAD-led Coordination groups. HIA will coordinate its efforts on regional and local levels with NGOs, INGOs working in the same operational areas, and other donors in the region. HIA participates in coordination mechanisms on the ground, organised by the UN and local disaster management authorities, in order to have relevant information on the situation in the area, needs and details of assistance.

ACT members engage mainly with stakeholders in the public sector, such as ministries, local authorities, schools and health clinics and communication will be that of transparency. Nevertheless, public-private partnerships and cooperation are increasingly common and can include training facilitation, job placement and internships, as well as goods delivery and donations in-kind. When entering to any community -new or old- coordination and cooperation is being set with key stakeholders, which often include church leaders or church related organizations or groups. ACT Syria members have extensive experience in working with church leaders and church related organizations; showing great impact in facilitating the work, conducting planned activities and coordination all the while respecting local customs and traditions.

Project Consolidated Budget

		Appeal Total	HEKS/EPER	Christian Aid	GOPA DERD	MECC	LWF	HIA
Direct Costs		14,845,421	2,176,816	4,202,226	1,296,169	4,776,198	1,922,195	471,817
1	Project Staff	1,928,674	95,426	902,673	95,595	432,887	257,452	144,641
1.1	Appeal Lead	24,000	-	-	-	24,000	-	-
1.2	International Staff	472,764	-	377,773	-	48,000	33,755	13,236
1.3	National Staff	1,431,910	95,426	524,899	95,595	360,887	223,697	131,406
2	Project Activities	12,074,410	2,000,168	3,122,580	1,070,227	4,117,974	1,495,240	268,221
2.1	Public Health	530,293	-	-	35,385	235,200	259,708	-
2.2	Community Engagement	8,000	-	-	-	-	8,000	-
2.3	Preparedness and Prevention	810,350	-	810,350	-	-	-	-
2.4	WASH	784,242	357,070	52,500	-	236,016	41,572	97,084
2.5	Livelihood	4,424,791	503,915	2,244,730	154,422	1,490,000	31,725	-
2.6	Education	818,312	-	-	113,077	550,635	154,600	-
2.7	Shelter and Household items	2,549,628	-	-	532,515	1,323,263	564,650	129,200
2.8	Food Security	1,768,797	1,132,489	-	-	270,000	334,875	31,433
2.9	MHPSS and Community Psycho-social	335,262	-	15,000	202,428	12,860	94,470	10,504
2.10	Gender	38,040	-	-	32,400	-	5,640	-
2.11	Engagement with Faith Leaders	-	-	-	-	-	-	-
2.12	Advocacy	6,695	6,695	-	-	-	-	-
3	Project Implementation	198,470	17,261	84,300	50,306	31,000	4,653	10,951
3.1.	Forum Coordination	49,206	17,261	-	3,019	18,000	1,551	9,375
3.2.	Capacity Development	149,264	-	84,300	47,286	13,000	3,102	1,576
4	Quality and Accountability	231,780	11,321	44,550	20,670	64,000	74,327	16,911
5	Logistics	338,203	49,292	32,446	44,512	106,087	78,766	27,100
6	Assets and Equipment	73,884	3,348	15,678	14,859	24,250	11,758	3,992
Indirect Costs		925,374	67,774	401,871	72,218	212,641	135,489	35,381
Staff Salaries		480,040	52,951	125,894	43,915	145,841	87,284	24,155
Office Operations		445,334	14,823	275,977	28,303	66,800	48,205	11,226
Total Budget		15,770,795	2,244,590	4,604,097	1,368,387	4,988,839	2,057,684	507,198
ACT Secretariat management and coordination cost SMC		473,124	67,338	138,123	41,052	149,665	61,731	15,216
Total budget + SMC		16,243,918	2,311,928	4,742,220	1,409,438	5,138,504	2,119,414	522,414
Income received		10,675,211	1,522,518	2,127,776	1,238,126	4,702,068	656,480	428,244
If revision of Budget - Balance requested (minus income received)- REVISION 3		5,568,708	789,411	2,614,444	171,312	436,436	1,462,935	94,170

Project Monitoring, Evaluation and Learning

ACT Syria requesting members adhere to strict monitoring and evaluation (M&E) methods. They are committed to ensuring that all activities are being implemented in a timely fashion as per the action plan and that beneficiaries receive quality assistance in a dignified and respectful manner. Projects are designed to have in place monitoring systems where all components are specific, measurable, attainable, realistic and time-bound, including the development and use of relevant data collection tools to track and sort data, disaggregated by gender, nationality, and age group. With an M&E plan in place, members will track project performance, identify results and learnings associated with the projects and address potential delays at an early stage. The appeal will be monitored against the project level indicators at the output and outcome levels. Coordinated monitoring sessions will be designed to minimize potential disruption to project activities and allow for maximum coordination of ACT Syria requesting members, to the benefit of the beneficiaries.

Based on COVID-19 situation, cholera outbreak and security situation, members are ready to conduct remote follow up with beneficiaries through phone calls to conduct qualitative beneficiary satisfaction surveys to solicit feedback if need be, it has also proven to be cost and time effective. Since CA and LWF are working remotely with their local partners they will depend on remote monitoring of the project and in regular meetings with their partners. Additionally, they will aim to visit the project location and provide technical capacity building and support as needed. Moreover, requesting members will meet once a month to discuss progress and challenges. During these discussions, project staff will identify the incremental and cumulative project results, discuss current challenges, adjust the project implementation timeline or activities when necessary, and identify effective strategies for achieving the project objectives.

It is planned that the ACT Secretariat will conduct a monitoring visit to the Appeal project locations each year based on the agreed upon ToR as well as conducting remote monitoring. The forum also will accommodate any FM request to have a monitoring visit during the appeal cycle given that they are planned ahead, based on agreed upon TOR.

In May of 2023, the ACT secretariat along with the forum coordinator have conducted a real time review and visited members in Damascus and Aleppo. This real time review has allowed for the members to have lengthy discussions with the visiting team and has allowed the opportunity to discuss good outcomes of the appeal as well as challenges. The visiting committee was able to provide the necessary support for the mitigation of these challenges and has also highlighted ways of improvement be it in communication amongst members, coordination with governmental bodies, and placing the beneficiary as well as the staff and their wellbeing at the center.

In order to gauge the quality of project activities within the target communities, feedback from the beneficiaries will be solicited through beneficiary satisfaction surveys, post-distribution/activity monitoring, and focus group discussions.

During the implementation of the targeted infrastructures' civil, electrical and mechanical works part of the appeal, technical engineers will be conducting daily visits to the work site to monitor the implementation and ensure adherence to safety measures, quality standards, technical specifications, and time schedule. In terms of evaluation of the impact, HEKS/EPER staff will conduct baseline and end-line surveys for the borehole intervention and post-evaluation for the bakery interventions. All lessons learned from the implementation of the planned intervention will be documented and stored in a dedicated database.

HIA will be responsible for the overall monitoring and regular reporting of the Appeal activities and progress in line with the ACT humanitarian mechanism. HIA will conduct monitoring and evaluation visits to project implementation sites and complete reports in line with its respective policies and in accordance with requirements from donors.

HIA will use a solid and well-structured M&E system with very clear indicators, outputs that captures emergency activities as well as a standard internal monitoring system including both professional and financial aspects. The data against the key indicators for this project will be collected by field staff and reported based on the reporting guidelines and timeframe to the M&E officer. HIA strongly believes that effective monitoring, evaluation, is an integral part of project implementation and critically important to achieve intended results and ensure quality and transparency throughout project cycle management. Generally, we will; 1) Prioritize Do No Harm approach ensuring not to put program participants, staff and partners at increased risk; 2)

consider options for remote monitoring; and 3) work with key stakeholders to share information where possible to avoid duplication.

Interim and final financial and narrative reports will be prepared based on the guidelines set by ACT Alliance and will be in conformity with ACT policies. During the implementation period, Situation Reports will also be prepared on a regular basis. The project will be financially audited by independent auditing companies per each of the ACT members' policies.

An external appeal evaluation will be conducted at the end of the Appeal. ToR to be shared and approved by ACT Secretariat, requesting members, and funding members.

Safety and Security plans

As ACT member activities take place in settings that are politically sensitive, security assessments take place on a regular basis. Each member has their own security plan, and daily monitoring of the current environment is used to inform and update the security situation and any impacts it may have on programming. ACT members are in regular coordination and communication with one another and with relevant actors to provide better and timely safety and security for staff and beneficiaries. As such, ACT members will receive daily security update from the United Nations Department of Safety and Security (UNDSS) in Syria. MECC has its own security advisor who monitor the situation on daily basis and issue weekly security report to be shared with MECC supporting partners.

All ACT member's staff are required to be familiar with and sign their respective country office security plan that also works on implementing it within a gender perspective, as well as receive training on the organization-wide safety and security principles. Project planning and implementation take into consideration the safety of beneficiaries, particularly ensuring that activities do not exacerbate tensions between Syrian IDPs, returnees and host community members.

The structural safety of relevant buildings and areas will be assessed by engineers prior to their usage for any activities related to the SYR 231 appeal to ensure the safety and security of staff and beneficiaries.

In case of increased security risk or security incidents, ACT members will act according to the guidelines indicated in its security manual to protect both staff and beneficiaries. While closely monitoring the situation on the ground and coordinating with other humanitarian actors, communication with staff in all project locations is carried out regularly, and security information is shared with staff accordingly.

HIA will monitor the safety and security of staff and targeted population through inter-agency meetings and related government authorities. HIA will be in regular coordination and communication with UHOCCHA, NGO Forums and with relevant local authorities in the country to ensure regular updated safety and security information. Project planning and implementation will take into consideration the safety of beneficiaries, particularly ensuring that activities do not exacerbate tensions among earthquake victims. Project staff will be particularly sensitive to the various safety and security risks facing women, boys and girls, the elderly and the disabled. This will be done while increasing the protection measures to ensure safety of beneficiaries and Duty of Care to staff and volunteers. Members will follow the respective governments' requirements and WHO recommendations for COVID-19 (or any other disease)-related safety measures.

HIA has hibernation, relocation and evacuation plans in place as well as thorough movement, communication and medical SOPs. All staff are briefed on the procedures and know key steps. HIA maintains regular contact with AFAD and local authorities for up-to-date security information and advice and has Security Advisors on the ground. Utilising Satellite-based tracking system and Redundancy in communication means (Mobile & Sat) phones. HIA monitor the situation and cease activities if there is an adverse effect to any project beneficiaries.

PROJECT ACCOUNTABILITY

Does the proposed response honour ACT's commitment to safeguarding including PSEA? All staff and volunteers of requesting members, particularly those involved with the response, will be required to sign the requesting members' Code of Conduct. If you don't have one, members can use [ACT's Code of Conduct](#).

Yes No

As ACT Alliance secretariat is CHS certified, ACT appeals will be implemented with adherence to CHS commitments.

Code of Conduct

ACT members are committed to guard against the abuse of power by those responsible for protection and assistance to vulnerable communities. Especially in humanitarian crises, the dependency of affected populations on humanitarian agencies for their basic needs creates a particular ethical responsibility and duty of care on the part of ACT members and their staff and volunteers. Therefore, ACT members have a responsibility to ensure that all staff and volunteers are aware of this code of conduct, sign it, and understand what it means in concrete behavioral terms. ACT members ensure that there are proper mechanisms in place to prevent and respond to sexual exploitation and abuse. ACT member staff, volunteers, and visitors are expected to sign and adhere to the ACT Code of Conduct as well as to special code of conduct of ACT requesting members. In case any incident occurs, a complaints response mechanism is in place to address beneficiary feedback, including addressing violations of the ACT Code of Conduct. Disciplinary measures are in place to address a staff member or volunteer who violates the Code of Conduct. ACT members will continue to ensure that the principles of the Code of Conduct are incorporated into planning and implementation of activities under the ACT SYR231 Appeal. Moreover, the ACT Code of Conduct will be communicated to the beneficiaries and they will be made aware of the complaint mechanisms available for their use. To date no incidents recorded from any requesting members about the violation of the code of conduct nor from any of their local respective partners. Service in Dignity is the basis of any humanitarian intervention as well as do harm to served communities.

Safeguarding

The ACT Syria forum members and HIA adhere to ACT Alliance Child Safeguarding Policy as well as to their own policies. In 2017, many ACT members participated in an online Child Safeguarding webinar and one ACT member (MECC) attended a specialized Training of Trainers on Child Safeguarding. ACT Member staff and volunteers who work closely with beneficiaries in the field are trained on child and adult protection. Everyone who represents any of ACT's organization in the presence of children is trained to behave appropriately toward children and respond swiftly and productively to issues of child abuse or sexual exploitation. All activities are assessed for potential risk and mitigation strategies are developed, ensuring that not only are individual children protected, but that the organizations are inherently child safe. Specific measures, such as ensuring that staff are not alone with children whenever possible, obtaining permission from a parent or guardian prior to utilizing a child's photograph or interview for communications purposes, and seeking feedback from youth beneficiaries regarding programming, are employed to the fullest possible extent. Many ACT member staff also complete an online training on prevention of SGBV. Members' work in the field is closely monitored by management to ensure that staff, volunteers, and others who visit ACT.

Member projects behave appropriately toward children and never abuse the position of trust that comes with affiliation with ACT Alliance. The ACT Syria Forum aims to create a child-safe environment in all of its work by assessing and reducing potential risks to children. In case that any incident were to occur, some ACT members have a complaint response mechanism in place to address beneficiary feedback, including addressing reports of child safeguarding incidents and other forms of exploitation and violence. The feedback is addressed as soon as it is received and are knowledgeable of referral pathways to help populations in need receive the support and assistance required.

Conflict sensitivity / do no harm

ACT Syria members and HIA provide independent, neutral humanitarian assistance and social cohesion events, which attempts to reduce tensions among the beneficiaries' community. By focusing on the provision of humanitarian assistance without bias towards adherents to any particular faith group, ethnicity, gender or political affiliation, ACT members have solidified their image as independent and neutral faith-based

humanitarian aid providers. ACT members will maintain and uphold their reputation through ongoing and continuous relationship building with community leaders, local municipalities, and religious and secular organizations.

ACT members are committed to, and employs, a “Do No Harm” approach and mainstreams protection throughout all of its work. Members ensure that local authorities, affected populations, and other humanitarian actors are engaged through the full project planning and implementation cycle. In order to follow the “Do-no-harm” principle, the designing and implementing of the activities, provision of education and psychosocial services to the community will support beneficiaries to deal with the impact of conflict trauma and stress. It will focus on building resilience within the communities This ensures that community relations are not harmed but the most vulnerable and needy are targeted. Protection principles such as child protection and child & adult safeguarding are upheld in the projects. With respect to psychosocial programming, ACT members ensure that any material developed and used include the beneficiaries’ opinions and feedback to reflect and build on their personal experiences and develop appropriate and culturally sensitive material for different age groups.

Complaints mechanism and feedback

The ACT Syria Member’s and HIA’s complaints mechanisms and procedures allows all stakeholders to provide feedback and complaints on ACT Members work, have them heard, taken seriously and addressed appropriately. ACT members have long since established a complaints and feedback mechanism and will share their knowledge and experience with the ACT members that are working towards establishing the appropriate (local/global) complaints mechanisms to encourage feedback about its work from all its stakeholders. As a joint program, members are able to cooperate and share resources on a platform that benefits not only the ACT members but also ensures that the projects and the beneficiaries are aware of the tools in place, have access to and feel safe to voice their concerns. Using multiple modalities (phone hotline, email address, physical feedback boxes at centres, complaints focal persons assigned) members aims to ensure that affected populations have access to the mechanisms. The complaints response mechanisms are in place to address beneficiary feedback on project initiatives, refer cases in need to other projects or service providers, and address protection concerns and other forms of exploitation and violence.

ACT Syria members and HIA take complaints seriously. They also commit to addressing all issues of sexual exploitation, abuse of power, corruption and breach of the ACT member policies and standards. Appropriate cultural and local practices are respected and taken into consideration in handling and responding to complaints and feedback. The procedure for complaints will be reviewed regularly to ensure and incorporate learning and improvement towards ACT member accountability. HIA will also encourage feedback about their work from all stakeholders. Where feedback is a complaint about HIA conduct, HIA shall respond in timely and appropriate manner through established mechanisms and procedures. These will be actively disseminated to all stakeholders, especially affected populations, using appropriate understandable language and means.

HIA will also ensure that its local implementing partner also have the necessary mechanisms in place to receive complaints and feedback. HIA will provide trainings and follow up support on CoC, CRM and Quality and Accountability to the local implementing partners to improve quality and accountability of their operations.

ACT Syria members and HIA are additionally committed to international humanitarian standards and accountability mechanisms, such as Core Humanitarian Standards (CHS) and the Sphere Handbook.

Communication and visibility

ACT Syria members and HIA will continue to work on ways of promoting the ACT Alliance identity during all stages of the Project Management Cycle. Implementing members will share the success stories of beneficiaries with other ACT members and funding partners to show the impact of the activities. HIA will also pursue active communications with local and regional authorities, UN agencies, and other stakeholders to ensure a close coordination is maintained in implementation of the response and clearly defined mandates are observed in the area of operations.

ACT members acknowledge the source of funding whenever possible for any and all projects funded by the ACT Alliance. As such, all project documentation – such as attendance sheets, training materials, forms, and other related documents used as part of project activities – contain if possible the relevant logos to acknowledge ACT Alliance and/or back donor support. At project sites in the host community and camp, staff

and volunteers wear vests and IDs identify of both their organization and ACT Alliance as a supporter of the activities. ACT Alliance's support will be acknowledged verbally during community events and/or during media campaigns. RM will support with communication tools when feasible such as high resolution photos, short video and human interest stories which can be used for public communication and reporting purposes with written consent from whoever is present in such videos and pictures, a low visibility strategy will be respected when required by the sensitivity of the issue.

ACT forum members will also collect and share stories of project impact to build a strong evidence base of the ACT projects responding to the Syria Humanitarian Crisis.

Annexes

Annex 1 – Summary Table

	MECC	GOPA-DERD	CA																																																																								
Start Date	1 January 2023	1 January 2023	1 January 2023																																																																								
End Date	31 December 2024	31 December 2024	31 December 2024																																																																								
Project Period (in months)	24 months	24 months	24 months																																																																								
Response Locations	All Governorates	Hassaka, Rural Damascus, Quneitra; Aleppo, Latakia, Hama	Northwest Syria																																																																								
Sectors of response	<table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>Public Health</td> <td><input checked="" type="checkbox"/></td> <td>Shelter and household items</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Community Engagement</td> <td><input checked="" type="checkbox"/></td> <td>Food Security</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Preparedness and Prevention</td> <td><input type="checkbox"/></td> <td>MHPSS and Community Psycho-social</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>WASH</td> <td><input type="checkbox"/></td> <td>Gender</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Livelihood</td> <td><input type="checkbox"/></td> <td>Engagement with Faith and Religious leaders and institutions</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Education</td> <td><input type="checkbox"/></td> <td>Advocacy</td> </tr> </table>	<input checked="" type="checkbox"/>	Public Health	<input checked="" type="checkbox"/>	Shelter and household items	<input checked="" type="checkbox"/>	Community Engagement	<input checked="" type="checkbox"/>	Food Security	<input checked="" type="checkbox"/>	Preparedness and Prevention	<input type="checkbox"/>	MHPSS and Community Psycho-social	<input checked="" type="checkbox"/>	WASH	<input type="checkbox"/>	Gender	<input checked="" type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input checked="" type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy	<table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>Public Health</td> <td><input type="checkbox"/></td> <td>Shelter and household items</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Community Engagement</td> <td><input type="checkbox"/></td> <td>Food Security</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Preparedness and Prevention</td> <td><input checked="" type="checkbox"/></td> <td>MHPSS and Community Psycho-social</td> </tr> <tr> <td><input type="checkbox"/></td> <td>WASH</td> <td><input checked="" type="checkbox"/></td> <td>Gender</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Livelihood</td> <td><input checked="" type="checkbox"/></td> <td>Engagement with Faith and Religious leaders and institutions</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Education</td> <td><input type="checkbox"/></td> <td>Advocacy</td> </tr> </table>	<input checked="" type="checkbox"/>	Public Health	<input type="checkbox"/>	Shelter and household items	<input type="checkbox"/>	Community Engagement	<input type="checkbox"/>	Food Security	<input type="checkbox"/>	Preparedness and Prevention	<input checked="" type="checkbox"/>	MHPSS and Community Psycho-social	<input type="checkbox"/>	WASH	<input checked="" type="checkbox"/>	Gender	<input checked="" type="checkbox"/>	Livelihood	<input checked="" type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>Public Health</td> <td><input type="checkbox"/></td> <td>Shelter and household items</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Community Engagement</td> <td><input type="checkbox"/></td> <td>Food Security</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Preparedness and Prevention</td> <td><input checked="" type="checkbox"/></td> <td>MHPSS and Community Psycho-social</td> </tr> <tr> <td><input type="checkbox"/></td> <td>WASH</td> <td><input type="checkbox"/></td> <td>Gender</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Livelihood</td> <td><input type="checkbox"/></td> <td>Engagement with Faith and Religious leaders and institutions</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Education</td> <td><input type="checkbox"/></td> <td>Advocacy</td> </tr> </table>	<input type="checkbox"/>	Public Health	<input type="checkbox"/>	Shelter and household items	<input checked="" type="checkbox"/>	Community Engagement	<input type="checkbox"/>	Food Security	<input checked="" type="checkbox"/>	Preparedness and Prevention	<input checked="" type="checkbox"/>	MHPSS and Community Psycho-social	<input type="checkbox"/>	WASH	<input type="checkbox"/>	Gender	<input type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy
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<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy																																																																								
Targeted Recipients (per sector)	Education: 8,900 beneficiaries Public Health: 660 beneficiaries Livelihood: 465 beneficiaries capacity building: 30 beneficiaries Food Security: 20,000 beneficiaries WASH: 8,800 beneficiaries Shelter: 71,500 beneficiaries	Gender: 690 beneficiaries livelihood: 7,280 beneficiaries Public Health: 2,551 beneficiaries MHPSS: 5,895 beneficiaries Faith Based Activities: 405 beneficiaries Shelter, NFI's: 5,250 beneficiaries	MHPSS: 2400 beneficiaries Community engagement: 9000 beneficiaries Preparedness and prevention: 25,900 beneficiaries WASH: 24,850 beneficiaries Education: 25,900 beneficiaries																																																																								
Requested budget (USD)	USD 5,138,504	USD 1,409,438	USD 4,742,220																																																																								

	HEKS-EPER	LWF	HIA- Türkiye																																																																								
Start Date	1 January 2023	1 January 2023	1 May 2023																																																																								
End Date	31 December 2024	31 December 2024	1 April 2024																																																																								
Project Period (in months)	24 months	24 months	12 months																																																																								
Response Locations	Sahnaya -Rural Damascus, Aleppo, Tartous, Hama and Latakia	Aleppo, (Jabal Badro) and Aleppo city center (Al Midan, Al Suleimaniah, Al Jabrieh, Sryan Qadimeh, Mahatet Baghdad, Telefon Hawaai, etc).	Hatay, and Gaziantep, two of the most hardly-hit provinces.																																																																								
Sectors of response	<table border="1"> <tr><td><input type="checkbox"/></td><td>Public Health</td><td><input type="checkbox"/></td><td>Shelter and household items</td></tr> <tr><td><input type="checkbox"/></td><td>Community Engagement</td><td><input checked="" type="checkbox"/></td><td>Food Security</td></tr> <tr><td><input type="checkbox"/></td><td>Preparedness and Prevention</td><td><input type="checkbox"/></td><td>MHPSS and Community Psycho-social</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>WASH</td><td><input type="checkbox"/></td><td>Gender</td></tr> <tr><td><input type="checkbox"/></td><td>Livelihood</td><td><input type="checkbox"/></td><td>Engagement with Faith and Religious leaders and institutions</td></tr> <tr><td><input type="checkbox"/></td><td>Education</td><td><input checked="" type="checkbox"/></td><td>Advocacy</td></tr> </table>	<input type="checkbox"/>	Public Health	<input type="checkbox"/>	Shelter and household items	<input type="checkbox"/>	Community Engagement	<input checked="" type="checkbox"/>	Food Security	<input type="checkbox"/>	Preparedness and Prevention	<input type="checkbox"/>	MHPSS and Community Psycho-social	<input checked="" type="checkbox"/>	WASH	<input type="checkbox"/>	Gender	<input type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input type="checkbox"/>	Education	<input checked="" type="checkbox"/>	Advocacy	<table border="1"> <tr><td><input checked="" type="checkbox"/></td><td>Public Health</td><td><input checked="" type="checkbox"/></td><td>Shelter and household items</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Community Engagement</td><td><input checked="" type="checkbox"/></td><td>Food Security</td></tr> <tr><td><input type="checkbox"/></td><td>Preparedness and Prevention</td><td><input checked="" type="checkbox"/></td><td>MHPSS and Community Psycho-social</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>WASH</td><td><input checked="" type="checkbox"/></td><td>Gender</td></tr> <tr><td><input type="checkbox"/></td><td>Livelihood</td><td><input type="checkbox"/></td><td>Engagement with Faith and Religious leaders and institutions</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Education</td><td><input type="checkbox"/></td><td>Advocacy</td></tr> </table>	<input checked="" type="checkbox"/>	Public Health	<input checked="" type="checkbox"/>	Shelter and household items	<input checked="" type="checkbox"/>	Community Engagement	<input checked="" type="checkbox"/>	Food Security	<input type="checkbox"/>	Preparedness and Prevention	<input checked="" type="checkbox"/>	MHPSS and Community Psycho-social	<input checked="" type="checkbox"/>	WASH	<input checked="" type="checkbox"/>	Gender	<input type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input checked="" type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy	<table border="1"> <tr><td><input type="checkbox"/></td><td>Public Health</td><td><input checked="" type="checkbox"/></td><td>Shelter and household items</td></tr> <tr><td><input type="checkbox"/></td><td>Community Engagement</td><td><input checked="" type="checkbox"/></td><td>Food Security</td></tr> <tr><td><input type="checkbox"/></td><td>Preparedness and Prevention</td><td><input checked="" type="checkbox"/></td><td>MHPSS and Community Psycho-social</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>WASH</td><td><input type="checkbox"/></td><td>Gender</td></tr> <tr><td><input type="checkbox"/></td><td>Livelihood</td><td><input type="checkbox"/></td><td>Engagement with Faith and Religious leaders and institutions</td></tr> <tr><td><input type="checkbox"/></td><td>Education</td><td><input type="checkbox"/></td><td>Advocacy</td></tr> </table>	<input type="checkbox"/>	Public Health	<input checked="" type="checkbox"/>	Shelter and household items	<input type="checkbox"/>	Community Engagement	<input checked="" type="checkbox"/>	Food Security	<input type="checkbox"/>	Preparedness and Prevention	<input checked="" type="checkbox"/>	MHPSS and Community Psycho-social	<input checked="" type="checkbox"/>	WASH	<input type="checkbox"/>	Gender	<input type="checkbox"/>	Livelihood	<input type="checkbox"/>	Engagement with Faith and Religious leaders and institutions	<input type="checkbox"/>	Education	<input type="checkbox"/>	Advocacy
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Targeted Recipients (per sector)	WASH: 20,000 beneficiaries Food security: 1,200,000 beneficiaries Advocacy: 800 beneficiaries	Public health: 2,600 beneficiaries Community Engagement: 1,000 beneficiaries WASH: 6,800 Beneficiaries Education: 8,250 Beneficiaries Shelter & NFI's: 5,000 Beneficiaries Food Security: 27,500 Beneficiaries Protection: 2,200 beneficiaries Gender: 300 beneficiaries Livelihood: 150 beneficiaries	Food: 3,000 beneficiaries WASH: 14,750 beneficiaries PSS: 3,000 beneficiaries Shelter: 160 beneficiaries																																																																								
Requested budget (USD)	USD 2,311,928	US\$ 2,119,414	US\$ 522,414																																																																								

Annex 2 – Security Risk Assessment

Principal Threats:

Threat 1: Security in project areas becomes unstable due to uprising and opposition.

Threat 2: Impact of International sanctions and Cesar ACT on Syrian population and on transferring funds from Lebanon into Syria due to capital control in Lebanese banks

Threat 3: Government approvals for projects are not obtained or heavily delayed

Threat 4: Deteriorated living conditions of the Syrian population due to the economic situation may cause more agitation and civil unrest leading to tensions among the project.

Threat 5: Inability to implement projects properly due to the impacts of COVID-19 and Cholera

Threat 6: Earthquake shocks have further damaged the infrastructure of the operations area.

Threat 7: Hygiene-related problems lead to contagious diseases

Threat 8: Continuous aftershocks

Threat 9: Social conflicts/intolerance among affected victims due to high level of stress

Threat 10: Security incidents in tent/container-camps (children and women)

Place the above listed threats in the appropriate corresponding box in the table below. For more information on how to fill out this table please see the ACT Alliance Security Risk Assessment Tool (<http://actalliance.org/documents/act-alliance-security-risk-assessment-tool/>)

<i>Impact</i> \ <i>Probability</i>	Negligible	Minor	Moderate	Severe	Critical
Very likely	Low Click here to enter text.	Medium Click here to enter text.	High Click here to enter text.	Very high Threat 2 Threat 8	Very high Click here to enter text.
Likely	Low Click here to enter text.	Medium Click here to enter text.	High Threat 4 Threat 10	High Threat 5 Threat 6 Threat 7	Very high Click here to enter text.
Moderately likely	Very low Click here to enter text.	Low Click here to enter text.	Medium Threat 1 Threat 9	High Threat 3	High Click here to enter text.
Unlikely	Very low Click here to enter text.	Low Click here to enter text.	Low Click here to enter text.	Medium Click here to enter text.	Medium Click here to enter text.
Very unlikely	Very low Click here to enter text.	Very low Click here to enter text.	Very low Click here to enter text.	Low Click here to enter text.	Low Click here to enter text.