


## PROJECT FICHE

Project Title	<b>Strengthening the Resilience of Crisis-Affected Households through PwDs, Women and Youth Empowerment and Livelihood support in Al Mayadin, Deir Ezzor Governorate</b>
UNDAF Outcome (s)	<b>Humanitarian Response Plan Syria 2019 Objective 3</b> Increase resilience and access to services. Increase resilience and livelihood opportunities and affected people's access to basic services, especially among the most vulnerable households and communities
UNDP Expected Outcome (s)	CP Outcome 1: Households and communities benefit from sustainable livelihood opportunities, including economic recovery and social inclusion Outcome 2: Basic and social services and infrastructure restored, improved and sustained to enhance community resilience
UNFPA Expected Outcome (s)	CP Outcome 1: Sexual and Reproductive Health and Rights: Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access CP Output 1) Increased capacity of the health system to deliver quality integrated reproductive health services, particularly for the people affected by the crisis, including host communities and displaced population, with a special focus on young people. Outcome3: Gender Equality and Women's Empowerment: Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth CP Output 2: Strengthened capacity of implementing partners to prevent and respond to gender-based violence, with a special focus on vulnerable women in humanitarian settings. CP Output 3: Strengthened capacity of community leaders and young people to advocate against gender-based violence, including child, early and forced marriage.
FAO Regional Initiatives (the CPF is not yet finalized)	- Small-scale Agriculture for Inclusive Development in the Near East and North Africa (family farming) - Building Resilience for Food Security and Nutrition in the Near East and North Africa

Expected Outputs	<ol style="list-style-type: none"> <li>1. (UNDP): Support to vulnerable groups in their capacity to establish income generating activities is increased</li> <li>2. (UNDP): Capacity development for PwDs' assistance and their socio-economic inclusion is enhanced</li> <li>3. (UNFPA): Availability and accessibility of quality comprehensive RH and GBV prevention and response services is enhanced</li> <li>4. (UNFPA): Men and boys' participation in primary GBV prevention initiatives is enhanced</li> <li>5. (FAO): Decent and equitable employment, income-generation opportunities and diversified diet increased for women and women-headed households through agriculture and agro-processing</li> </ol>
Related SDG	<p>SDG 1. End poverty in all its forms everywhere, SDG 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture SDG 5. Achieve gender equality and empower all women and girls SDG 8: Decent work and economic growth SDG 17 Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development</p>
Responsible Party	UNDP, UNFPA and FAO in Syria
Potential implementing Partners	NGOs, FBOs, local administrations, Academia, private sector
Other potential Partners	University of Modena and Reggio Emilia (UNIMORE), Italy
Concerned Ministries	Ministry of Local Administration and Environment, Ministry of Social Affairs and Labor, Ministry of Agriculture and Agrarian Reform, Ministry of Health

Executive Summary	The proposed project aims to support resilience of vulnerable Syrian women and men with a multi-dimensional assistance focus on a geographical area heavily impacted by the conflict. Building the resilience of affected population is a contribution to fostering recovery, reducing the driving factors for displacement and promoting sustainable re-integration of returnees. Based on the complementary expertise of the three participating UN agencies, the Rural Development Centre (RDC) located in Al Mayadin, in Deir ez-Zour governorate will be used as a hub for the provision of a comprehensive package of services (social productive and health related). While the RDC is expected to become a center of gravity, a network will be created with all other services available in Al Mayadin district, within or outside this Joint Programme (JP). All the interventions supported through this JP will be developed and implemented through gender sensitive and gender transformative approaches; they will be age-tailored and will ensure special focus on people with disabilities (PwDs).
Project Location	Al Mayadin District, Deir ez-Zour Governorate
Project Duration	12 months
Funding Requested	3,000,000,00 EUR
UNDP Contact person UNFPA Contact person FAO Contact person	Giacomo Negrotto Cambiaso – <a href="mailto:giacomo.negrotto@undp.org">giacomo.negrotto@undp.org</a> Fabrizia Falcione – <a href="mailto:falcione@unfpa.org">falcione@unfpa.org</a> Mike Robson – <a href="mailto:mike.robson@fao.org">mike.robson@fao.org</a>



  
Ramla Khalidi  
Resident Representative  
UNDP Syria

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## Acronyms

HNO	Humanitarian Needs Overview
FHH	Female Headed Households
COVID-19	Coronavirus Disease of 2019
CPI	Consumer Price Index
DoH	Department of Health
FAO	Food and Agriculture Organization
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GoS	Government of Syria
HRP	Humanitarian Response Plan
ISIS	Islamic State of Iraq and Sham
JP	Joint Programme
MSMEs	Micro, Small & Medium Enterprises
MSNA	Multi-Sectoral Needs Assessment
PiN	People in Need
PLW	Pregnant and Lactating Women
PPE	Personal Protective Equipment
PwDs	People with Disabilities
RCO	Resident Coordinator's Office
RDC	Rural Development Center
RH	Reproductive Health
SEIA	Socio Economic Impact Analysis
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNRWA	The United Nations Relief and Works Agency for Palestine Refugees in the Near East
WFP	World Food Programme
WHO	World Health Organization
CWC	Community Well-being Centre
WGSS	Women and Girls Safe Space
EMAP	Engaging Men in Accountable Practices
DOSA	Directorate of Social Affairs
IEC	Information Education Communication

## 1. Context

Well into its tenth year, the crisis in Syria has severely affected the entire population. The estimated number of people in need of humanitarian assistance has reached 11.1 million people, including 5 million in acute need as of the end of 2019 (2020 HNO), with 80-90 % of the population living in poverty and 55-65% in extreme poverty. Recent estimates suggest that 22.4% of households in Syria are headed by women, up from 4.4% in 2009. Other estimates put the number of Female-headed households (FHH) in Syria at one in three in 2015. This means that almost 5 million people are living FHH in Syria out of the current estimated population of 20 million. 6.2 million people are internally displaced, while 2 million people have returned to their homes between 2017 and 2020<sup>1</sup>.

Under UNDP technical coordination and under the umbrella of the RCO, UNDP, FAO, UNFPA, WFP, WHO, UNICEF, UNRWA and UN Habitat have developed the Socio Economic Impact Analysis (SEIA) of Covid-19 pandemic in Syria. Conducted through the collection of sex disaggregated data and utilizing a gender analysis, the SEIA has provided a wealth of data and information on the socioeconomic situation, conducive to formulate recommendations for the response. The analysis shows that the socioeconomic situation has sharply deteriorated:

- The projected reduction of GDP is estimated at approximately 7% in 2020 (**80% since 2011**)
- Public debt has swelled to 115 % of GDP (**30.02% in 2010**).
- Food prices have witnessed a 240% increase in one year since June 2019.
- The Syrian pound is today (October 2020) worth about 2-3% of its 2010 value; a **50-fold depreciation**
- The 2010-based consumer price index (CPI) more than doubled from June 2019 to June 2020.
- Remittances from diaspora dropped by more than 50% of their 2017 value.
- COVID-19 restrictions led to a decrease of about 20% in average employees in the MSMEs sector - the engine for job creation and economic recovery - comprising a decrease of 24% for women and 17% for men.
- Food insecurity is on the rise; while production of wheat – the main staple crop – is at 60-70% of pre-crisis levels, the bulk of this is grown in the North East.
- FHH reported a triple increase in the percentage of poor food consumption levels in June 2020 versus June 2019 levels, compared to the doubling of reported poor food consumption levels by male-headed households.
- With only about half of the hospitals in Syria still fully functional, 26% partially functional, and 26% non-functional due to shortages of staff, equipment, medicines and/or damage to the buildings, COVID-19 caused a sharp decrease in services provided at hospitals with the highest being in the area of elective surgeries (a 53% decrease).
- Reproductive health services were disrupted, increasing the risks for pregnant women and newborns.
- The number of mental health consultations was tripled when comparing March to May 2019 and 2020 due to an increase in services and the negative consequences of COVID-19 on mental health.
- The COVID-19 pandemic increased the tasks and burdens of women in the household, including responsibilities related to the hygiene of family members, cooking, cleaning and generally in terms of COVID-19 preventive actions.
- The coping mechanisms (including anger and violent behavior) of men during the lockdown seemed to have worsened inequitable and discriminatory practices including GBV.

<sup>1</sup> [https://data2.unhcr.org/en/situations/syria\\_durable\\_solutions](https://data2.unhcr.org/en/situations/syria_durable_solutions)  
<https://reliefweb.int/report/syrian-arab-republic/over-600000-displaced-syrians-returned-home-first-7-months-2017>  
<https://reliefweb.int/report/syrian-arab-republic/unhcr-syria-factsheet-january-2019>  
<https://www.humanitarianresponse.info/en/operations/stima/idps-tracking>

COVID 19 has affected communities, particularly including women already been impacted during the crisis, leading to increased family tensions from general restrictions of movements and lockdown, increased food insecurity, lack of economic stability and social support systems and a spike in GBV. The majority of healthcare and social services providers are female. The lack of adequate personal protective equipment (PPE) and training on the COVID 19 virus increases risk of infection, exposing them to be asymptomatic carriers to their families and communities.

According to the SEIA, COVID-19 and its related mitigation measures have exacerbated the impact that the Lebanese financial crisis and the unilateral coercive measures were already having on Syria. Over the period where COVID-19 mitigation measures remained in effect in Syria (roughly mid-March to end-May 2020), supply chains were disrupted, with a significant spike in food prices. As a result, food security has worsened compared to previous years, with growing poor and borderline food consumption rates - the former particularly among FHH - decreased dietary diversity and a considerable increase in the prevalent adoption of negative food-related coping mechanisms.

The agricultural sector, considered a key pillar of its economy, has been greatly impacted due to the concurrent crises, while prior to the COVID-19 crisis, production was at 50% of Syria's national grain requirements (it had been a grain exporter pre-2010).

As of August 2020, WFP estimate the new food insecure (i.e. acute PIN) figures at 9.3 million, compared to the 2020 HNO figure of 7.9 million. Food insecurity in Syria is defined by protracted conflict causing mass and prolonged displacement, loss and lack of livelihoods causing high poverty levels and reduced production capacity, hampering financial and physical access to food. Inflation and soaring currency depreciation, exacerbated by the COVID-19 pandemic, have reduced purchasing power impacted the livelihoods of the most vulnerable populations. These have also increased the price of almost all agricultural inputs (labor; machinery; seeds and agrochemicals; animal feed); the damage to key infrastructure such as irrigation affects heavily the agricultural production.

Syria's fragile healthcare system is becoming overstretched due to a steady increase in the number of COVID-19 affected healthcare workers, with insufficient personal protective equipment (PPE). At least 25% of the crisis affected people are women of reproductive age and 4% are pregnant women in need of quality reproductive health (RH) services. However, fear of COVID-19 infection hampered beneficiaries' access to healthcare, including reproductive health clinics. People with disabilities, less likely to be able to support themselves if infected with COVID-19, lack access to healthcare services.

Fake information increased stress levels, causing negative coping mechanisms including GBV aimed at girls and women. These issues highlight the urgent need for protection services, including timely access to GBV response services as well as community engagement initiatives specifically targeting men and boys and aimed at addressing the root causes of violence against women and girls. Needs for protection include a specific attention to women and youth directly impacted (physically and psychologically) by ISIS as well as widespread legal aid support for civil documentation.

In addition, women face a 'double burden', shouldering the tasks of bread winner, domestic work and agricultural work. Challenges women face include salary gaps, lack of security and lack of access to the formal job market. Women have instead taken a leading role in informal sectors (education, healthcare) and developed homebased micro businesses.

### **Local context - Deir ez-Zour and Al-Mayadin**



The eastern Syrian governorate and its capital city have been respectively under the control and besieged by ISIS between July 2014 and September 2017. At present, the majority of the governorate west of the Euphrates is under GoS control although small "ISIS" pockets are still active. According to the Population Task Force data, the population in Deir ez-Zour Governorate is estimated to be around 750,000 including over 435,000 people in need for humanitarian assistance. Amongst the most vulnerable of the 14 governorates, Deir ez-Zour experiences reduced services and high needs in terms of agriculture and livelihoods. Al-Mayadin city lies on the western bank of Euphrates river, 50 km east of Deir Ez-Zour, and is home to 33, 600<sup>2</sup> returnees. The average Severity Scale in Deir ez-Zour is 3.43 according to the MSNA, while it is at 3.58 for Al-Mayadin district.

There is a comprehensive lack of basic service provision in the area, particularly access to safe and clean water and health care, including Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH). There is also a lack of access to schools and healthcare due to widespread destruction and increased prices, which also hamper rehabilitation initiatives. Only one public health facility performs C-section, partially rehabilitated by UNDP in 2018-19, and its conditions still require support in terms of equipment and medical supplies. UNFPA has provided the Department of Health (DoH) in Al Mayadin with one Hospitainer. The number of health workers available has fallen by over 60% in the last eight years.

Between 2014-2017, Al-Mayadin, in the hands of "ISIS" witnessed a systematic attempt to wash brains and apply their interpretation of Islam measures where youth, women and adolescent girls were the most affected victims of violent practices like deprivation of mobility, education, and job opportunity, early marriage, and others deeply impacting on at all levels of the society and on social cohesion. Today, after three years from the end of active conflict in the city and surroundings, residents and returnees still live with social, cultural, economic, and health consequences without cure and full recovery, as specialized services remain weak if not inexistent.

In June 2020, Deir ez-Zour Governorate was showing the highest rate of poor food consumption in Syria with 21% of the population affected, 7% more than the second most affected Governorate, Aleppo. In addition to the mentioned 21%, 17% of population is considered as borderline on food consumption point of view<sup>3</sup>. More specifically in Al-Mayadin district, the HNO 2020 reported that 66% of the population needed humanitarian support

## 2. Problem identification

Most of Deir ez-Zour governorate, and particularly Al-Mayadin town and district, deeply suffered the consequences of the conflict, including the so called "ISIS" control period between 2014 and late 2017. Destruction and widespread damage impacted not only local economy, service provision and physical infrastructure, but also social fabric as well as family and individual identities. As above reported, the years during which ISIS held control of Al-Mayadin (2014-2017) the imposed violent practices had a particularly heavy impact on youth, women and adolescent girls who were deprived of mobility, education, and any opportunity, including economic ones; who were imposed marriage, including child marriage, as well as all forms of GBV including sexual violence. All this resulted in deeply impacting the local communities at all levels, including in terms of social cohesion. Today, after three years from the end of active conflict in the city and surroundings, residents and returnees still live with social, cultural, economic, and health consequences without cure and full recovery, as specialized services remain weak if not inexistent.

<sup>2</sup> . UNOCHA

<sup>3</sup> The socio-economic impacts of the COVID-19 pandemic in Syrian Arab Republic, WFP, Oct 2020

Due to all the above gender and age-based violence and deprivations suffered by the communities in Al-Mayadin district, the present proposal has identified as main targets PwDs, women and young boys and girls.

### **Women**

Recent estimates suggest that 22.4% of households in Syria are headed by women, up from 4.4% in 2009. Other estimates put the number of women-headed households in Syria at one in three in 2015. This means that almost 5 million people are living in Female Headed Households (FHH) in Syria out of the current population estimated at 20,346,920. The wide spectrum of vulnerabilities affecting FHH call for comprehensive, gender and age specific interventions in order to meaningfully address the problems and make some sustainable gains at the individual, household and community levels.

It is not only women heading households, but women and girls at large who are paying the highest consequences of the years under ISIS, of almost ten years of crisis and now of COVID-19 pandemic which has further exacerbated their pre-existing vulnerabilities. During covid-19, intra-household roles have continued to change. Women have taken on additional roles traditionally associated with men, as heads of household and principal breadwinners for their families. While this unequivocally opens important opportunities for women, in the absence of sufficient viable livelihood opportunities and provision of services increased pressure on and stress for women adds on to women who are responsible to provide for their families.

Due to the protracted crisis and negative health, social and economic consequences of Covid-19 and its related restriction of movement and degrading economic opportunities and social engagement, the targeted populations are facing increasingly insufficient income, decreased purchasing power, limited employment opportunities and displacement and consequently erosion of positive coping strategies; scarce livelihood opportunities and limited agricultural recovery. Lack or poor quality of basic health services - including reproductive health services - lack of information and awareness about the negative impact of certain gender-based practices (e.g. early, including child marriage and adolescent pregnancies; lack of spacing between pregnancies; poor menstrual hygiene); lack of access to education and female illiteracy; lack of protection from GBV services; as well as lack of opportunities for economic empowerment put them at increased and protracted risks within unsafe environments.

Due to the protracted crisis and covid-19, intra-household roles have continued to change, with women taking on additional roles traditionally associated with men as heads of household and principal breadwinners for their families. While this unequivocally presents an important chance for women to enter the labor market, in the absence of viable livelihood opportunities and provision of services, the increased pressure and stress on women would severely add to their burdens and responsibilities.

Women make essential contributions to agriculture and are considered usually key for income generation in rural areas through farming and agriculture production. Women in rural areas often manage complex households and pursue multiple livelihood strategies. However, as a result of the crisis, all farmers' access to agricultural inputs has become restricted. This has contributed to the adoption of negative coping strategies, including disposal of productive assets and reduced food consumption and food diversity.

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## **PwDs**

Persons with disabilities (PWDs) are amongst the most vulnerable groups within the society, and they are at particular risks during crisis because they may be invisible, discriminated against and neglected.

According to the World Bank, "Persons with disabilities, as a group, experience worse socioeconomic outcomes than persons without disabilities, such as less education, worse health outcomes, less employment, and higher poverty rates."<sup>4</sup> These reduced outcomes may be attributed to several institutional and social barriers and in turns they contribute to worse impact on PWDs lifecycle and life span. According to various reports, 10,000 individuals with disabilities die each day as a result of extreme poverty in the global context.

After almost ten years of crisis in Syria, there has been a peak increase in numbers of injuries, including among women and youth, deterioration of health system and consequent premature discharge from hospitals causing brain an physical disability, in addition to deficiency and brain drain of skilled human resources specialized in physical rehabilitation; all these factors have contributed to higher and rapid transition from injuries to impairments, and disabilities. Disability is clearly reported as number one priority of humanitarian needs since 2015 (HNO 2019).

With the deterioration of health services (estimated 50 per cent of public hospitals damaged or not functioning), the transition from injuries to impairments and disabilities is happening in an increased pace and higher severity. It is reported that some 30,000 people suffered conflict-related trauma injuries every month, roughly 30 per cent of whom developed permanent disability with an estimation of 3.0 million people suffering from different sort and level of disability (15% undergo amputation, 5% spinal cord injuries and 10% peripheral nerve injuries)<sup>5</sup>.

The tremendous number of war-born injuries and impairments is an ongoing health, and a latent socioeconomic problem. The health problem presents a life-threatening situation either through the direct severe trauma or secondary complications resulting from poor primary health care and insufficient rehabilitation. On the other hand, the latent socioeconomic problems are caused by the fact that human and financial assets in families caring for PWDs who have not received proper medical rehabilitation are severely exhausted. Gender mainstreaming in disability issues has been one of the least responded area in Syria crisis response.

Despite the above development and adding the effect of the ongoing crisis on increased vulnerability and prevalence of impairment, Syrians in conditions of disability faced and keep struggling with number of challenges for the advances for inclusion of PWDs. This leaves established national services for the rehabilitation and support of PWDs in Syria in the less favoured position to cope with the consequences of the conflict. These challenges can be identified at three levels: i) lack of access to basic services and socioeconomic opportunities and benefits; ii) loss of PWDs functionality and independence; iii) lack of attention, accountability and the Rule of Law to support disability issues.

## **Youth**

Youth is the backbone and the future of every community. More than ever in a time of conflict, investing in Syria's youth is essential for socio-economic recovery and build the country's future. High unemployment among youth is a critical issue to address, while they can be active drivers of change in the region. In fact, the

<sup>4</sup> The World Bank. (2012). Disability: Overview. Webaccessed: <http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/EXTDISABILITY/0,,contentMDK:21151218~menuPK:282706~pagePK:210058~piPK:210062~theSitePK:282699,00.html>

<sup>5</sup> Humanitarian Needs Overview 2017 [http://reliefweb.int/sites/reliefweb.int/files/resources/2017\\_Syria\\_hno\\_161205.pdf](http://reliefweb.int/sites/reliefweb.int/files/resources/2017_Syria_hno_161205.pdf)

process of empowering Youth and Women, and mobilizing them in a vivid and effective manner, helping to remove many of the repercussions of the crisis<sup>6</sup>.

According to the recent assessments, young people in Syria, aged 10-24 represent 36.3 percent of the total population and youth aged 15-24 constitute 22.2 percent. This proportion of young people informs the need for interventions that are especially focused on youth socio-economic empowerment.

The 'cumulative' impact of COVID-19 following successive crises has extended the heavily impact of Syria crisis on Syrian population in general and youth segment in particular; resulting a high level of poverty; limited access to job opportunities; limited access to marketable skills. Unemployment rate is estimated at 52% while youth unemployment rate even higher. Syrian Centre for Policy Research (SCPR) estimated in 2014 that the loss of years of schooling by children will represents a human capital deficit down the road now, and more than ever, working on youth socio-economic participation, taking into dedicated consideration gender and dynamics differently affecting youth, is crucial for livelihood stabilization and social cohesion reinforcement. During Covid-19, according to SEIA, most adolescents (58%), had access to alternative learning pathways. More than half of young people provided psychosocial support either peer to peer or to younger children. About twice the proportion of male youth expressed feelings of depression when compared to their female counterparts (73% and 44% respectively). Comparatively, only about 39% of adolescent females had access to adequate WASH facilities compared to 45% among their male counterparts. This emphasizes the importance of increasing the access of youth including female adolescent to health, education, employment and improved social cohesion services, while ensuring the youth related data is disaggregated by age and sex, generated and disseminated.

### 3. Implementation Strategy and Methodology

This joint proposal builds on lessons learned from ongoing multi-year collaboration between concerned agencies, including with Italian funding. UNDP, UNFPA and FAO support communities and specifically vulnerable groups within them (FHH, PwDs, IDPs, returnees) residing in rural areas in Syria in improving their resilience through social and economic empowerment.

UN agencies and partners in Syria have been providing immediate humanitarian supplies to the most affected people in the country. In the past years, there has been an increasing realisation that resilience-based approach under the Humanitarian Response Plan (HRP) is necessary to respond to the protracted crisis so as to build sustainable solutions for addressing the various effects of a ten-year conflict. Participating UN agencies will team up together to jointly implement this project to respond to people's needs, reduce the risks and vulnerabilities in the short term, building on their individual resilience towards the early recovery of their families and communities.

Longer-term interventions can help maintain human capital and reduce the long-term effects of the war. In particular, resilience-building interventions targeting vulnerable groups are effective in mitigating the impact of conflict on families and communities and contribute to make effective the Humanitarian-Development-Peace (HDP) Nexus. While humanitarian assistance is critical to saving lives and meeting immediate needs, it is unable to address the underlying factors and causes of vulnerability. Similarly, an increasing reliance on short-term humanitarian aid induces negative coping strategies, and the interconnectedness of urban and rural periphery areas reduces the effectiveness of single sector-based resilience and early recovery efforts, as gains in one

<sup>6</sup> ILO, UNDP, UNFPA, UNHCR, UNICEF and WFP - Gender Barriers, Social and Cultural Factors Affecting Women and Youth Accessibility to and Employability in Labor Market

sector are insufficient in impact to overcome challenges to interconnected sectors to establish paths for future recovery.”

The governance of the project during its implementation will be ensured through a Project Board, to be held biannually with participation of the three implementing UN agencies as well as AICS, as the donor. The Project Board (PB) will review the progress of activities and ensure implementation is consistent with the approved framework. Moreover, the PB prerogatives will also make strategic decisions concerning the project whenever required.

UNDP is currently undertaking several projects in Deir ez-Zour across its mandated expertise. Particularly, the following activities are being implemented in Al-Mayadin RDC:

- Beekeeping: Distribution of beehives
- Support Home farming to produce vegetables, aromatic and medicinal plants:
- Reviving the available agricultural land within RDC by cultivating it with medicinal, aromatic and ornamental plants, in addition to some types of fruit trees.
- Training farmers on the methods of producing and grafting tree seedlings.
- Training on food processing for women.
- Fodder production and organic waste processing
- Processing organic waste into feedstuff cubes and compost.
- Production of sprout barley as a source of greed feedstuff

UNFPA is currently undertaking the following activities in DeZ:

- Provision and operationalization of one Hospitainer in coordination with the Department of Health (DoH) in Al Mayadin

FAO is currently working on the following activities in Deir-Ez-Zor governorate:

- Inputs provision to vulnerable households (wheat seed and vegetable production kits)
- Support farmers groups to produce agriculture inputs (vegetable seedlings, seed multiplication)
- Provision of dairy and agro-processing equipment
- Training on good agricultural practices
- Access to water for irrigation through water users association and capacity building on management of water resources
- Vaccination campaigns annually against most important animal diseases such as PPR
- Support farmers with solar powered hatcheries to produce one day chicks for poultry production

And specifically in Al Mayadin:

- Rehabilitation of irrigation infrastructure (sector five)

Based on the comparative advantages of the three UN Agencies working in an integrated, area-based modality, able to trigger tangible changes on the lives and livelihoods of the targeted groups in selected rural areas, the

interventions will focus at both household and community levels, whereby UNFPA, FAO and UNDP efforts will complement each other by targeting the same beneficiaries and communities with different but interconnected activities, jointly strengthening beneficiaries' health, social protection, socio-economic status, and food and nutrition security as well as their family income, ultimately supporting better community, family and individual lives and family choices.

UNFPA model of CWC in Rural Development Centers includes vocational trainings and start up kits to support beneficiaries in initiating their own income-generating business. In consideration of the fact that this is a JP and that UNDP and FAO have including livelihood opportunities for the beneficiaries, UNFPA has decided, in agreement with UNDP and FAO, not to include livelihood activities for women and youth with the understanding that the beneficiaries of UNFPA services will be integrated among the beneficiaries of UNDP and FAO initiatives.

For the purpose of ensuring full accessibility of the JP beneficiaries to the wide spectrum of activities offered and thus maximizing the available resources and reaching expected results, UNDP, UNFPA and FAO will develop a referral pathways to link the JP beneficiaries with all the available services and opportunities generated through the JP as well as outside of it (as possible). UNFPA, as lead of the GBV Coordination in humanitarian architecture, will also ensure the development of a dedicated referral pathways for GBV.

UNDP and FAO will cooperate with UNFPA to ensure that the VTs are gender-transformative and that women and girls are provided with the opportunity to choose non-stereotypical VT options to allow them take on more gender-transformative roles that can also be more useful for income generation to them than the traditional courses.

The Humanitarian Response Plan (HRP) sets out the framework within which the humanitarian community responds to large-scale humanitarian needs in Syria. The HRP's objectives are i) save lives and alleviate the suffering of the most vulnerable people; ii) enhance the prevention, mitigation and response to protection needs; and iii) increase resilience, livelihoods and access to basic services. UNDP, UNFPA and FAO Country Programmes are linked to the HRP, in particular relevant to this project, the strategic objective III - increase resilience, livelihoods and access to basic services, which reflects the need to invest in actions to prevent a further deterioration of living conditions, and growing aid dependency. Thus, the current proposal is founded on a resilience-based approach which is integral to and complements the ongoing humanitarian response, while expanding its scope to effectively bridge humanitarian and early recovery interventions by supporting community and individual resilience. In this sense, the three partnering agencies will combine their specific expertise to showcase the added value of coordination, joint programming, joint planning and joint implementation.

To reinforce the synergy, the project will be led locally by a committee comprising the team leaders of the three agencies. At Damascus-level, a Steering Committee, meeting on a quarterly basis, will be created to support the local level implementation. The Agencies will provide technical and administrative support to their teams to deliver the activities but an operational coordination at the local level will maintain the cohesion between the various stakeholders.

Supporting resilience in crisis affected areas requires a comprehensive understanding of local needs and dynamics, therefore a community assessment and a conflict-sensitive context analysis are the principal first steps based on which the proposal is built. This will help developing a common understanding and increase the focus on the root causes rather than the symptoms. Based on the assessment and context analysis, the proposed objective will be achieved by the following outputs through the main activities and actions listed below. The proposal acknowledges the critical role of women and youth to their communities in terms of

resilience strengthening, social cohesion, and livelihoods and to the agriculture sector, before, throughout and after the crisis. The proposal also acknowledges the importance to address social behaviors and hinder women and girls' safety by actively engaging men and boys; as well as to address persons with disabilities and youth needs, capitalizing on their capacities and identifying new opportunities to increase their individual potential as well as their significant contribution to their communities. The project gives priority to vulnerable women-headed households and households including persons with disabilities to improve their livelihoods, resilience and wellbeing and that of their families and communities. It also addresses the challenges that those categories are facing including limited skills, participation and livelihood opportunities.

Located in the western part of Al Mayadeen city, 45Km south from the city of Deir ez-Zour, the Rural Development Center will be used as a hub for the provision of a comprehensive package of services related to production, provision of social and health services, economic recovery and empowerment and for social practices change to achieve more gender equal communities. The RDC is The center was established in 1961 with a total area available of 25,000 Sq m. Aimed at improving the living conditions of people living in surrounding rural areas at social, economic, cultural and health levels, at that time, it was named "Community Center in Al-Mayadeen" based on the legislative decree of its establishment. The center was damaged during the period 2012-2017. While the RDC is expected to become the center of gravity, a network will be created with all other services available in the District of Al-Mayadin supported within or outside this Joint Programme (JP). All the interventions supported through this JP will be developed and implemented through gender sensitive and gender transformative approaches; they will be age-tailored and will ensure special focus on people with disabilities (PwDs).

Although each agency will be responsible for the implementation of its own activities, the project will foster a consistent approach in targeting and servicing beneficiaries, including through a referral system internal and external to the RDC. By that, for example, a beneficiary selected by UNDP or FAO for livelihoods support through the centre, will also be able to benefit from health and GBV services provided by UNFPA and vice versa.

The combined interventions targeting identified communities, households and individuals, in a gender and age-tailored manner that will contribute, among others, to gender-transformative outputs, is expected to strengthen resilience, rebuild social networks within local communities, and minimize the conflict-associated risks of deteriorated resilience and social cohesions.

UNDP rehabilitated around 60% of the centre as well as the administrative building, carpets production hall, guesthouse, the three-floor kindergarten and outside fence. UXOs and other dangerous remnants of conflict have been recently removed by concerned authorities from the land pertaining to the RDC.

Building on the above capital and assets related both to technical/financial investment and to trust built with the communities, while carefully considering potentials for synergies and complementarity with the other agencies, particularly FAO, UNDP will implement the following activities related to rural livelihoods support:

- Beekeeping and honey production: through quality control and marketing activities
- Aromatic and medicinal plants: training on collection, packaging and marketing
- Processing feedstuff cubes: expansion of production and quality control
- Composting for proper organic waste management: training and quality control.

Access to market for all the above components is a cross-cutting component

The situation of PwDs in rural settings such as Al-Mayadin is remarkably complex and under extreme vulnerability. The – anyway insufficient - support provided for disability inclusion in Syria, has focused so far on



urban settings and, to some extent, did not consider the specific features and context of remote rural settings. For example, assistive devices in rural areas require a substantial review of the specifications offered, such as different types and arrangement of wheels in wheelchairs. Therefore, it is needed to develop the capacities of health service providers on specific occupational therapy techniques to be able to conduct a proper needs assessment, prescription, and provision of assistive devices services for rural settings.

Occupational Therapy (OT) is a rehabilitative discipline that uses evaluation and concrete treatment in order to develop, recover or maintain the skills of the daily and working life of people with cognitive, physical, and mental disabilities. It also identifies and eliminates environmental barriers to increase autonomy and independence and participation in daily activities. The practice of occupational therapy is patient-centered, meaning analyzing every single case to let the person live her/his life with dignity and with the possibility to be a productive member of society, community and family.

In collaboration with the University of Modena and Reggio-Emilia (UNIMORE), in Italy, and through the twinning programme with Al-Manara University in Syria, the project will build on the established academic degree of Occupational Therapy supported by UNDP and Armadilla INGO, to conduct specialized training for the enrolled 25 students, in addition to other health service provider from Deir Ez-Zour (up to 10 trainees) on assistive technology and accessibility in rural settings. The training will be delivered through remote learning experience by Italian qualified professors facilitated by Al-Manara University and will be followed by piloting a practical application in Al-Mayadin. For the pilot project's purpose, an assessment will be conducted to identify potential beneficiaries in the targeted area. The outcome of this intervention will be assessing the needs of a group of potential PWDs beneficiaries in Al-Mayadin to be the recipients of OT evaluation and proper assistive devices in the aim to enhance their functional ability and autonomy with regard to the specific rural context they are living in. The PWDs beneficiaries will be evaluated by case managers to identify market-related livelihood opportunities focusing on integration with related activities of this same project.

The project will further include the organization of events both in Syria and, when conditions will allow, in Italy, with to promote the rehabilitation pathways and social and work inclusion for PwDs, with a specific focus on PwDs living in rural areas and vocational rehabilitation process to be established in Syria, starting from the experience of Deir ez-Zour.

Linked to the concept encapsulated by occupational therapy, the project will work to provide vocational rehabilitation of PwDs in Al-Mayadin to create an ecosystem around the above-mentioned intervention by providing beneficiaries with the necessary context-related vocational skills of mechanical repair and maintenance of human-powered or motor-powered vehicles, as the major commuting and transportation mean in the rural area. To this end, the project will support up to 10 PwDs or one of their household members to be equipped with the necessary vocational skills and assets to start their own business around mechanical repair and maintenance.

In close coordination with UNDP, empowering PwDs inside the community will be done through:

- Provide learning classes for people with visual impairment.
- Provide sign language training for PWD to help other PWD inside the center.





- Assign a person inside training/learning classes to help PWD to understand (explaining the class by sign language for PWD engaged in the class), this will make PWD feeling that they are really engaged in normal life for not attending only classes for PWD.
- Provide job opportunities for PWD inside the centers (Reception and teaching).
- Ensure inclusion of PWD into the referral pathways that will be develop jointly by UNDP-UNFPA-FAO and refer the PwD to and from the available services within and outside the RDC, in order for them to benefit from a wide spectrum of available and accessible services tailored for their specific needs

FAO will implement all capacity building activities in the RDC, including the demonstration field for participatory training and vocational training centre for agro-processing. Nevertheless, the assistance to vegetable producers will be extended to the neighbour villages of Bokrus-Tahtany, Albaloom. Al-Mayadeen and Altaibh.

UNFPA will implement activities, through provision of health and GBV protection services, as well as initiatives for the progressive change of discriminatory social practices, within as well as outside the RDC. UNFPA will utilize, for the provision of the services under this JP, facilities that have already been rehabilitated or that are currently under rehabilitation by UNDP. Therefore, no funds are expected to be utilized by UNFPA for the rehabilitation of buildings. Inside the RDC, UNFPA will support the Community Well-Being Centres (CWCs) which is expected to be rehabilitated in the first quarter of 2021 under other available funding and it will comprise social and health services open to all genders and ages. Outside the RDC, UNFPA will be supporting the Women and Girls Safe Space (WGSS) which is in the city of Al-Mayadin.

The CWC is based on a model that has already been piloted in other Rural Development Centres, specifically in rural Aleppo, rural Latakia and rural Sweida. In order to expand health services to men and boys, a policlinic will be part of the CWC and will ensure provision of the full package of reproductive health care and address the standards for quality of care as follows.

Safe and effective referral mechanism to other specialized services available and supported by UNFPA in Al Mayadeen will be put in place, particularly for natural delivery and C-Section deliveries, through the hospitainer procured and handed over to the Department of Health in Al Mayadeen as temporary health facility until UN agencies and government efforts will support rehabilitation and reactivation to secondary and tertiary care in Deir ez-Zour governorate. On the other hand, enhancing the public private partnership which will be the first step of sustainability of health services in Al-Mayadin.

Specialized GBV case management services will be provided through the available Women and Girls Safe Space; and the Reproductive Health clinic, all available in Al Mayadeen city.

Under this project, in support of UNDP vocational trainings, UNFPA will target the women and girls, including out-of-school girls beneficiaries of the health and social services at the CWC with focus-group discussions to identify their preferences and needs with regards to VT courses and opportunities. In coordination with UNDP and FAO, UNFPA will develop a referral pathways, including but not limited to dedicated ones for GBV, to link the JP beneficiaries with all the available services and opportunities generated through the JP as well as outside of it (as possible).

UNFPA will cooperate with UNDP and FAO to encourage gender-transformative vocational training courses by giving the women the opportunity to choose non-stereotypical VT options to allow them take on more gender-transformative roles that can also be more useful to them than the traditional courses.



Part of the implementation strategy will be targeting men and boys, crucial in addressing the root causes of GBV. UNFPA is proposing to roll out men and boys engagement strategies that have been piloted successfully in similar contexts. The model seeks to examine the gendered impact of the conflict through engaging men in transformative individual behaviour change guided by the voice of women. Ultimately, the proposed model will reduce harmful behaviours and promote gender equality and male participants the tools and knowledge to rethink belief systems and prevent violence against women and girls (VAWG) through individual behavioral change, and provide them with programming guided by the voices of women in the community. UNFPA seeks to initiate the Girl Shine Model to support, protect and empower adolescent girls in and out of school. The model will improve the prevention and response to violence against adolescent girls and provide them with skills to build their social assets. Through the existing women and girls' safe space, adolescent girls' groups will participate in learning sessions which will be facilitated by girl shine mentors and facilitators mobilized from their neighborhoods for out of school adolescents and through adolescent girls clubs in schools. Male and female parents-caregivers and teachers will also be actively involved in the girl shine project to ensure buy-in and reinforcement of skills learnt both at home and in schools.

FAO will provide key agriculture inputs and capacity building to rural women in priority areas spanning from production methods to processing, marketing and on how to run small-scale agribusinesses to improve food production, food security and nutritional levels of the targeted groups while generating extra income for families. Participatory training methodology – adult education - will be used to that effect, as it has been proven to be an effective tool to deliver knowledge through exchange of experience with technical experts, peers and practical trials (Learning by Doing Approach). This activity will benefit from the experience of FAO projects in the same area. This will enable the targeted women in rural areas to take up active roles in contributing to the development of agriculture sector within their communities, build their self-confidence, enhance professional skills and peer networks, and improve wider social cohesion. In a radius about 5 kilometers from the RDC, 655 women headed households have already been pre-identified in the agriculture sector; many of them are involved in vegetable production.

Similar approach will prevail for the agro-industry activities to improve the preservation of fruit/vegetables and therefore enhance the food availability and the market opportunities over a longer period. A vocational training center focusing on agro-processing will be established in the RDC for capacity building. The facility will also be used for processing local products. Indeed, one of the main constraints in DEZ is the conservation of food. The location is distant from the main cities and the transport of perishable products generates too many losses. The preservation of food is also crucial on food security point of view to extend the availability of vegetable on a longer period. In addition, the project will support households involved in agro-processing through the provision of equipment in close synergy with an on-going FAO project.

#### 4. Beneficiaries

The total estimated number of direct beneficiaries is: 17,900, including 7,600 returnees, 4,500 women and 75 PwDs benefiting directly from the project. Breakdown of direct beneficiaries per activity is provided in the appropriate section(s) below.

At least 80,000 people, including 33,600 returnees, 20,000 women of reproductive age and 800 PwDs will benefit indirectly from the project.

All targeted beneficiaries are women, youth and people with disabilities. Youth are targeted through service provision (UNFPA and UNDP). Men and boys are targeted through services available within the RDC (health and

social services) as well as part of targeted interventions to engage them in becoming actors of positive social change. The selection of beneficiaries will be based on vulnerability criteria like household composition, with special focus on female headed households (e.g. widows), special needs of a person/household such as presence of persons with disabilities; health status, level of poverty, food insecurity, loss of livelihoods, etc. The target of the project is to address the need of people in a comprehensive approach. Therefore, as much as possible, the same implementing partners will be selected for the whole activities to the same beneficiaries. Of course, the access to suitable land will also be considered as a technical criterion for the selection of beneficiaries involved in vegetable production activities

## 5. Objectives (general and specific/s)

### General Objective:

Support the resilience of vulnerable groups in targeted communities of southeastern Deir ez-Zour through the provision of social and economic services while fostering social cohesion and food security.

### Specific Objectives:

1. To support rural livelihoods and local value chains with tailored productive and capacity development activities targeting primarily vulnerable groups;
2. To provide availability of and accessibility to social services, including comprehensive gender and age-sensitive RH and GBV, prevention initiatives and social protection/inclusion to targeted communities;

## 6. Expected Outputs, activities and measurable indicators (including baseline and targets)

The proposed project, which will be implemented in cooperation with local community and NGOs, falls under the national priority to support empowerment of women and youth in rural areas. The project estimated amount for the first year, which is Euro 3M, complements other resources that are contributed by different donors to address the agriculture sector, livelihoods opportunities and the health and social needs of women and youth in the same area.

### **Expected Outputs:**

**Output 1 (UNDP):** Support to vulnerable groups in their capacity to establish income generating activities is increased

Ensuring integration with UNFPA support to health and community well-being Centres (CWCs) as well as FAO support on production, UNDP will support to build and sustain “community-based enterprises”, aimed at the inclusion of vulnerable groups, particularly PwDs, youth, women and COVID-19 affected populations. Building on its existing youth economic empowerment centers (YEP-centers), multiple direct and rapid support activities will provide access to income opportunities for target groups through offering a set of employment support services; on-demand vocational and skills trainings, entrepreneurship and businesses start-up support services.

This will bolster access to labour market, economic participation, and promote social cohesion and active peace-resilience building.

### Activities under Output 1:

- 1.1 Expand YEP center in Al-Mayadin by strengthening its capacity and support the operationalization throughout the project lifelong.
- 1.2 Establishment of non-agriculture vocational training rooms complementing the Agri-vocational training center established by FAO. (these training rooms will be operated by the YEP center and will include a set of professions that are in-high demand in the targeted locations such as agro-associated professions (agriculture engines maintenance) and other needed professions based on the outputs of the assessment intended to be conducted in the inception phase of the project. Indeed, one of the challenges within the targeted environment is the lack of vocational training centers and similar service providers entities which at some time jeopardize the quality of the services provided)
- 1.3 Provide 50 vulnerable youth and women with employment support services including placement services, employability and personal skills development, and job matching services.
- 1.4 150 youth and women will be provided with a market-driven vocational training supported with the needed professional kits to enter the labour market
- 1.5 5 employment support events will be conducted to promote the professional awareness of the targeted community.
- 1.6 Entrepreneurship and start-up skills training will be provided to 75 youth and women to facilitate establishing their start-up business. It is worth mentioning that part of the 100 beneficiaries will be for 50 women benefited from the food processing training scheme provided by FAO.
- 1.7 25 youth and women graduated from the entrepreneurship and start-up skills training with a feasible business model will be supported with a start-up grant and mentoring services to support establishing their independent businesses
- 1.8 Local value chains support including inputs and productive assets provided to 100 beneficiaries involved in beekeeping and honey production, aromatic and medicinal plants, feedstuff cubes and composting.
- 1.9 Vocational training related to organic waste management, beekeeping and marketing to 100 beneficiaries
- 1.10 Provision of start-up tools related to vocational training to 75 beneficiaries

**Output 2 (UNDP):** Capacity development for PwDs' assistance and their socio-economic inclusion is enhanced In collaboration with the University of Modena and Reggio-Emilia (UNIMORE), in Italy, and Al-Manara University in Syria, the project will conduct specialized training for 35 trainees on assistive technology and accessibility in rural settings.

### Activities under Output 2:

- 2.1 2 training workshops on occupational therapy conducted by Italian experts
- 2.2 Provision of training on occupational therapy (OT) for 35 students
- 2.3 Provision of OT services to 30 PwDs
- 2.4 Provision of vocational training to 10 PwDs or their family members

**Output 3 (UNFPA):** Availability and accessibility of quality comprehensive RH and GBV prevention and response services is enhanced

UNFPA, under Output 3, will provide the targeted women, men, boys and girls with gender and age appropriate health and social services (reproductive health and GBV prevention and response services) inside as well as outside the RDC.

#### Activities under Output 3:

- 3.1) Provision of safe, accessible and quality age-appropriate individual and group psychosocial support to 1800 women, men and boys (PSS) and individualized case management services in one CWC and one WGSS;
- 3.2) Provision of health services, including RH services, gender and age-tailored in one CWC and one RH clinic;
- 3.3) Support women's safe birth through the Hospitainer under DoH;
- 3.4) Establishment of clear referral pathways among all the socio-economic and health services available in Al Mayadeen (including, but not limited to: RH; GBV prevention and response; economic empowerment opportunities; awareness etc.)
- 3.5) Partnerships with WFP to provide multi-purpose cash assistance to PLW;

**Output 4 (UNFPA):** Men and boys' participation in primary GBV prevention initiatives is enhanced

In consideration of the fact that women are usually not the decision makers in their families and communities, especially in rural areas, targeting men and boys is crucial to addressing the root causes of GBV. Under Output 4, UNFPA is proposing to roll out men and boys engagement strategies that have been piloted successfully in similar contexts.

#### Activities under Output 4

- 4.1) Organize male and female EMAP sessions at the CWCs for 60 males and 60 females. Targeting 15000 beneficiaries through awareness raising on prevention of GBV targeting men and boys through the Engaging Men in Accountable Practices (EMAP) strategy, and aimed at positively influencing change of perceptions, beliefs and attitudes that continue perpetuate violence against women and girls, inside and outside the facilities supported through the JP;
- 4.2) Organize girl shine sessions with 180 adolescent girls and 180 of their parents and caregivers at the WGSS and in schools. Establishment of the "girl shine initiative" targeting in and out of school adolescents which aims to build their social assets in GBV prevention and reporting.
- 4.3) Organize advocacy and awareness raising sessions targeting community leaders including head of line directorates (DoH, DOSA, head of municipalities and members of parliament in the governorate)
- 4.4) Prepare IEC materials men and boys engagement and the girl shine project

**Output 5 (FAO):** Decent and equitable employment, income-generation opportunities and diversified diet increased for women and women-headed households through agriculture and agro-processing

FAO will provide key agriculture inputs and capacity building to rural women in priority areas spanning from production methods to processing, marketing and on how to run small scale agribusinesses to improve food production, food security and nutritional levels of the targeted groups while generating extra income for families. This will enable the targeted women in rural areas to take up active roles in contributing to the

development of agriculture sector within their communities, build their self-confidence, enhance professional skills and peer networks, and improve wider social cohesion.

FAO, in consultation with the Ministry of Agriculture and Agrarian Reform (MAAR), local Directorates of Agriculture and other stakeholders, will develop community-based activities targeted to women in Al-Mayadin in respect of the COVID-19 precaution measures.

### Activities under Output 5

5.1) Support up to 200 households producing vegetable. The main crops targeted are Okra, Tomato, Eggplant, and Zucchini with few leafy vegetables for daily consumption based on the seasonality. The support will include drip irrigation kits.

5.2) Establishment of a demonstration field for participatory training on vegetable and of a nursery for seedlings of fruit trees to provide capacity building for 200 women targeted by the agricultural production support on relevant technical themes, including water management and irrigation, good agricultural practices and quality control.

5.3) Rehabilitate a building to host a vocational training center.

5.4) Establish a vocational training center for processing vegetable and fruit (food processing, preparation, and drying). This center will be used for training, but it will also be operated by groups of women for processing local products.

5.5) Capacity building of the 50 women targeted by the food-processing unit and by the individual food production, on technical themes relevant to the processing, food hygiene, food safety, quality control and marketing of the food products they are working on. The training cursus will be complemented by a training on entrepreneurship delivered by UNDP.

5.6) The project will also provide some equipment for processing vegetable/fruit to 30 women that succeed to the above-mentioned training in synergy with on-going FAO project and previous UNDP activities to enhance the complementarity and avoid duplication.

Simplified log-frame (a comprehensive log-frame is in Annex I)

Specific objective	Output	Indicator	B/line	Target
<b>Linked to SO1:</b> <b>To support rural livelihoods and local value chains with tailored productive and capacity development activities targeting primarily</b>	<b>Output 1: (UNDP): Support to vulnerable groups in their capacity to establish income generating activities is increased</b>	1.1. # of beneficiaries received employment support services	0	50 beneficiaries received employment support services
		1.2 # of VTC established	0	1 of VTC established
		1.3 # of beneficiaries revived vocational training	0	150 beneficiaries revived vocational training



<b>vulnerable groups;</b>		1.4 # of beneficiaries received vocational toolkits	0	50 beneficiaries received vocational toolkits
		1.5 # of beneficiaries received Entrepreneurship and start-up support training	0	75 beneficiaries received Entrepreneurship and start-up support training
		1.6 # of beneficiaries received start-up grant	0	25 beneficiaries received start-up grant
		1.8 # of employment events conducted	0	5 employment events conducted
		1.9 # of beneficiaries receiving local value chains support including inputs and productive assets	0	100 beneficiaries received support on local value chains
		1.10 # of beneficiaries receiving vocational training related to organic waste management, beekeeping and marketing	0	100 beneficiaries received vocational training
		1.11 # Provision of start-up tools related to vocational training	0	75 beneficiaries received startup kits
<b>Linked to SO2:</b>  <b>To provide availability of and accessibility to social services, including comprehensive gender and age-sensitive RH and GBV, prevention</b>	<b>Output 2: (UNDP): Capacity development for PwDs' assistance and their socioeconomic inclusion is enhanced</b>	2.1: # of training workshops on occupational therapy conducted by Italian experts	0	2
		2.2 # of students receiving training on occupational therapy (OT)	0	35
		2.3: # of PWDs benefitting from OT services	0	30

initiatives and social protection/inclusion to targeted communities;		2.4: # of PWDs or their family member benefitting from vocational training	0	10
	<b>Output 3: (UNFPA): Accessibility of the targeted population to quality RH and comprehensive GBV prevention and response services in DeZ is enhanced.</b>	% of GBV survivors receiving quality GBV services	0	100%
		Number of functional GBV referral pathways and GBV pocket guides developed	0	1- GBV referral pathway 500- GBV pocket guides
		Number of monthly mentoring sessions organized for GBV case workers	0	24
		Number of women, girls, men and boys participating in group psychosocial activities at the CWCs	0	1,800
		% of people with disability received RH and HBV services	0	3%
		# of professionals trained on RH and GBV	0	50
	<b>Output 4: (UNFPA): Men and boys' participation in primary prevention initiatives enhanced is</b>	# of men enrolled and actively participating in EMAP session	0	60
		# of women enrolled and actively participating in EMAP session	0	60
		# of out of school adolescent girls enrolled and actively participating in the Girl shine program	0	90
		# of school going adolescent girls enrolled and actively participating in the Girl shine program	0	90
		# of care givers/parents and teachers enrolled and actively participating in the Girl shine program	0	180

		# of beneficiaries of the awareness raising and advocacy messages	0	15,000
<b>Linked to SO1:</b>  <b>To support rural livelihoods and local value chains with tailored productive and capacity development activities targeting primarily vulnerable groups;</b>	<b>Output 5: (FAO): Decent and equitable employment, income-generation opportunities and diversified diet increased for women and women-headed households through agriculture and agro-processing</b>	# of demonstration field established for training	0	1 demonstration field will be created for participatory training on vegetable and seedlings
		# of beneficiaries trained on vegetable production	0	200 women will be trained on vegetable production, including good agricultural practices, irrigation and quality control
		# of women that will receive inputs for vegetable production	0	200 women will receive inputs to enhance their production of vegetables, including irrigation kits
		# of building rehabilitated	0	1 building for a vocational training center on agro-processing will be rehabilitated



		# of operational VTC on agro-processing	0	1 vocation training center will be equipped for participatory training on processing vegetable and fruits
		# of households and workers trained on agro-processing	0	50 households and workers will be trained on agro-processing techniques
		# of beneficiaries that will receive equipment for individual agro-processing units	0	30 women will receive agro-processing equipment to create/enhance their production
		# of women involved in join agro-processing activities	0	20 women will find job opportunities by using the VTC facilities to process local production of fruit/vegetable

## 7. Monitoring and Reporting

Project teams will jointly work closely with Implementing Partners to establish measurable outputs and indicators against which progress can be effectively assessed as part of medium-term programmes. Monitors will conduct regular field visits to project sites and produce evidence-based documentation about the impact of the project on livelihoods of targeted households, including quarterly reports, geo-referenced pictures and short videos to maximise both project documentation and transparency.

The collected data (baselines, monitoring data, etc.) will feed into UNDPs information management system that can generate reports using both quantitative and qualitative data. This information management system will support the project in the following:

- Accountability for resources allocated;
- Accuracy in measuring efforts made in supporting livelihoods in the targeted communities;

- Management decisions informed by reliable data.
- Opportunities to learn lessons (almost on real time) and influence policy with evidence-based information.

UNFPA and FAO will also use its own monitoring tools finetuned for the project activities under their mandate.

During the project implementation regular reporting to the donor across the duration of the project will be ensured as follows: one progress report with a financial status report will be prepared by each agency and jointly submitted to AICS in one single document.

A final narrative and financial report at the end of the project will be also submitted to the donor in accordance with UNDP standards, rules and regulations.

## 8. Sustainability

All activities implemented through this project aim at achieving sustainability either because of their productive nature or through the absorption by local concerned sectoral directorates. Although in the context of the response to a protracted humanitarian crisis like the one ongoing in Syria, whereby sustainability is not always guaranteed, even by the humanitarian architecture, UNDP, UNFPA and FAO consider this project.

## 9. Visibility

In accordance with UNDP's communication and visibility policies and taking into consideration the sensitive political situation in Syria, efforts will be made to publicize the partnership with Italy. UNDP, UNFPA and FAO, within this Joint Programme, will undertake measures to ensure Italy's visibility, which include:

- Ensuring posting Italy's flag on the reports, publications and other publicity materials, such as signboards and T-shirts that the beneficiaries wear during activity implementation.
- Issuing press releases which give account of the Italian contribution and produce Public Information materials and brochures on Italy's contribution.
- Producing and posting web-articles on web-page on the activities supported by Russia's contribution
- Producing and obtaining photos or videos of the activities funded by Russia's contribution, showing Italy's flag.
- Utilizing the social media Facebook and Twitter, disseminating information on the project activities. UNDP and participating agencies will ensure to mention that the activities are funded by Italy.
- Making sure to mention on Italy's contribution when UNDP and participating agencies deliver speeches in in the ceremonial/public events related to the project.

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**10. Financial budget (Euro)**

Output	Item	Total
<b>Output (UNDP): Support to vulnerable groups in their capacity to establish income generating activities increased (total beneficiaries: 2,875)</b>	1: Provision of employment support services targeting 50 beneficiaries	15,000
	Establishment of vocational training centre (5 non agriculture training rooms to be established)	75,000
	Provision of vocational training targeting 150 beneficiaries	75,000
	Provision of vocational toolkits to 50 beneficiaries	35,000
	Carry out 5 employment events	10,000
	Carry out trainings on Entrepreneurship and start-up business establishment for 75 beneficiaries	15,000
	Provision of start-up Grants for 25 start-up businesses	60,000
	Provision of local value chains support	115,474
	Vocational training for local value chains related activities	30,000
	Provision of toolkits for vocational training	56,000
<b>Output (UNDP): Capacity development for PwDs' assistance and their</b>	2: Experts fees (Italian University Professors delivering remote training and mentoring on OT)	145,000
	Training workshops (equipment, internet, transportation, logistics and operational cost)	45,000



<b>socioeconomic inclusion is enhanced (total beneficiaries: 375)</b>	Exchange visit (Travel, accommodation, per diem (Italian Professors traveling to Project Location)	55,000
	Workshops in Deir-Ez-Zour	42,500
	Vocational training	74,000
	Direct Project Cost (technical staff , operational support)	84,797
	<b>Subtotal Output 1 + 2 (UNDP)</b>	<b>932,771</b>
<b>Output 3: Availability and accessibility of quality comprehensive RH and GBV prevention and response services is enhanced (total beneficiaries:1,850)</b>	Support the CWC to deliver quality GBV services, information and referrals through procurement of needed equipment and deployment of its technical staff	96,000
	Operationalize Polly clinic to deliver comprehensive reproductive health care services to women, men, boys and girl including (pregnancy care, Antenatal, Postnatal, Neonatal care, STIs treatment and care, general health services for men and boys, PSS)	120,000
	Operationalize RH clinic in cooperation with SFPA (deployment of staff and related operational cost) to deliver integrated RH-GBV services	30,000
	Support the delivery of RH services including safe delivery for the women referred from the RH clinic and mobile teams	30,000
	Operationalize women and girl safe space that delivering comprehensive GBV prevention and response	125,000
	Provide individualized case management and psychosocial support services to women and girls at risk including GBV survivors	22,000

	operationalize mobile team to provide RH/GBV services, information and referrals	35,000
	Carry out training courses for services providers related to RH/GBV aspects	10,000
	Establishing a volunteering network of 50 volunteers to support the outreach services and distribute the right information about RH/GBV prevention and advance services.	90,000
	Provision of needed essential equipment, RH commodities, medicines and supplies to operate the medical services in the CWC	100,000
<b>Output 4: Men, boys, women and girls' participation in primary GBV prevention initiatives is enhanced (total beneficiaries: 15,480)</b>	Organize male and female EMAP sessions at the CWCs	40,000
	Organize girl shine sessions with adolescent girls and their parents and caregivers at the WGSS and in schools.	40,000
	Prepare IEC materials men and boys engagement and the girl shine project	3,000
	M&E under both outputs	20,000
	Operation support for UNFPA (staff-supplies- transportation)	90,000
	<b>Subtotal Output 3 + 4 (UNFPA)</b>	<b>851,000</b>
	IC for UNFPA @ 8%	68,080
	<b>Total UNFPA (EUR)</b>	<b>919,080</b>
<b>Output 5: FAO): Decent and equitable employment, income-generation</b>	Personnel: Technical support; design and supervise training; logistic and administrative support	212,000
	Contract: Rehabilitation of a building for the VTC	110,000

<b>opportunities and diversified diet increased for women and women-headed households through agriculture and agro-processing (total beneficiaries: 500)</b>	Contract: Letters of Agreement with implementing partners for distribution, field support, training and data collection	120,000
	Travel: National staff and experts travel, and trainees' travel and allowances	41,500
	Procurement: Vegetable packages and seedlings	30,000
	Procurement: Irrigation kits	55,000
	Procurement: Demonstration plot equipment: irrigation, tools, etc.	20,000
	Procurement: Individual agro-processing equipment	30,000
	Procurement: Agro-processing unit	120,000
	Procurement: stationery, training consumables materials, IT equipment, etc.	10,000
	General Operating Expenditures: Project contribution to office rent, utilities, vehicles costs, visibility, security, IT services, financial services	97,707
	Technical Support Services: Technical advised by professional staff, backstopping, evaluation, reporting	19,144
	Project Support Cost (7%)	60,575
	<b>Total FAO</b>	<b>925,926</b>
	<b>Subtotal Output 1+2+3+4+5</b>	<b>2,777,777</b>
<b>UNDP GMS (8%)</b>	<b>222,222</b>	

<b>Grand Total</b>	<b>3,000,000</b>
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