### Allocation Overview

**Project Proposal Deadline: (24 January 2021, Damascus time: 18:00)**

**A) Overview**

The main objective of this Reserve Allocation (RA) is to provide **critical humanitarian assistance to populations living in vulnerable circumstances in Deir-ez-Zor and Rural Damascus**. A total amount of 5 (five) million USD is available under this allocation. **Four specific programme responses** are being prioritized: (1) support to primary health care services; (2) improved access to safe water sanitation and hygiene services; (3) provision of assistance packages including Shelter/NFI, and light rehabilitation kits, as well as hygiene and food parcels; and (4) improved access to education, including for out-of-school children.

**BACKGROUND**

- About 21 per cent of internally displaced persons (IDPs) in Syria\(^1\) are hosted in Deir-ez-Zor (0.16 million IDPs) and Rural Damascus (1.13 million IDPs) governorates. In both governorates, 52 per cent of IDPs are unemployed\(^2\). In Deir-ez-Zor, 23 per cent of IDPs live in damaged shelters and 30 per cent of school age children\(^3\) are not attending school with around 230,500 registered in just 338 schools. Additionally, for IDPs families who have income, 93 per cent reported that it's not sufficient to meet the needs. In Rural Damascus, though school attendance is better (9 per cent report of non-attendance), economic situation is dire, and 96 per cent IDPs reported that their income is not sufficient and immediate support with basic commodities is much needed.

- In Deir ez Zor, access to safe water is equally compromised. Of the 122 water pumping stations attached to the Euphrates river, 25 per cent are not functioning and 50 per cent are functioning at minimum capacity – increasing the likelihood of waterborne diseases spreading due to poor sanitation and limited ability to practice good hygiene. A combination of factors including destruction and lack of restoration of damaged or destroyed WASH infrastructure, the distribution of raw untreated water and the lack of sewage management has contributed to increased community-level health risks. The high prevalence of water borne diseases in some communities, including Deir-ez-Zor (Kisreh) and Rural Damascus (Nashabiyeh, Haran Al’awameed) are examples of some of these public health risks.

- In December 2020, the UN conducted its first inter-agency mission to Abu Kamal (southern Deir ez Zor) to assess needs. The mission reported that 44 out of 183\(^4\) schools are operational and overcrowded in the area. Only 10 per cent of cleaning workers of solid waste removal are operating and lack of garbage removal vehicles is reported. The shortage of qualified health workers especially specialists represents a problem in both public and private health facilities. For secondary and tertiary health care, patients travel 145 km to obtain health services in Deir-ez-Zor city. The national hospital in Abu Kamal is still out of service. In Deir ez Zor governorate in general, there are lack of health care personal, estimated currently 0.1 doctors, nurses

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\(^1\) Population Task Force, as of September 2020  
\(^2\) HNAP Governorate Profile: IDP Report Series 2020  
\(^3\) Education sector capture dropout students up to 24 years old  
\(^4\) UN Inter-Agency Rapid Needs Assessment Report December 2020
and midwives /1,000 population (where the international standard is 4.45 doctors, nurses and midwives /1,000 population). Out of 25 attacks on health facilities in January to October 2020, seven in Deir ez Zor and one in Rural Damascus. Overall and out of the 110 health centres in the governorate, only 50% are functional and out of the 9 hospitals only 2 working which add limitation to availability of health services particularly in the midst of COVID pandemic.

- In Rural Damascus, basic services, food and commodities continue to be urgently needed especially in East Ghouta, Zabadani, as well as other densely populated areas like Jaramana, At Tall and New Dahiet Qdosiya Elsakina of Rural Damascus (of which 50 per cent are IDPs). As of November 2020, about 60 per cent of people in need (205,000) people are not yet been reached, mainly in Babella, Duma, At Tall, Az-Zabdani, Qatana and Darayya. Alarming needs are primarily for food assistance, education and basic services.

- Burdened communities face increased difficulties in not being able to provide and meet their basic needs due to limitation of overstretched resources as well as due to high prices. In November 2020, the national average price of WFP Syria’s standard reference food basket increased by 251 per cent compared to November 2019, reaching SYP 99,243 (USD 79 at the official exchange rate 1,250/USD). This is the highest recorded price since WFP started monitoring prices in 2013. Worth to highlight that the staggering increase in price ranged from 261 per cent in Rural Damascus and 204 per cent in Deir ez Zor bringing purchasing power to its lowest since the onset of the crisis.

II. Allocation Strategy

A) Purpose of the Allocation Strategy and linkages to the HRP / Appeal

The Reserve Allocation shall cover urgent gaps of assistance that are timely delivered within three to six months. This allocation is aligned with Strategic Objective one (SO1) and two (SO2) of the Syria HRP 2020; it will support the implementation of immediate response activities in the sector of: Food Security and Agriculture, Health, Education, Shelter and NFIs, and WASH. Additionally, priority would be given to programme targeting people living with disabilities and women and girls as per the strategic direction of the SHF.

B) Allocation Breakdown

SHF allocated $68.4 million for 96 projects in 2020 which presents a 30 per cent increase compared to 2019. The allocation breakdown takes into consideration 2020 SHF allocations based on geographic and sector specific areas to determine funding gap analysis, combined with HRP funding analysis. Detailed SHF funding analysis of Rural Damascus and Deir-ez-Zor indicate need for further support in the Food and Education sectors in Rural Damascus as well as other sectors in Deir-ez-Zor. It should be noted that projects in Deir-ez-Zor has only received about 5 per cent of SHF 2020 allocations.

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5 Health Cluster as of October 2020
6 The Mobility and Needs Monitoring (MMN), November 2020

About Country-based Pooled Funds (CBPFs):

CBPFs allow donors to pool their contributions into single, unearmarked funds to support local humanitarian efforts. This enables humanitarian partners in crisis-affected countries to deliver timely, coordinated and principled assistance.

Syria
Humanitarian Fund: Reserve Allocation Strategy Paper

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Governorate | Sector | SHF 2020 Budget Allocated | % of Budget Allocated
--- | --- | --- | ---
Rural Damascus | S/NFI | $4,872,209 | 31%
 | WASH | $3,362,724 | 21%
 | Multi-Sector | $3,278,937 | 21%
 | Protection | $1,944,208 | 12%
 | Health | $1,049,076 | 7%
 | Food | $711,249 | 4%
 | Education | $490,318 | 3%
 | Nutrition | $262,107 | 2%
 | **Total** | **$15,970,828** |  |

Deir-ez-Zor

Governorate | Sector | SHF 2020 Budget Allocated | % of Budget Allocated
--- | --- | --- | ---
 | Food | $905,960 | 29%
 | Health | $570,733 | 18%
 | Protection | $539,023 | 17%
 | S/NFI | $399,003 | 13%
 | WASH | $366,760 | 12%
 | Education | $185,600 | 6%
 | Nutrition | $110,878 | 4%
 | Multi-Sector | $71,925 | 2%
 | **Total** | **$3,149,881** |  |

The Reserve Allocation is needs-based, targeting at the geographical and thematic level as indicated below:

<table>
<thead>
<tr>
<th>Governorate/Sector</th>
<th>Health</th>
<th>WASH</th>
<th>Food</th>
<th>Education</th>
<th>Shelter/NFI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deir- Ez-Zor</td>
<td>1 Million USD</td>
<td>0.75 Million USD</td>
<td>1 Million USD</td>
<td>0.5 Million USD</td>
<td>0.5 Million USD</td>
</tr>
<tr>
<td>Rural Damascus</td>
<td></td>
<td></td>
<td>1 Million USD</td>
<td></td>
<td>0.25 Million USD</td>
</tr>
</tbody>
</table>

Prioritization of Projects / Envelopes

**Envelope 1 Health:** USD 1 million

**Objective:**
To deliver health services at all level of care (primary, secondary and tertiary) and strengthen referral systems.

**Eligible Actions**
- Provision of primary and secondary health care services including reproductive health, mental health, emergency referrals as well as trauma, triage and emergency services.
- Procurement and distribution of essential medicines and medical supplies for health facilities
- Outreach services through mobile medical teams/units or community volunteers or community health programming/health education.
- Support training of health workers
### Envelope 2 WASH: USD 0.75 million

**Objective:**
1. Support to water, sanitation/sewage and solid waste management systems to ensure regular services for affected people in Syria
2. Deliver humanitarian WASH supplies and services and improve hygiene behavior and practices of most vulnerable people.
3. Improve WASH facilities and services in institutions to minimize substandard WASH conditions of the most vulnerable people in Syria.

**Eligible Actions**
- Undertake light rehabilitation of water supply and sanitation facilities
- Support provision of water disinfection reagents and consumables
- Support operation and maintenance of water, sanitation and solid waste management systems
- Provision of hygiene supplies e.g. soap, hygiene kits etc. targeting families with children with disability, people living with disability, the elderly, female headed households and residents in IDP sites).
- Support WASH IPC measures in schools e.g. through child centered behavior change communication interventions, promotion of hand hygiene, provision of supplies (e.g. soap, liquid chlorine, backpack sprayers etc.).

### Envelope 3 Shelter/NFI: USD 0.5 million

**Objective:**
Save and sustain lives through the provision of timely, targeted and appropriate shelter assistance and emergency relief items

**Eligible Actions**
- Distribution of essential and critical NFIs through in-kind and cash modalities
- Light repair to collective shelters and emergency shelters including shelter kits
- Light repair of community infrastructures and debris removal

### Envelope 4 Food: USD 2 million

**Objective:**
Ensure immediate as well as consistent access to food to the most food insecure people in Syria. The response will be driven by both geographical and household level targeting and needs-based assistance.

**Eligible Actions**
- Food and Cash/Voucher Assistance based on existing gap and very high levels of severity of food insecurity.

### Envelope 5 Education: USD 0.75 million

**Objective:**
To enable vulnerable children and youths to return learning and schools, specifically:
1) To address the critical gaps for enabling “safe and efficient return to school and learning”; and
2) To ensure that most vulnerable children and youths affected by the conflict get access to and benefit from quality education embedded with critical life skill education and psychosocial support.

**Eligible Actions**

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- Light rehabilitation / reparation of schools/classrooms to accommodate more students;
- Provision of additional classrooms/furniture; Provision of teaching and learning supplies.

### III. Timeline and Procedure

As per the SHF Operational Manual and CBPF Global Guidelines, reserve allocations are designed to be processed in 20 working days. Detailed plan below:

<table>
<thead>
<tr>
<th>Phase</th>
<th>Step</th>
<th>What</th>
<th>Who</th>
<th>Key Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Development of the Draft Allocation Paper</td>
<td>HC and Cluster Priorities</td>
<td>OCHA</td>
<td>31 December 2020</td>
</tr>
<tr>
<td>2</td>
<td>Sector feedback on Draft Allocation Paper</td>
<td>Draft Allocation Paper</td>
<td>Sectors, OCHA</td>
<td>6-10 January 2021</td>
</tr>
<tr>
<td>3</td>
<td>HC/Advisory Board Strategy Endorsement (meeting or email, etc.)</td>
<td>Draft Allocation Paper</td>
<td>HC, AB</td>
<td>11-15 January 2021</td>
</tr>
<tr>
<td>4</td>
<td>Launch of Allocation Paper</td>
<td>Allocation Paper</td>
<td>OCHA</td>
<td>18 January 2021</td>
</tr>
<tr>
<td>5</td>
<td>Proposal Submission Deadline</td>
<td>Proposal Preparation</td>
<td>IP</td>
<td>24 January 2021</td>
</tr>
<tr>
<td>6</td>
<td>Strategic and Technical Review</td>
<td>Strategic Project Prioritization</td>
<td>Sectors, OCHA</td>
<td>26-28 January 2021</td>
</tr>
<tr>
<td>7</td>
<td>HC/Advisory Board proposal endorsement</td>
<td>HC and AB endorse cluster portfolios/projects</td>
<td>HC, AB</td>
<td>2-5 February 2021</td>
</tr>
<tr>
<td>8</td>
<td>Proposal Revision and Adjustments</td>
<td>IPs address feedback, OCHA final clearance</td>
<td>IP, OCHA</td>
<td>7-9 February 2021</td>
</tr>
<tr>
<td></td>
<td>Approval</td>
<td>Grant Agreement Preparation</td>
<td>GA prepared/start date agreed with IP</td>
<td>OCHA</td>
</tr>
<tr>
<td>10</td>
<td>HC Grant Agreement signature</td>
<td>HC approves project</td>
<td>HC</td>
<td>10-11 February 2021</td>
</tr>
<tr>
<td>11</td>
<td>IP Grant Agreement signature</td>
<td>IP signs / start of eligibility</td>
<td>IP</td>
<td>10-11 February 2021</td>
</tr>
</tbody>
</table>

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7 Strategic and Technical reviews may be combined as per Global Guidelines and Guidance Note on CBPF Allocation Planning regarding Reserve Allocations.

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Eligibility Criteria
In coherence with the immediate priorities identified by the sectors in the context of the HRP 2020, this allocation will prioritize support to activities that address the below requirements:

Proposal Development:
1. Consider communities based on vulnerability and focusing on needs-based targeting;
2. Address geographic priorities identified based on ‘inter-sectoral severity of needs’ analysis as guided by the HRP;
3. Are implemented by organizations that are part of the coordination structure;
4. Duration should be set at the minimum necessary for efficient implementation of the project and may not be longer than six months;
5. Does not overlap with other projects in the targeted areas.
6. Cost efficient and should include cross-cutting themes: accountability to affected populations, ‘do no harm’, protection, gender and age.
7. All project proposals should be submitted via the SHF Grant Management System (GMS) (https://cbpf.unocha.org) by 24 January 2021 at 18:00 (Damascus time). Any submission after this date will not be accepted. GMS registration is obligatory for all eligible partners prior to the project proposal submission with due diligence component approved. GMS is a web-based platform that supports the management of the entire grant life cycle for the SHF.
8. Project proposals should be prepared in line with the objectives of this Allocation Strategy. This needs to be supported by clear log frames with outcomes, outputs, SMART indicators and detailed activities. Please refer to the CBPF Operational Handbook Annex 8 for a sample Project Proposal Template (available at https://www.unocha.org/ourwork/humanitarian-financing/country-based-pooled-funds-cbpf/cbpf-guidelines).
9. Partners should consult with relevant sector coordinators during the project proposal preparation phase to receive further details of the sector priorities for the allocation.
10. Only one proposal can be submitted/considered per partner.

Budget Preparation
- All project proposals must have a detailed budget outlining all the project related expenditures under relevant budget lines. Please refer to the CBPF Operational Handbook.
- Budget proposals must reflect the correct and fair budget breakdown of the planned costs and clearly outline units, quantities and percentages. When budget lines contain costs of multiple items greater than US$4,000 a budget breakdown should be included in the GMS BOQ tool, listing item, unit, quantity, cost (per unit and total cost).
- Provide a budget narrative (as an essential component of the budget) that clearly explains the object and the rationale of any budget line. For example, shared costs, large/expensive assets, and costs/equipment required to support the regular operation of the implementing partner, are clear cases where the provision of details will be necessary in the budget narrative.
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