I. Allocation Overview

The Syria Humanitarian Fund (SHF) First Standard Allocation (SA) strategy paper is issued by the Humanitarian Coordinator (HC), in consultation with the SHF Advisory Board (AB).

Project Proposal Deadline: [27/June/2021, Damascus: 6pm]

a. Overview

The First Standard Allocation aims to support the 2021 Syria Humanitarian Response Plan (HRP), in particular, with provision of lifesaving and sustainable assistance in underserved areas, including the newly assessed ones based on needs and specifically towards the most vulnerable population. A total of US$37 million is available under this allocation. Seven programmatic priorities have been identified to guide this allocation:

1. Multisector humanitarian response to newly assessed areas
2. Alleviation of the impact of the current economic crisis
3. Strengthening resilience of communities through food security, agriculture, and livelihoods interventions
4. Support to IDP in camps and informal settlements
5. Provision of essential services including water and sewage networks, education and health
6. Alleviation of the impact of poor rainfall and reported drought conditions through strengthening resilience of drinking water supply systems
7. Continuous support to the COVID-19 pandemic response while mitigating further impact.

Following sector and inter-sector consultations, the geographic scope for this allocation focuses on newly assessed areas in rural Aleppo, southern rural Idlib, northern rural Hama, as well as underserved areas in eastern rural Homs, rural Dar’a, as well as selected areas in the coast and north-east. This is in addition to any other selected area based on sector specific severity scale and needs.

![Figure 1 Prioritized geographic sub-districts by sectors](image)

Partner applicants are advised to discuss with sector for technical advice on activities and targeted geographic locations and also to refer to the supporting documents attached to this paper.
b. Humanitarian Situation

The protracted crisis in Syria has intensified needs over the past year through a complex and deepening socio-economic crisis, knock-on effects of Covid-19, and major losses in the food production sector (high cost of agriculture inputs, including fuel, reduced access to water, climate change and other production related shocks). These have combined to severely compromise the national food security situation. As the Syrian crisis marks 10 years, the situation continues to deteriorate drastically with an estimated 14.2 million people in need (PiN) of some form of food and agriculture assistance, up from 9.8 million in 2020, representing a 45% increase in PiN.

Overall, the food security situation in Syria is worsening with the national average price of the WFP’s standard reference food basket having increased by at least 33% between February and March 2021, reaching SYP 180,792. On 22 March 2021, Syria’s Central Bank increased the UN preferential exchange rate from SYP 1,250/USD to SYP 2,500/USD. However, the national average informal exchange rate weakened by 18 percent reaching SYP 3,972/USD in March 2021 causing the price of main food-items, especially imported goods, to drastically increase and further limiting access to food.

As of March 2021, in southern Idleb, 5,092 displaced families returned to Abul Thohour, Sanjar, Tamananah, Khan Shaykun, Heish and Ma’arrat An Nu’man. Though the sheer level of destruction reported, 50 per cent of infrastructure and housing damaged can be repaired and rehabilitated\(^2\). In North-East Syria, particularly the newly assessed areas that witness an increase in the number of returnees, such as the eastern countryside of Raqqa (Al-Sabkha and Ma’dan) and the eastern countryside of Der Az-Zor (Al-Ashara and Al-Jalaa\(^3\)), the high level of infrastructure destruction, inadequate shelter, limited availability of core services and basic commodities, as well as the scarcity of job opportunities, remain the principal driver of humanitarian needs to be addressed.

In newly accessible areas and areas of potential return, contamination by explosive ordnances continue to impact population with average two out of three survivors of explosive incident sustain lifelong impairment and will need constant assistance\(^3\). The contamination has also impact population living or returning to certain areas, while reducing ability to rely on agriculture-based livelihoods.

Access to NFIs is seen as lifesaving, especially during winter when vulnerable families are unable to access basic items to keep them warm, such as heating fuel, blankets and winter clothes. With the crisis entering its tenth year, a significant portion of the population continues to experience protracted displacement. In addition, returns have begun to some areas, and new IDPs swell already overburdened communities, while there has been limited response particularly in rural areas. As a result, families are resorting to living in unsustainable settlements with poor access to basic services. Adequate shelter with appropriate hygiene facilities is critical for people’s health, well-being and protection needs.

In terms of agriculture production, irrigation water and fuel shortages, the decreased availability of quality farming inputs coupled with high cost of agriculture inputs, conflict and displacement, dependence on rain-fed agriculture, shocks such as high temperature, erratic rainfall and crop pests and diseases continue to drive more families into food insecurity.

\(^2\) Based on inter-agency assessment mission on 28 July 2020.

\(^3\) Data collected by the mine action partners
The health systems in Syria are weakened, impacting access to services and leaving millions of people living below emergency standards for health care. There is a need for medicines, supplies, equipment and services within PHCs and hospitals, including for non-communicable diseases. Where health structures are damaged, or none exist, or areas with newly displaced people- mobile teams, mobile clinics are needed to fill gaps while repairs are addressed. Support to referral capacity, including ambulances, is needed to overcome gaps in secondary care and connect patients to humanitarian life-saving care. Specialized services are needed for physical rehabilitation, assistive devices, tuberculosis, cancer, reproductive and child health, dialysis, in-patient treatment of severe acute malnutrition with medical complications, and burns, as well as for mental health and psychosocial support. There is a need for continuous training of health workforce and finally COVID prevention and raising awareness activities are needed.

Urgent and life-saving nutrition needs for 4.9 million mothers and children in Syria are anticipated in 2021, where most of the nutrition needs lie in high severity area. Chronic malnutrition is expected to increase, with nearly 0.5 million children losing their learning and developmental potentials every year in Syria. Prevalence of maternal anemia and maternal malnutrition is expected to continue rising due to deteriorating socio-economic conditions. During 2021, an estimated 1.2 million mothers and women at child-bearing age will continue to suffer the consequences of maternal anemia and/or malnutrition if not treated appropriately. It is expected that acute malnutrition among children 6-59 months in hard-to-reach areas and IDP camps will continue spiking, endangering the survival and wellbeing of nearly 90,000 children in Syria.

The annual water balance of the region is primarily determined by precipitation between October and April. The recent rainy season was poor in Syria, with several governorates reporting rainfall for 2020 – 2021 significantly below the long-term average and consequently the country is currently experiencing drought conditions, especially in North East Syria (NES)\(^4\). This season’s low rainfall will therefore continue to have negative impacts throughout the rest of 2021. In NES for example, and besides rapid onset emergencies (e.g. at Alouk Water Station), the drinking water supply situation is further compounded by the reduced rate of water flow in the Euphrates River (the single most important source of drinking water for an estimated 5.5 million people in Ar Raqq, Aleppo and Deir ez Zour through an estimated 200 water pumping stations), from the agreed yearly average of more than 500 m^3/second in January 2021, to 249 m^3/second in May 2021.

As the summer season progresses, water needs are on the rise in host communities, with the needs being more significant in camp settings., rehabilitation / repair of most critical components of existing drinking water supply infrastructure (e.g. pumping stations, distribution mains and network systems, boreholes, water intakes, pumping stations etc.) are key priorities to alleviate the impact of poor rainfall, reduced Euphrates River water flow rates, rapid onset emergencies and reported drought conditions. In addition, and to ensure quality of drinking water, there is need to continued provision of drinking water chemicals (and which is provided by humanitarian actors). Furthermore, with at least 70% of sewage being discharged untreated and nearly half of the sewerage systems not functional\(^5\), existing sewage plants / systems require urgent improvement/light rehabilitation to prevent the discharge of raw sewage and contamination of drinking water sources and soils. In areas with high prevalence of leishmaniosis, vector-control activities including solid waste management need to be supported.

Emergency WASH (gender and technically appropriate) assistance in IDP sites (with people highly dependent on continuous humanitarian support), remains a priority for the Sector, and with a focus on sustainable solutions like connection of key camps and sites to existing water networks and/or

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\(^4\) Emergency Response Coordination Centre – DG ECHO Daily Map (as of 05 May 2021)

\(^5\) 2021 Humanitarian Needs Overview – WASH Sector

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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.

establishment. Within the framework of WASH infection prevention and control (during an ongoing COVID19 pandemic), WASH infrastructure in schools and healthcare facilities also need to be addressed.

Sectoral needs disproportionately affect groups such as women and adolescent girls, children, older persons, persons with disabilities and other vulnerable, marginalized or socially excluded persons with specific needs. Impacts include negative coping strategies, such as extreme forms of child labour, begging or child marriages, further risks of exploitation and family violence. Heightened vulnerabilities, family separation and the breakdown of family or community support structures may obstruct access to humanitarian assistance and services. In addition, mental health and psychosocial support needs are critical to preserving life and mitigating protection risks, particularly during conflict. If unaddressed, all these protection consequences can have irreversible effects, particularly on women, children and elderly. The protection sector and its AoRs identified 8,320,000 people in need for protection assistance in 2021.

The education system, which has already suffered immensely as a result of the crisis, remains fractured and under-resourced limiting the ability of children to access education services. Schools and learning spaces have been further impacted by the COVID-19 pandemic with preventive measures resulting in their closure for much of the 2020 academic year. Despite many reopening in September, few are able to enact safe school protocols due to a lack of classrooms and limited or non functioning toilets or handwashing facilities.

II. Allocation Strategy

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

- This allocation strategy was developed based on the most recent information from humanitarian partners and sector consultations. It also uses information from a number of sources including the 2021 HNO, weekly situation reports, and various rapid assessments and tracking tools. While the 2021 HRP is still a draft, this allocation will align with the three 2021 HRP strategic objectives (SO):
  - SO1) Provide lifesaving and life-sustaining humanitarian assistance to the most vulnerable people with an emphasis on those in areas with high severity of needs;
  - SO2) Enhance the prevention and mitigation of protection risks and respond to protection needs through supporting the protective environment in Syria, by promoting international law, IHL, IHRL and though quality, principled assistance;
  - SO3) Increase the resilience of affected communities by improving access to livelihood opportunities and basic services, especially among the most vulnerable households and communities.

The response strategy for this allocation, while focusing on striking a balance between humanitarian needs and resilience building, will also be aligned to the four priority thematic areas identified by the Emergency Relief Coordinator for CPBF funding in January 2019, as well as the main objectives of the Syria Humanitarian Fund strategy for 2021 which aims to use the fund to:
- Delivery of essential services to the most vulnerable communities in underserved areas, based on needs and in line with the humanitarian and Do No Harm principles;
- Provision of protection services for men, women, boys and girls, including prevention of and protection from gender-based violence, child protection, mine action;
- Strengthen resilience and self-reliance of affected communities with a focus on essential infrastructure repair and service revitalization;
- Promoting inclusion of the most vulnerable people, including people with disabilities, the elderly, female-headed households, children and others;
- Supporting humanitarian response to emergencies including onset displacement, COVID-19 pandemic, and promoting interventions aiming to reduce the impact of the current economic crisis.

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The Humanitarian Coordinator in consultation with the Inter-Sector Coordination group identified imperative support needed to provide immediate assistance to underserved population in areas of highest needs and accessible by partners from within Syria. The allocation intends to fill in critical gaps of assistance based on funding gap analysis based on mapping of SHF funded projects in the 2020 Standard Allocation as well as 2020 4Ws response analysis.

Geographic areas prioritized include:

- Rural Aleppo
- Northern rural Hama
- Southern rural Idleb
- Rural Homs
- Rural Dar’a
- North-East Syria
- This is in addition of any other selected community based on sector specific severity scale and needs, including newly accessible areas.

B) Sector breakdown and priorities

Since the beginning of 2021, the SHF has received generous and timely contributions of ten donors and has a current balance of $46.3 million. The First Standard Allocation will amount to a maximum of $37 million. Funding envelops is based on needs and funding gap analysis as per the 2021 HRP (in draft) and reported funding on OCHA Financial Tracking System (as of 11 May 2021).

Table 1. Sector Envelopes

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funding Received* in USD</th>
<th>2021 Reserve Allocation in USD</th>
<th>2021 Reserve Allocation in USD</th>
<th>Ongoing SHF Projects** in USD</th>
<th>2021 1st Standard Allocation in USD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Security &amp; Agriculture</td>
<td>65,759,969</td>
<td>8%</td>
<td>2,000,000</td>
<td>12,120,808</td>
<td>8,000,000</td>
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<tr>
<td>Health</td>
<td>33,362,406</td>
<td>4%</td>
<td>1,035,806</td>
<td>8,146,107</td>
<td>7,000,000</td>
</tr>
<tr>
<td>Protection</td>
<td>25,726,920</td>
<td>3%</td>
<td>4,229,388</td>
<td>3,000,000</td>
<td></td>
</tr>
<tr>
<td>Water Sanitation Hygiene</td>
<td>19,107,489</td>
<td>2%</td>
<td>759,143</td>
<td>6,179,832</td>
<td>7,000,000</td>
</tr>
<tr>
<td>Education</td>
<td>3,230,539</td>
<td>0%</td>
<td>768,121</td>
<td>4,480,255</td>
<td>4,000,000</td>
</tr>
<tr>
<td>Emergency Shelter and NFI</td>
<td>1,253,283</td>
<td>0%</td>
<td>500,000</td>
<td>4,288,757</td>
<td>5,000,000</td>
</tr>
<tr>
<td>Logistics</td>
<td>671,827</td>
<td>0%</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Nutrition</td>
<td>999,417</td>
<td>0%</td>
<td>1,502,996</td>
<td>1,000,000</td>
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<td>Early Recovery &amp; Livelihood</td>
<td>248,892</td>
<td>0%</td>
<td>2,599,226</td>
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<tr>
<td>COVID</td>
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<td></td>
<td>1,004,668</td>
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<td></td>
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<tr>
<td>Multi Sector</td>
<td></td>
<td></td>
<td>2,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>150,360,742</strong></td>
<td><strong>44,552,036</strong></td>
<td><strong>37,000,000</strong></td>
<td></td>
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</tr>
</tbody>
</table>

* FTS as of 11 May 2021
** Ongoing SHF projects with project end date beyond June 2021
### C) Prioritization of Projects / Envelopes

#### Envelope 1: Health USD 7 million

**Objective:**

Increase access to life saving and life sustaining health services for those most vulnerable and in need. Strengthen health sector capacity to prepare for, detect and deliver timely response to disease outbreaks, including COVID-19. Strengthen health system capacity to support continuity of care, strengthen community resilience, and respond to IDP movements and changes in context.

**Eligible Actions**

- Providing life-saving primary health care support including reproductive and child health care with appropriate modalities such as fixed and mobile health clinics, static medical points, and mobile outreach health teams.
- Supporting diagnostic and treatment services through procurement and provision of medicines, medical supplies and medical equipment to the health facilities or mobile teams/clinics.
- Supporting specialized services, such as physical rehabilitation, and dialysis, severe acute malnutrition with complications, burns and cancer.
- Supporting emergency referrals for secondary health care services.
- Supporting minor rehabilitation of damaged public health facilities (PHC level) and replacement of damaged health and medical equipment.
- Strengthening mental health and psychosocial programs.
- Supporting provision of safe and quality health services for communicable and non-communicable diseases.
- Supporting the activities under the COVID-19 pillars.
- Training of health care workers and community health workers.
- Supporting health education and promotion.

#### Envelope 2: Protection USD 3 million

**Objectives:**

1. Improve protection of population affected by the crisis through community-based and individually targeted protection interventions and through advocacy with duty bearers.

   Specific Objective: Provide quality and integrated protection services, with a focus on community-based approaches, including awareness-raising, psychosocial assistance, targeted support to persons with specific protection needs and other community initiatives, through community centers and outreach mechanisms.

   Specific Objective: Provide legal advice/counselling and legal representation on civil status documentation/registration as well as on housing, land and property (HLP) issues in accordance with national legislation.

   Specific Objective: Advocacy with duty bearers and key stakeholders to inform and enhance the response to protection risks.

2. Strengthen technical capacity of humanitarian actors and duty bearers at national and community level to assess, analyse, prevent and address protection (including child protection) risks and needs.

   Specific Objective: Conduct protection monitoring and identify protection needs/risks.

   Specific objective: improve quality and capacity of protection partners to respond to protection issues/risks which includes child protection minimum standards.
3. Increased and more equitable access for boys and girls to quality child protection interventions in targeted locations in line with the Child Protection Minimum Standards in Humanitarian Action.

Specific objective: preventing and responding to violence against children, gender-based violence, and child labour, through quality case management and an integrated package of quality child protection services including support for Unaccompanied And Separated Children (UASC) and Children with Disabilities (CWD).

Specific objective: Provide quality and integrated child protection services, with a focus on community-based approaches, including awareness-raising, parenting program, mine risk education, structured psychosocial support.

Eligible Actions

The protection sector identified activities per geographic areas by governorate:

Al Hassakeh/ Raqaa/Deir Ezor:

- Protection response and mitigation of protection risks (with a focus on the needs of women and children) in camps, collective shelters and host communities through static centers, establishment of women and child friendly spaces, mobile response teams and outreach providing: awareness, explosive ordnance risk education, psychosocial support and psychosocial first aid, coordinated protection/GBV mainstreaming and PSEA, recreational activities, legal services, civil documentation, child protection including structured PSS, parenting and specialized services through case management, GBV support and case management, informal education, assistance for persons with specific needs (including the elderly, persons with disabilities and serious medical conditions) and specialized services for children and women/girls.
- Provision of dignity and winterized kit to venerable women and girls.
- Provision of child protection services for child survivors of violence, exploitation, neglect and abuse (including child recruits, laborers, GBV survivors, and unaccompanied or separated children), this will comprise of provision of Psychological First Aid, structured Psychosocial support, case management and specialized services.
- Capacity building for community structures and social workforce.
- Raising awareness and advocacy on the identified child protection risks.
- GBV comprehensive services, PSS counselling, case management, awareness sessions, and Increase measures to mitigate the risk of GBV.
- Inclusion of children with disabilities in community.

South Governates:

- Community-based protection activities to support persons with specific needs including women at risk (survivors of GBV) and survivors of explosive incident; persons with disabilities; elderly; and children at risk. Provision of victim assistance services to persons suffering from injuries and persons with disabilities, including survivors of explosive ordnance incidents.
- Survey and clearance of explosive ordnance to restore access to people in need and enable humanitarian partners to deliver life-saving assistance and to enable people to access basic services.
- Provision of child protection services for child survivors of violence, exploitation, neglect and abuse (including child recruits, laborers, GBV survivors, and unaccompanied or separated children), this will comprise of provision of Psychological First Aid, structured Psychosocial support, case management and specialized services.
- Capacity building for community structures and social workforce.
- Raising awareness and advocacy on the identified child protection risks.

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Syria Humanitarian Fund Allocation Strategy Paper

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- Provision of child protection services for child survivors of violence, exploitation, neglect and abuse (including child recruits, laborers, GBV survivors, and unaccompanied or separated children), this will comprise of provision of Psychological First Aid, structured Psychosocial support, case management and specialized services.
- capacity building for community structures and social workforce.
- Raising awareness and advocacy on the identified child protection risks.
- GBV comprehensive services, PSS counselling, case management, awareness sessions, and Increase measures to mitigate the risk of GBV.
- Inclusion of children with disabilities in community.

Damascus and Rural Damascus:
- Provision of legal advice and assistance, including access to civil documentation and HLP.
- Expansion on community – based protection and outreach programing, as well as continue supporting community lead initiative.
- Mainstreaming of age/gender and social occupation tailored risk education/risk awareness to communities living protection and other sector’s activities.
- Provision of PSS and case management services to women, girls and children.
- Provision of victim assistance services to persons suffering from injuries and persons with disabilities, including survivors of explosive ordnance incidents.
- Survey and clearance of explosive ordnance to restore access to people in need and enable humanitarian partners to deliver life-saving assistance and to enable people to access basic services.
- Provision of child protection services for child survivors of violence, exploitation, neglect and abuse (including child recruits, laborers, GBV survivors, and unaccompanied or separated children), this will comprise of provision of Psychological First Aid, structured Psychosocial support, case management and specialized services.
- Capacity building for community structures and social workforce.
- Raising awareness and advocacy on the identified child protection risks.
- GBV comprehensive services, PSS counselling, case management, awareness sessions, and Increase measures to mitigate the risk of GBV.
- Inclusion of children with disabilities in community.

Tartous/Lattakia
- Outreach protection activities including provision of legal advice and assistance.
- Community-based protection activities to support persons with specific needs including women at risk (survivors of GBV); persons with disabilities; elderly; and children at risk.
- Provision of child protection services for child survivors of violence, exploitation, neglect and abuse (including child recruits, laborers, GBV survivors, and unaccompanied or separated children), this will comprise of provision of Psychological First Aid, structured Psychosocial support, case management and specialized services.
- Capacity building for community structures and social workforce.
- Raising awareness and advocacy on the identified child protection risks.
• GBV comprehensive services, PSS counselling, case management, awareness sessions, and Increase measures to mitigate the risk of GBV.
• Inclusion of children with disabilities in community.

Envelope 3: WASH USD 7 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 hygienic 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
Eligible actions are clustered based on the level of communities as presented below:

In communities:
• Undertake light rehabilitation of water supply and sanitation facilities.
• In response to rapid onset emergencies (for example, but not limited to Alouk Water Station, reduced water flows in the Euphrates River etc.), support installation, provision, operation and maintenance of drinking water supply system (emergency water trucking to complement this activity/action).
• Support operation and maintenance of sanitation and solid waste management systems.
• Conduct hygiene promotion interventions (to also include 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).

At the IDP camps and sites (for example, but not limited to, Al Hol Camp, Al Hasakeh collective shelters etc.).
• Undertake light rehabilitation of water supply and sanitation facilities.
• Support operation and maintenance of water, sanitation and solid waste management systems.
• Conduct hygiene promotion interventions (to also include provision of hygiene supplies e.g. soap, hygiene kits etc.).

At educational centres / schools:
• Undertake light rehabilitation of WASH facilities in schools.
• Conduct risk communication, and promotion of hand hygiene (e.g. through availing of soap to students).

In health care facilities:
• Undertake light rehabilitation of WASH facilities (including hazardous waste management systems).

Envelope 4: Food Security and Agriculture USD 8 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. The sector will
also ensure availability of food by boosting household/local productive capacity through the provision of inputs and trainings as well as enhancing communities’ capacity to sustain their productive assets. Supporting the rehabilitation of critical agriculture infrastructure to boost household food production will also be one of the core responses under agriculture and livelihoods.

**Eligible Actions**

- Provision of Food and Cash and Voucher Assistance to food insecure households in underserved and food insecure locations with the highest severity levels of food insecurity (severity scale 3 and above).
- Supporting Quick Impact Livelihoods Projects with immediate consumption benefits to enhance food consumption and availability at household level (HH vegetable production, poultry production and cash for work for rehabilitation actions).
- Supporting Livestock and Poultry production targeting vulnerable small-scale breeders, in particular livestock feed / support to fodder production provision and vaccination and provision of veterinary kits (To protect productive assets and minimize distress selling of animals).
- Provision of Critical Agriculture Inputs to support the production of staple food crops in locations facing high levels of food insecurity such as cereals.
- Scale-up support to Market-driven Income-Generating Activities (IGAs) including vocational training based on beneficiary preferences (Beekeeping, food/dairy processing, mushroom production and vegetable production).
- Light Rehabilitation of Critical Livelihoods Infrastructure with direct benefits for food production and distribution (irrigation canals, bakeries and flour mills to assist the wheat value chain, wells and irrigation systems).

Through this 2021 1st standard allocation, the sector will prioritize proposals that integrate nutrition-sensitive food security and emergency agriculture-based livelihood interventions, as mentioned above, since this will greatly improve the nutrition status of food insecure and crisis-affected individuals.

The FAS encourages partners to propose interventions that enhance multi-sectoral programmatic integration, where feasible, through linking food security and agriculture activities, prioritized under this strategy paper, with positive outcomes in livelihoods and resilience.

Where feasible, the FAS encourages partners to have integrated or combined concepts such as “from farm to bread”, supporting the restoration of water pumping systems to enhance or restore irrigation, linked with provision of critical agriculture inputs for crop production combined with rehabilitation of the flour mills and bakeries. Such integrated actions are highly encouraged by the sector since investing through the value chain will not only improve agriculture production and access to bread but will also contribute to social cohesion. Please see further Envelope 8. Multi Sector.

**Envelope 5: Shelter/NFI USD 5 million**

**Objective :**

Objective 1: Save and sustain lives through the provision of timely, targeted and appropriate shelter assistance and emergency relief items.

Objective 2: Strengthen the resilience and cohesion of vulnerable communities by improving housing and related community or public infrastructure.

**Eligible Actions**

- Distribution of essential and critical NFIs through in-kind and cash modalities.
- Winterization and seasonal support through in-kind and cash modalities.
- Light repair to collective shelters and emergency shelters including shelter kits.
- Rehabilitation of damaged houses through shelter packages or repair.
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- Enhance capacity of community health workers (CHWs) to provide treatment for uncomplicated malnourished children at community level.
- Strengthen capacity of mothers and caregivers to detect and monitor their children’s nutritional status.
- The nutrition sector will increase the depth of its integrated programs with food security sector such as food-based prevention of acute malnutrition (using Fortified Foods and Lipid Nutrients Supplements), and cash-based programming, while continuing its integrative activities with health sector, such as using nutrition as entry point to scale up primary health care and maternal health.
- The nutrition sector will ensure functional and high-quality nutrition surveillance systems especially among displaced and hard to reach population.

Envelope 8: Multi Sector USD 2 million

Objective:
To improve the production of milled flour and restore bakeries in the most vulnerable areas of Dara.

Phase one
Building upon the production of wheat in the governorate in 2019, this step will increase the production of milled flour, will set up production lines in key bakeries in the most vulnerable and food-insecure areas as well as provide fast impact inputs for linking bakeries to the milled wheat flour and generating jobs in post-harvest season. The restoration of production lines in the mill and the bakeries would increase the demand for wheat provided by farmers. The mill’s enhanced functionality would encourage farmers to participate in the bread-making process by connecting their harvested wheat to the bread value chain. The food/cash for harvesting work will provide income to casual laborers and enable farmers to harvest more (due to lack of mechanization and cash flow many farmers are unable to harvest fully).

To restore the wheat to bread value chain in Dar’a that will reactivate critical services and contribute to social cohesion.

Phase two
Building on the first step, this phase will ensure that vulnerable farmers are provided with key inputs to boost output via a referral process, that water systems are restored to sustain production, that the ongoing work from phase one is bolstered to improve the flow of milled flour across the governorate, and that production lines are set up/improved in more bakeries in the most vulnerable and food-insecure areas as well as support other key segments along the value chain to bring this key service to people in the most vulnerable areas of the governorate.

Partners are advised to refer to Specific Objective 3.1, (ERL and FSA sectors)
Enhance access to market-based livelihood opportunities and production.


ii. Sector Objective 2 and 3 (SO2/SO3) Recommendations for Agriculture and Livelihoods Assistance.

Eligible Actions

- Restoration of water Pump for irrigation.
- Provision of solar panels including alternative energy for agriculture and key basic service for street lighting in high-needs locations.
- Support to wheat milling and fortification: including setting up of production line to increase the capacity of the only mill in the governorate to mill fortified wheat as per the needs of the flour for the governorate.
- Restoration of five key bakeries.
- Provision of quick impact inputs such as generators or small-scale equipment to increase bakeries' baking capacity in at least 5 bakeries.
• Generate employment opportunities during harvest time through cash for work OR food for work schemes.

III. Timeline and Procedure

All partners who have completed their due diligence and capacity assessment as of 31 May 2021 are eligible for the allocation. Additionally, project proposals should follow the criteria below:

- Be aligned with at least one of the three Strategic Objectives of the 2021 Syria HRP;
- Be implemented by partners with access and operational presence in the targeted locations;
- Minimum budget per project is $250,000, while eligible grant size will be determined by partner’s capacity assessment status as outlined in the operational modality;
- Submissions to be limited to two proposals per applying organization;
- Project duration should not exceed 12 months;
- Be technically sound and cost effective (i.e. meet the technical requirements to implement the planned activities and contain a budget which is fair and proportionate in relation to the context e.g. cost per beneficiary is reasonable; support costs are in line with accepted levels for that given activity); and
- Adhere to the OCHA Country Based Pooled Fund (CPBF) guidelines, for budget preparation guidance as well as the general guidelines stated in the Operational Manual;
- Preference is given to projects implemented directly. Further sub-granting is strongly discouraged;
- Eligible applicants should have no outstanding SHF reports (including interim, final and financial reports), SHF compliance issues and should be part of the sector coordination mechanisms in Syria;
- Projects support the ERC four strategic steers, to the extent possible: (1) Support for women and girls, including tackling GBV, reproductive health and empowerment, (2) Programmes targeting disabled people, (3) Education in protracted crises, and (4) Other aspects of protection.

MAXIMISING RESOURCES: LOCALISATION, RISK MITIGATION & VULNERABLE GROUPS

- Recognizing that one of the major constraints in the implementing of activities in Syria is access, the SHF will give preference to those partners who have a proven track record of implementing projects directly on the ground. The allocation will focus particularly on partners with operational capabilities or potential to operate in targeted areas. Partners with projects already included in the HRP will be further prioritized as part of this allocation;
- If administrative clearances are not secured by national partners within three months of paperwork submission, the projects will no longer be eligible for funding;
- Sector responses and individual project proposals will be expected to articulate clear access strategies as well as robust risk mitigation practices demonstrating a strong understanding of needs and risks.

Table 2. Allocation Timeline

<table>
<thead>
<tr>
<th>Phase</th>
<th>Step</th>
<th>What</th>
<th>Who</th>
<th>Key Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparation</td>
<td>1 Development of the Draft Cluster Priorities</td>
<td>Cluster Prioritization</td>
<td>CC, OCHA</td>
<td>11 May</td>
</tr>
<tr>
<td></td>
<td>2 Development of the Draft Allocation Paper</td>
<td>HC and Cluster Priorities</td>
<td>OCHA</td>
<td>23 May</td>
</tr>
<tr>
<td></td>
<td>3 Cluster feedback on Draft Allocation Paper</td>
<td>Draft Allocation Paper</td>
<td>CC, OCHA</td>
<td>26 May</td>
</tr>
<tr>
<td></td>
<td>4 HC/Advisory Board Strategy Endorsement</td>
<td>Draft Allocation Paper</td>
<td>HC, AB</td>
<td>7-10 June</td>
</tr>
<tr>
<td></td>
<td>(meeting or email, etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5 Launch of Allocation Paper</td>
<td>Allocation Paper</td>
<td>OCHA</td>
<td>13 June</td>
</tr>
</tbody>
</table>

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.
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>7 Proposal Submission Deadline</td>
<td>Proposal Preparation</td>
<td>IP</td>
<td>27 June</td>
<td></td>
</tr>
<tr>
<td>8 Strategic and technical review</td>
<td>Strategic Project Prioritization</td>
<td>SRC, OCHA</td>
<td>30 June - 7 July</td>
<td></td>
</tr>
<tr>
<td>9 HC/Advisory Board proposal endorsement</td>
<td>HC and AB endorse cluster portfolios/projects</td>
<td>HC, AB</td>
<td>12-14 July</td>
<td></td>
</tr>
<tr>
<td>10 Proposal Revision and Adjustments</td>
<td>IPs address feedback, OCHA final clearance</td>
<td>IP, OCHA</td>
<td>15-25 July</td>
<td></td>
</tr>
<tr>
<td>Approval</td>
<td>11 Grant Agreement Preparation</td>
<td>GA prepared/start date agreed with IP</td>
<td>OCHA</td>
<td>20-27 July</td>
</tr>
<tr>
<td></td>
<td>12 HC Grant Agreement signature</td>
<td>HC approves project</td>
<td>HC</td>
<td>20-27 July</td>
</tr>
<tr>
<td></td>
<td>13 IP Grant Agreement signature</td>
<td>IP signs / start of eligibility</td>
<td>IP</td>
<td>20-27 July</td>
</tr>
<tr>
<td>Disbursement</td>
<td>14 Grant Agreement final clearance</td>
<td>GA cleared and signed</td>
<td>OCHA</td>
<td>20-27 July</td>
</tr>
<tr>
<td></td>
<td>15 First disbursement</td>
<td>Payment request processed</td>
<td>OCHA</td>
<td>10 working days</td>
</tr>
</tbody>
</table>

IV. HFU Information and Complaints Mechanism

The following email address, SyriaHF-feedback@un.org is available to receive feedback from stakeholders who believe they have been treated incorrectly or unfairly during any of the SHF processes. OCHA will compile, review, address and (if necessary) raise the issues to the HC, who will then take a decision on necessary action. All received information will be treated confidential.

V. Annexes

Annex 1: Sector specific activities and prioritized geographic locations, as well as sector specific guidance
Annex 2: Budget preparation guidance
Annex 3: Sector and SHF contacts
Annexes are available here: https://drive.google.com/drive/folders/1MGx_cVuK_IgCx-iXzHj_pl6WZ-RLvXkQ?usp=sharing

Link to GMS help portal (https://gms.unocha.org/content/partner)