

## Protection Context Analysis

**Syria**  
*September 2025*

Highlighting key protection risks and emerging vulnerabilities in Syria



## Introduction

INTERMEDIARY has been delivering protection services in Syria since 2020, as this sector is at the core of INTERMEDIARY programming, and **protection data analysis** is a foundational commitment that INTERMEDIARY upholds in Syria and globally to support evidence-based protection programming and informed advocacy. INTERMEDIARY has conducted a protection analysis in 5 communities; Hama ([Kafr Zeita](#), [Khattab](#)), Idleb ([Sanjar](#), [Tamanaah](#)), and Rural Damascus ([Beit Sawa](#)). These communities are targeted by INTERMEDIARY through the provision of specialized protection response, including a multi-sectoral individual case management process that allows individual children and adults to mitigate and recover from protection risks through access and/or referrals to relevant services, including legal and psychological counseling, psychosocial support, and tailored cash for protection assistance to support protection outcomes. Referrals to other services have further supported addressing protection risks. Service provision is complemented by protection monitoring activities, coordinated with the Syria Protection Monitoring & Assessment Working Group, allowing for direct data collection and further identification and analysis of protection risks. INTERMEDIARY community mapping exercises that have been conducted in targeted communities provide additional insights on community perspectives, coping mechanisms, and support networks, enriching the analysis with qualitative data.

## Executive Summary

This Protection Context Analysis covers the period between June and September 2025, and is based on a methodology that integrates quantitative and qualitative methods. Specifically, a total of 51 Key Informant Interviews (KIIs), 6 community mappings, and 178 individual cases (adults and children) registered under protection case management have been analyzed to highlight the interconnectedness of vulnerabilities and protection risks within the rapidly changing context that is affecting returnees, host community, and internally displaced individuals. Other sources that have been analyzed are the legal and MHPSS databases that further shed light on the nature of psychological and legal issues faced by communities, and the referral database. Additional reference to external sources is made throughout the document as relevant and needed. This is the first of three reports planned on a quarterly basis until March 2025, with the aim of providing trends overview and comparative analysis as implementation continues.

## Data Limitations

The data utilized in this analysis provides comprehensive insights. However, several methodological and contextual limitations should be considered when interpreting the findings:

- **Limited Secondary Sources of Protection Data:** Limited external protection data available for use as comparative indicators to support the current findings or provide a broader context.
- **Impossibility of Time-Series Comparison (Q2 vs. Q1/According to project timeline):** Comprehensive comparative data from the previous quarter (Q1), specifically the period between March and April 2025, is unavailable. Several factors restricted data, including

security incidents and the adaptation of INTERSOS protection activities in targeted locations, as well as a funding gap that contributed to halting protection activities.

- **Potential for Minor Data Bias:** Although efforts were made to diversify the sources of information, the analysis accounted for a minimal level of bias in the collection of qualitative data, particularly within the Key Informant Interviews (KIIs) and Community Mapping exercises. This is due to self-selection or the priorities of accessible key informants.
- **Access Challenges for Key Informants:** The team experienced difficulties accessing certain key informants due to their involvement with conflicting responsibilities. This may have impacted the depth and diversity of perspectives gathered from this group.

## Methodology

This report is based on a mixed methodology including quantitative and qualitative methods, providing a comprehensive analysis of protection risks, and trends observed during the specified period in targeted communities. It reflects a complex humanitarian landscape where economic pressures and violence are key drivers of protection risks. The analysis aims to highlight key trends and vulnerabilities to inform targeted programming and response efforts.

**Quantitative method** includes the following tools/sources:

- A total of 51 Key Informant Interviews (KIIs) engaging 28 men 23 women. Host Community 29%, IDPs in Camps 6%, IDPs outside Camps 10%, returnees from camps 10%, returnees from inside Syria (outside camps) 25%, returnees from outside Syria 18% and 2% Preferred not to specify.
- A total of 178 individual cases registered under case management and recorded in the database as follows:
  - 113 adults: 107 F and 6 M, out of which a total of 11 (7F & 4M) are with disability)
  - 65 children: 42 F and 23 M, out of which a total of 8 (3F&5M) are with disability
- A total of 267 internal referrals to many services have been made for 156 beneficiaries who were referred to one or more services as follows:
  - 109 adults 106 F and 3 M, out of which a total of 4 (all are females) are with disability, 42% are host community members and 58% returnees. (71 referrals have been accepted). 46% to Structured PSS, 38% to Psychologist, 7% to Legal Counseling , 1% to case management from PSS activities and 7% to Health services.
  - 56 children 36 F and 20 M, no one with disability, 37.5% are host community members and 62.5% are returnees (44 referrals have been accepted). 75% to Structured PSS, 14% to Psychologist and 11% to case management from PSS activities.
- A total of 21 external referrals have been made for 17 beneficiaries who were referred to 1 on more services, as follow:
  - 18 adults 18 F, 3 of them are with disabilities, only 17% are host community members and 83% are returnees (17 referrals have been accepted). 85% to Health services, 5% to Legal, 5% to Specialist services for PWD and 5% to Education.

- 3 children 1 F and 2 M with no disabilities (all referrals have been accepted 2 for health and 1 for education)
- A total of 53 individuals registered in the MHPSS database, provided with individual counselling; 40 adults 39 F and 1 M, out of which a total of 2 (all are females) are with disability, and 8 children (4 F and 4 M, out of which a total of 3 (2F & 1M) are with disability. And 5 adolescents between 14 and 17 years old 4 F and 1 M without disabilities.
- A total of 28 individuals registered in the legal database, provided with legal counselling with 23 women (3 with disability) and 5 children (1F with disability and 4M). INTERSOS has started delivering individual counselling early September and the target is expected to increase in the next report.

The sources for the **qualitative method** were 5 community mapping exercises, one in each targeted communities (Beit Sawa in Rural Damascus, Kefr Zeit and Khattab in Hama, Tamanaah and Sanjar in Idleb), with a total of 74 community adult members consulted (10M, 64F).

Facilitators guided discussions using a standardized tool covering:

- Perceived protection risks
- Locations perceived as safe or unsafe
- Trust networks and access to support
- Community strategies for mitigating risks

Key protection concerns were identified and categorized through thematic analysis, focusing on frequently reported issues across diverse groups and geographic areas. These findings were integrated with case management and protection monitoring KIs using INTERSOS internal data. Triangulating these qualitative and quantitative sources enhances the reliability of the analysis and ensures a coherent, evidence-based reflection of risks affecting diverse population groups.

## Key Highlights

- **Gender-Based Violence (GBV) is the Primary Crisis:** Adult women are the most vulnerable group, representing 47% of the total caseload. Returnees' women are disproportionately exposed to physical violence and injury (63% of cases linked to physical violence/injury), primarily driven by Intimate Partner Violence (IPV) and exacerbated by a lack of income. KIs validate that Violence against Women and Girls is widely present in their communities. Community mappings across all targeted areas report women and girls being exposed to sexual and verbal harassment.
- **High Psychosocial Distress and Suicide Risk:** 16% of the total caseload suffer from psychosocial distress. The MHPSS analysis reveals a critical mental health crisis, with women and girls disproportionately affected. Five documented cases of suicidal ideation were directly linked to/a result of domestic violence, severe socio-economic hardship, and caregiving burdens. 75% of KIs report community members experiencing psychosocial distress and emotional abuse.

- **Pervasive Barriers to Civil Documentation and HLP:** The lack of legal documentation is a severe barrier, particularly for returnees, with 90% of KII respondents reporting difficulties accessing civil documents. This directly results in the denial of humanitarian aid, denial of HLP rights (78% of respondents reported HLP issues), and the inability for 50% of children to receive a birth certificate, preventing school registration and access to basic services.
- **Prevalence of Child Labor and Child Marriage:** Child Protection risks constitute 36.5% of the total caseload. Child labor affects 32% of children out of school, with two-thirds being returnees and the majority involved in dangerous economic exploitation (agriculture/construction). While Child Marriage cases are lower in case management, community mappings confirmed that the socially accepted marriage age (14-17) contributes to the deprivation of education for both genders.
- **UXO Presence is an Active, Life-Threatening Barrier:** The presence of Explosive Ordnance (EO) is confirmed by 74% of KII respondents, posing an active threat that restricts freedom of movement and access to agricultural lands and humanitarian assistance. Community mappings indicate UXO as a risk for communities in Idlib and Hama governorates, with Kafr Zeita and Tamannaa at highest levels of concern.
- **Returnees Face a Disproportionate Burden:** Since the 8th of December, a significant wave of returns commenced and continued for the first few months in targeted locations. As of 1<sup>st</sup> October 2025, UNHCR estimates that since 8 December 2024, a total of 1,082,724 Syrians have returned to Syria from other countries while 1,870,049 internally displaced persons have returned to their areas of origin/choice, with Idlib, Hama and Rural Damascus as primary governorates<sup>1</sup>. Returns have had an impact on demographics with raising population density in already underserved areas and with limited basic services. Increasing social tensions between returnees and host communities have been expressed by all sources of information within this report.

## Target Population Profile

Participants included:

- Syrian returnees
- Syrian residents, particularly female-headed households and households experiencing severe economic vulnerability.
- Persons with disabilities (PwDs), often excluded from formal structures.
- Women and elderly individuals who face compounded risks due to caregiving roles, dependency, and mobility challenges.

## Vulnerabilities

An analysis of INTERSOS databases provides an overview of vulnerability profiles mostly experiencing a protection concern and/or at risk. These profiles provide an overall understanding of the drivers that underpin protection risks.

- **Returnees** are considerably more exposed to protection risks, particularly women.

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<sup>1</sup> <https://reliefweb.int/report/syrian-arab-republic/regional-flash-update-47-syria-situation-3-october-2025>

- **Female-headed households** make up 20 cases (11%) of the total case load, with 8% in Hama, 13% in Idlib and 11% in RD, with women and girls being more vulnerable to protection risks equally for returnees and host communities.
- **People with Disability** representing 10.6% (19 out of 178) of the caseload, with 63% being returnees (12) and 37% are host communities (7) (Children 5M and 3F, and Adults 7F and 4M), who face barriers in access to services.
- **Unmet basic needs/lack of income** affects 26% of the total caseload (29 of 113 identified in general protection) of which 62% returnees, underscoring the critical impact of the socio-economic situation.

The analysis of vulnerability profiles highlights several key groups that are disproportionately affected by protection risks. A consistent trend is that returnees face a higher burden of vulnerability compared to the host community. This suggests that the process of returning and reintegrating into communities presents unique challenges that exacerbate existing risks.

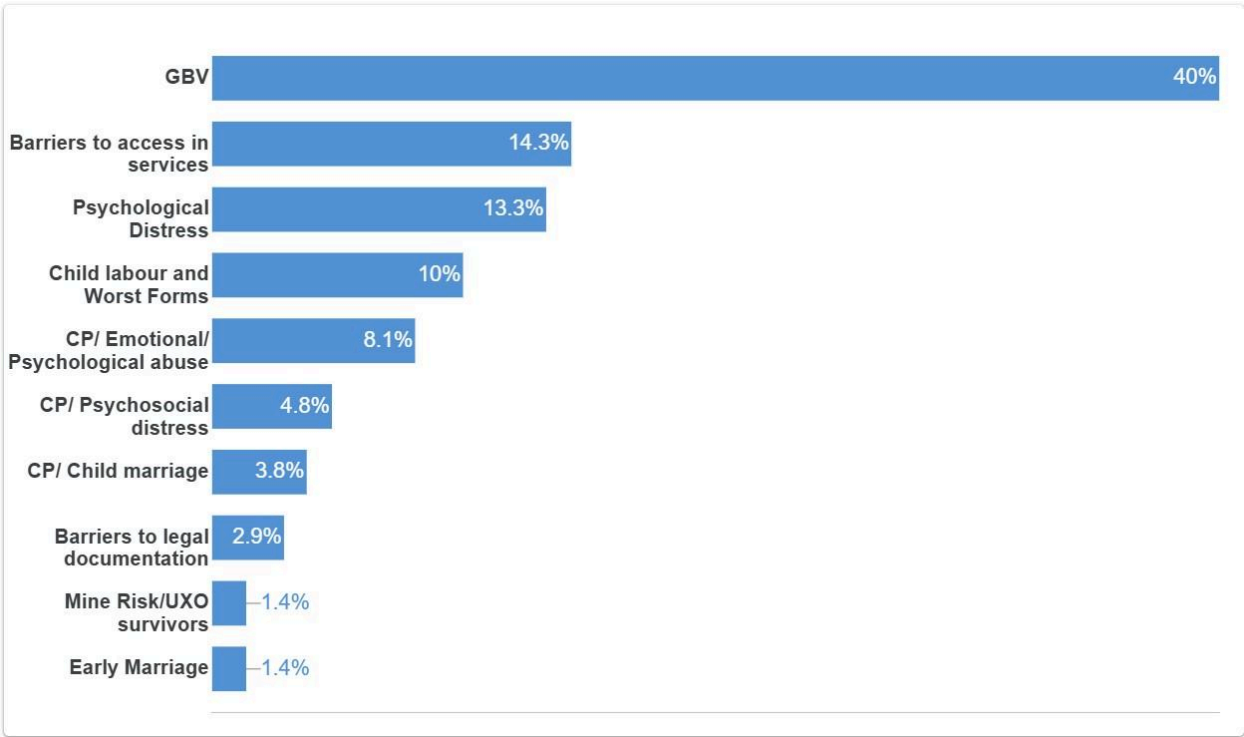
## Findings

<b>Risk</b>	<b>Number of respondents who refer to the risk out of 51 KI</b>	<b>Percentage</b>
<b>Population Movement</b> <i>Have returnees arrived in this location in the last three months?</i>	49	96%
<b>Barriers to Civil Documentation</b> <i>What proportion of people in this location experience challenges obtaining, replacing or renewing civil documentation?</i>	46	90%
<b>Violence Against Women and Girls (VAWG)</b> <i>How often do you hear of incidents of violence against women and girls in this location?</i>	44	86%
<b>Access Restrictions</b> <i>Is there anything preventing people from moving freely in this location in the last 3 months?</i>	42	82%
<b>HLP Challenges</b> <i>Have people in this location faced Housing, Land and Property (HLP) related issues in the last three months?</i>	44	86%
<b>Explosive Ordnance (EO) Contamination</b> <i>Have UXO elements been identified within 10 KM from this location?</i>	39	76%
<b>Psychological/Emotional Distress</b> <i>Have members of your community experienced psychological or emotional abuse or distress?</i>	38	75%
<b>Lack of Child Birth Registration</b> <i>Do children in this location have a birth certificate?</i>	25	49%
<b>Barriers to Assistance/Rights</b> <i>In the context of access to humanitarian assistance and access to other rights, have people in your community experienced barriers in accessing information on relevant processes?</i>	16	31%
<b>Social Tensions and Resource Disputes</b> <i>How would you describe the relationship between the host community, IDPs and returnees in this location in the last three</i>	9	18%

months?		
<b>Worst forms of Child labor</b> What are the main protection issues affecting children at this location?	36	70%
<b>Child marriage</b> What are the main protection issues affecting children at this location?	34	67%
<b>Violence, abuse or neglect within the household against children</b> What are the main protection issues affecting children at this location?	29	57%
<b>Child Peer Violence</b> What are the main protection issues affecting children at this location?	21	41%

*Table 1: Protection Risks identified through the 51KIs conducted*

Kills and community mappings findings are validated by INTERSOS case management information system, MHPSS and legal databases.



*Chart 1: Top Acute Risks identified through Case Management*

## Analysis

The analysis of the different protection data sources allows to provide an overview of the key protection risks that are prevalent in targeted communities. The below does not rank protection risks, but rather presents what is being reported at community level and confirmed by INTERSOS direct source of information, triangulated by desk review.

### 1. Gender-Based Violence (GBV)

Women surviving GBV represent 84 out of 178 cases recorded in INTERSOS case management, representing 47% of the total caseload across the three governorates. An analysis of specific GBV-related risk shows **physical violence as a prevalent form-** of the 84 GBV cases recorded, 39% of survivors were exposed to physical violence and/or injury. This exposure disproportionately affected returnees (63%) with adult women being most affected- **88% of were linked to intimate partner violence (IPV)**, lack of income, and denial of resources. The data in the KII shows high incidence of violence against women and girls, most of which occurs in Kafr Zeita (41%) at home school and workplace, with forced marriage being the most common form reported, followed by domestic violence, psychological abuse and physical assault. 17% of GBV survivors are exposed to **emotional and/or psychological abuse**, with women from host communities reaching 71%. This risk is linked to barriers to accessing basic services and intimate partner violence. Adult women are the most vulnerable group across all these identified risks. Returnees' women, in particular, face heightened risks of physical abuse and physical injury, compounded with emotional and psychological abuse, with intimate partner violence as a key factor. Children are also exposed to forms of GBV. A total of 3 forced marriage cases involving host community members were recorded in the case management database. However, community mapping mentions that the socially accepted age for marriage in these areas is between 14 and 17 for both genders. The community members consulted acknowledged that this social acceptance has led to many males and females being deprived of education. **Child marriage** is recorded at 12%, with 8 cases out of 65 CP with girls being largely affected (88%) with 63% being returnees- many of the children are unaccompanied and hosted by extended family members. Community mappings report this as an increasing coping mechanism. In Kafr Zeita, community members affirm that it is very common to marry at 13/14 years old, resulting in numbers of divorce below adulthood.

### 2. Barriers to legal documentation

KII data shows that **90% of respondents reported difficulties in obtaining, renewing, or replacing civil documents**, with the main reasons being lack of information about the procedures, the high cost of transport, and lack of legal aid services, which led to:

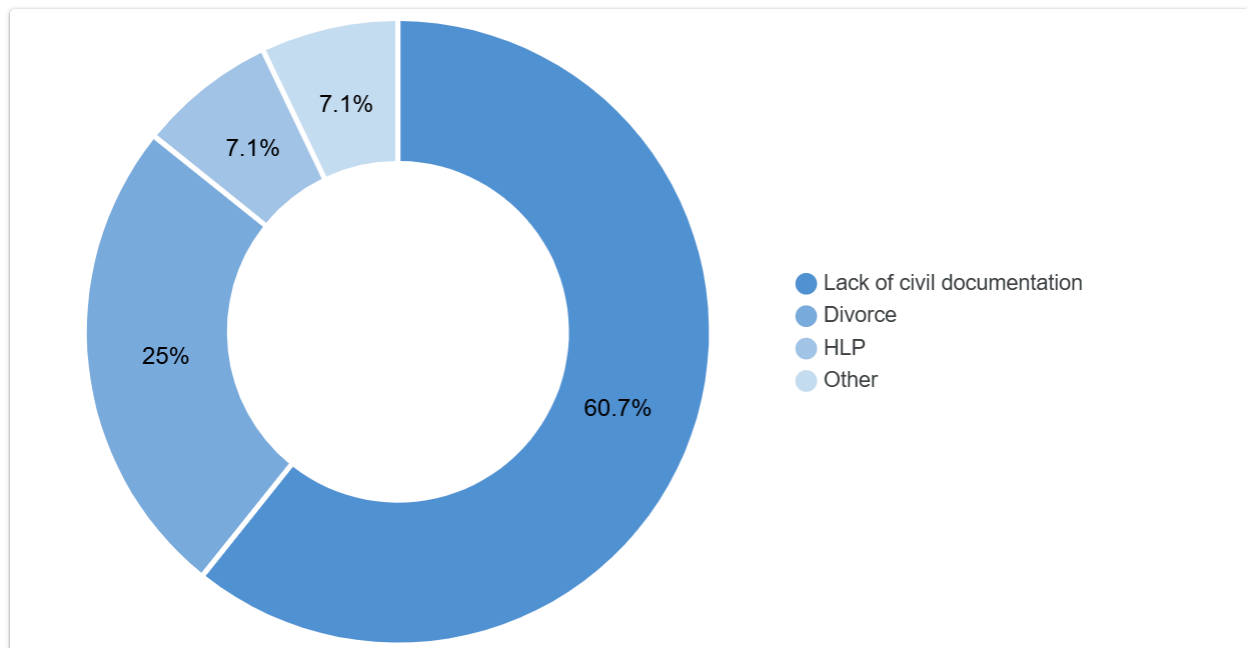
- Denial of access to humanitarian aid and services
- Denial of access to housing, land, and property (HLP) rights and services
- Inability to apply for employment

Within INTERSOS case management data, 6 individuals were recorded with lack of civil documentation, with returnees constituting the majority (4 out of 6). The most affected groups are child-headed households, persons with disabilities, and returnees. Additionally, the KII data indicates that 78% encountered problems related to housing, land, and property in the past three months, mostly in the village of Kafr Zeita (40%). Further KII analysis shows that **50% of**

**children lack birth certificates** due to various reasons, such as the complexity, length, or cost of the administrative process; lack of information on procedures; or inability to provide necessary documentation (e.g., a marriage certificate). This results in the denial of access to humanitarian assistance and services, as well as the unregistered status of changes in family status (marriage, divorce, separation, birth, death).

The legal database shows 7 cases requested legal consultation on divorce: 5 in Kafr Zeita, 1 in Tamannaa, and 1 in Sanjar. 17 cases requested to obtain official documentation: 7 from Tamannaa, 6 from Kafr Zeita, 2 from Sanjar, 1 from Khattab, and 1 from Beit Sawa. Additionally, 2 cases requested counseling on housing, land, and property (HLP) rights. The most affected group are returnees, who represent 57%, compared to 39% host community and 4% IDPs

Community mappings in Khattab and Sanjar reveal that many children are without legal documents. Although most are registered to the United Nations, their inability to obtain official civil status documents prevents them from registering to school. In Beit Sawa, some returnee families face legal challenges related to marriage formalization, family book registration, child registration, and obtaining birth certificates. These processes often require travel to northern regions, posing a significant burden. In addition, many returnees are without official documentation.



*Chart 2: Mains needs identified through Legal Counselling*

### 3. Child Protection Concerns

Children represent 36.5% of the total caseload, and are exposed to different types of abuse and exploitation. **Emotional/Psychological abuse** is widespread, representing 26% of child protection cases. Girls experience this risk more frequently than boys, with females representing 59% of cases compared to 41% males. The prevalence of this abuse is equally

observed among returnees and host community members. The primary contributing factors to emotional and psychological abuse include the absence of a positive parenting environment and exposure to bullying. **Child labour and Worst Forms** is registered across all areas- 21 children have been registered as out of school, representing 32%, with 14 children (67%) returnees. Half of these cases (10 cases) are involved in economic exploitation, including the worst forms (7 returnees and 3 host communities). Child labour is reported in 17 cases, with 59% being children returning. This figure also includes children who report being enrolled in schools but work after school hours and/or have been exploited during the summer break, which falls under the period covered by this report. The types of work performed are mainly agricultural farming and construction. **Kill results show that 70% of respondents mentioned child labor and the worst form of child labor in their communities.** This has been confirmed by community mappings in all areas. In Sinjar, most girls are engaged in agriculture and factory work for long hours, often 10–12 hours a day, while boys tend to work in shops, industries, and as day laborers. Society does not perceive child labor negatively and instead, it often encourages the practice due to difficult economic conditions. Community members engaged in community mappings report that children returning are not proficient in the Arabic language, combined with the difficult economic situation and the condition of schools and education system that currently does not encourage retention (lack of teaching staff, unclear curriculum, poor infrastructure) and lack of documentation as key push factors for children drop out and engaging in child labour.

#### 4. Psychological Distress

Psychological distress has been reported across all locations, in children and adults. INTERSOS case management reports 16% of the total cases experiencing poor mental health or psychosocial distress as a primary risk. Among the affected, host community members record a slightly higher percentage, approximately 55%, compared to 45% among returnees. The most affected population are adult women (60%) and female children (29%). A total of 13 cases have reported suicide attempts, with 39% having self-harming and previous attempts, and clear patterns of IPV and domestic violence as prevalent. Across all child protection cases, 14% experience psychosocial distress, with girls representing 89% of cases compared to 11% boys. Lack of a positive parenting environment and exposure to a traumatic event are the primary contributing factors. Additionally, **74% of respondents in the Kills reported that people in their communities suffer from psychological distress**, including fear or anxiety due to insecurity, violence, or threats, as well as grief, emotional distress, or trauma from loss and violence. The most affected groups are adults and children under detention, survivors of detention, destitute individuals, child- or women-headed households, and people with disabilities.

INTEROS provides individual counselling as part of its case management response. The analysis of the 53 individuals undergoing psychological counselling highlight the following:

- 40 adults, **particularly women**, experience psychosocial distress, as a result of exposure and surviving domestic violence/IPV, socio-economic hardship, lack of income, work-related stress, inability to meet family needs, family illness (husband's cancer), household responsibilities, loss and grief, social isolation. Most cases suffer from persistent psychological stress, tension, anxiety, grief, and hopelessness, with **five**

**cases showing suicidal ideation.** More than half of the cases suffer from sleep disturbances.

- 8 children between 7 and 13 (4G/4B) suffer from persistent anxiety, fear, sadness, and low self-confidence, in addition to PTSD symptoms like nightmares. They also show behavioral symptoms like difficulty concentrating and anger. Their distress is mainly linked to traumatic events like losing family members in an earthquake and family pressures like domestic violence and parental separation. Social difficulties such as bullying and isolation also play a significant role.
- 5 adolescents between 14 and 17 (5G/1B) highlight **family conflicts**, feelings of blame and fear for the future as key stressors for adolescent girls. Isolation and fear of dropping out of school play a role into psychosocial distress and signs of anxiety.

Data analyzed links exposure to violence or abuse (domestic, gender-based, family conflict) as key factor to depression, anxiety, hopelessness, panic attacks, social withdrawal, low self-esteem, anger, sleep disturbances, and in several cases, suicidal ideation or self-harm. This affects women and girls, with women-headed households additionally bearing the burden of economic hardship and poverty. This leaves them with fatigue, insomnia, loss of appetite, feelings of worthlessness, low self-confidence, high stress levels, and difficulty performing daily pain), sleep disturbances, loss of interest in usual activities, and social isolation. Caregiving burden adds to the difficult condition of women, who experience high levels of stress due to managing households, children, or elderly relatives, which amplifies fatigue and emotional strain. The absence of parental or family support / forced caregiving responsibilities demonstrate the negative impact on children and youth, leading to weak relationship-building, low self-confidence, feelings of rejection or guilt, and tendency to isolate.

## 5. Mine/UXO Risk

The data confirms that the presence of UXO and other EO is not merely a theoretical threat but an active and pervasive source of risk, injury, and fatality that severely restricts access to livelihood and humanitarian assistance. INTERSOS registered 3 individuals who survived UXO in Hama/Kafr Zeita: 2 children (1F,1M) and 1 adult female, all of whom resulted in a permanent disability. KII data shows that 74% of respondents reported UXO presence within 10 km of this location, especially in Tamannah and Kafr Zeita. This is confirmed by INTERSOS community mappings in both locations- in Tamannah, incidents of children injured by UXOs have been reported inside schools. KII respondents mentioned specific areas such as agricultural lands and abandoned, partially destroyed buildings- in Tamannah, at least 70% of housing is damaged, and community members report this risk as critical for safety and protection. UXO is also reported as a barrier to accessing humanitarian aid in Kafr Zeita. These figures are supported by findings from the Mine Action AoR, which by 18<sup>th</sup> September indicate an increase in unexploded ordnance (UXO) incidents in Idleb governorate, with 117 accidents reported, resulting in 81 deaths and 134 injuries. Additionally, 23 incidents occurred in Rural Damascus and 79 in Hama.

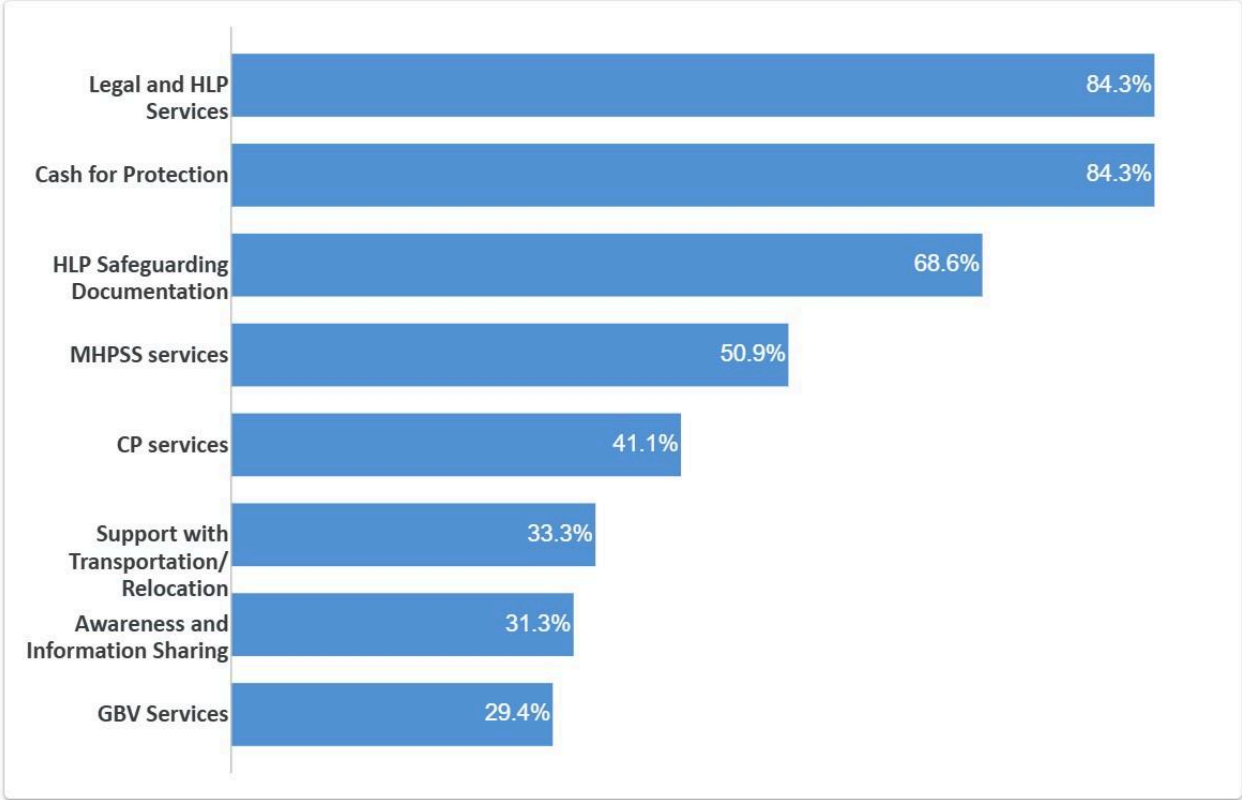
## 6. Barriers to access in services

Access to services has been reported by 17% of the total cases, with 55% being returnees compared to 45% from host communities. These barriers equally affect the communities of Kafr Zeita, Khattab, and Sanjar. The most affected population are adult females, representing 90%, compared to 10% adult males. Additionally, **31% of respondents in the KII reported**

**various barriers to accessing basic services**, including humanitarian workers, community leaders, discrimination against specific social groups, and restrictions on freedom of movement due to the presence of UXO.

### Conclusion & Recommendations

Analysis of this period confirms the dire protection environment that affects communities in Syria, returnees and host community alike, with vulnerable groups remaining women, girls and boys, characterized by high rates of gender-based violence, pervasive child protection risks and significant mental health needs, all exacerbated by the ongoing population movement, barriers to legal documentation and socio-economic hardship. The data underscores the critical vulnerabilities of returnees, particularly women and children, who face exploitation, discrimination, and limited access to essential services. Access to services remains critical in targeted locations- barriers are multiple, including lack of documentation, lack of services and lack of income to afford transportation, as well as presence of UXOs. Safe spaces for women, girls and children are unavailable, with children resulting into mine risk while playing or working in unsafe contaminated areas. The incidence of suicide risk demonstrates a critical sign for psychosocial distress, particularly for women and girls, with GBV constituting an increasing concern. The need for expanding MHPSS specialized services is a priority. Kills and community members highlight the need for further increasing protection services as follows:



*Chart 3: Main Protection needs highlighted by the interviewees*

- ❖ Increase protection monitoring and analysis to keep pace with the fast changing context of Syria, consider incorporating findings of other operational areas where INTERSOS operates
- ❖ Enhance community-level awareness and information sharing, particularly on civil documentation and HLP, GBV and MHPSS. This includes ensuring knowledge on key procedures for obtaining legal documents and accessing rights; GBV concepts and rights; parenting and information on positive children upbringing skills
- ❖ Consider scaling up GBV programming, through regular safety assessments and gender analysis, and use protection centers to provide women and girls safe space and prioritize livelihood opportunities for women-headed households and skills training for girls.
- ❖ Increase mine risk education and awareness with children and adults with stronger coordination and collaboration with Mine Action and other stakeholders.
- ❖ Strengthen coordination within Protection Sector at national and subnational level, and at Inter-Sector level to improve access to services and timely referrals, through re-inforcing the Centrality of Protection through scaling up protection mainstreaming efforts.