

RESULTS SUMMARY

Inclusive Women’s Health and Dignity in Syria

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PROJECT	Title:	Acute health and education support in Daraa and rural Damascus
	Partner:	Middle East Council of Churches - MECC
	Country:	Syria
	Period:	September, 2024 – August, 2025

CHANGE	In rural Damascus, MECC health awareness and psychosocial support (PSS) interventions supported by DM improved health knowledge and outcomes among 600 households, including IDPs, returnees and deaf women, through visits, trainings and medical counselling. Participants reported reduced fear of visiting doctors, increased confidence discussing health concerns, and corrected misconceptions. The intervention also enabled identification and follow-up of untreated conditions, including high blood pressure and a breast lump.
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CONTEXT	After more than a decade of conflict in Syria, weakened health systems, insecurity, and restrictive norms have limited women’s access to healthcare, especially for those with disabilities. Stigma, mobility restrictions, and misconceptions contribute to untreated conditions, affecting women’s wellbeing, family life, and community resilience. The project addressed stigma by linking health awareness to broader issues such as stress and parenting, while creating inclusive and safe spaces for exchange across diverse groups.
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CONTRIBUTION	While jointly designed and implemented, MECC led community and doctor engagement, and DM provided technical guidance on nexus and inclusion remotely. DM and MECC’s flexible approach enabled adjustment e.g. on participants profiles based on participant feedback (inclusion of deaf women and older women), strengthening inclusion, building trust, and empowering 100 volunteers, many of whom were first-time volunteers. Guided by needs-based principles, the partners aimed to build trust and cooperation across faith communities.
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IMAGES	 Health Awareness and PSS training, Syria, 2025. DM's archive.	 Health Awareness and PSS training, Syria, 2025. DM's archive.
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See next page for more details →

ADDITIONAL INFORMATION

ACTIVITIES

Between 2024 and 2025, MECC organised health awareness and PSS trainings for 100 women, who each visited five vulnerable families from diverse religious and cultural backgrounds through a peer-to-peer approach. Recognising the wider impact of women's physical and mental health, the intervention targeted vulnerable communities and combined awareness, PSS, food baskets and medical consultations to improve knowledge and access to care. During visits, the trained women shared information, identified health needs, and facilitated referrals for medical consultations coordinated by MECC. The combination of training, material support (including food baskets and hygiene kits), and follow-up care strengthened women's health behaviour and promoted social cohesion through interreligious engagement. To promote social cohesion, trained women were encouraged to visit families beyond their usual network. Of surveyed participants, 94% later reported improved interaction with others in their community.

LESSONS

MECC and DM have employed a strong driver for improving women's health in a context where it is often stigmatized and underprioritized, namely a peer-to-peer approach that equips women to share accurate information and promote care-seeking. A key lesson is that flexibility and adaptation to participant needs can improve inclusion and trust, enabling the project to reach groups often excluded from health services. The endline survey further highlighted the importance of sustained engagement, with participants requesting more frequent sessions to maintain health and social gains. Building on this, future interventions should prioritise continuity through regular follow-up sessions, alongside more systematic involvement of men and strengthened partnerships with healthcare providers to sustain long-term outcomes. The partners have begun scaling this approach through a cross-country nexus initiative between Syria and Lebanon focused on women with disabilities.

EVIDENCE

The results achieved in participating women's mental and physical health, driven by increased knowledge and behaviour change, were documented through focus group discussions held after the trainings, where MECC identified and validated five success stories from the target families. The project's impact was further reflected in feedback from an affiliated doctor, who highlighted the significance of the outcomes. These changes were captured in two harvested outcomes validated by DM, including a focus on empowerment and inclusion of deaf women. Additional documentation is available through training videos and participant interviews shared here:
<https://www.youtube.com/watch?v=EMQsTO2AIH0&t=3s> and
<https://www.youtube.com/watch?v=qj9u0KdbBFM&t=32s>. KilderGiv din feedback om BizChat

DOMAINS

Development strategy priorities:

Fragility and Migration

Changes in the lives of people facing poverty, marginalisation or vulnerability

x

Changes in laws, policies and practices that affect people's rights

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Changes in the capacity of organisations and communities to support rights

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Changes in partnerships and collaborations that support people's rights

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Changes in participation of groups facing poverty, marginalisation or vulnerability

x

Changes in local leadership of development and humanitarian work

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