HUMANITARIAN SITUATION OVERVIEW OF SYRIA (HSOS)

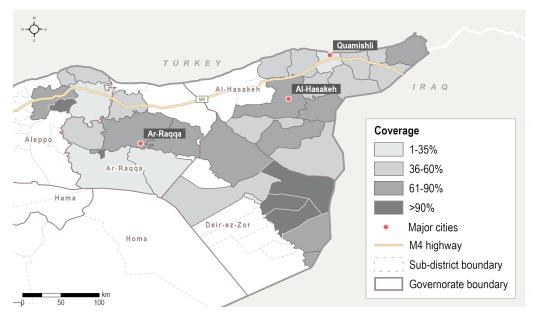
April 2023 | Northeast Syria

INTRODUCTION AND METHODOLOGY

HSOS is a monthly assessment that provides comprehensive, multi-sectoral information about the humanitarian conditions and priority needs inside Syria. This factsheet presents a thematic review based on the HSOS assessment of the priority needs and humanitarian assistance, economic conditions, living conditions, access to basic services, public health, and the security and protection situation in Northeast Syria (NES). HSOS focuses on host community and internally displaced persons (IDP) households residing in communities. **This assessment does not provide information on camps and informal settlements.**

Unless specified by an endnote, all indicators refer to the situation in the 30 days prior to data collection. Findings are indicative rather than representative, and should not be generalised across the population and region. The complete monthly HSOS dataset is available on the **REACH Resource Centre**.

The assessment is conducted using a key informant (KI) methodology at the community level. REACH enumerators are based inside Syria and interview three to five KIs per assessed location, either directly or remotely. KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in **1,323 communities** across Aleppo¹, Ar-Raqqa, Al-Hasakeh, and Deir-ez-Zor. Data was collected **between 2-18 April 2023** from **4,775 KIs** (19% female).



KEY MESSAGES

Access to agricultural livelihoods remained difficult in NES due to high production costs and heavy rains which damaged crops. Spring rainfalls also caused turbidity (clouded or opaque water) in the Euphrates River, reflected in increased reports of drinking water having a bad colour. Protection risks linked to conflict were increasingly reported in Deir-ez-Zor governorate.

- Communities relying on agriculture as a source of livelihood faced challenges due to the high costs of agricultural inputs and heavy rainfall. Agriculture is key to providing food and livelihoods for an important part of the NES population.^a Indeed, KIs in 83% of assessed communities indicated that food crop and cash crops production were among the most common sources of meeting basic needs for households. However, the most commonly cited barrier to accessing agricultural livelihoods was high operational costs (prices of inputs, shipment, fuel, etc.), cited by KIs in 82% of communities relying on agriculture. Furthermore, a series of heavy rains damaged crops in NES in March^b and April.^c As such, KIs in 29% of assessed communities relying on agriculture reported that the degradation of agricultural lands was an obstacle to accessing livelihoods in April.
- **Drinking water quality remained an issue in NES.** KIs in 42% of assessed communities indicated that households experienced problems with drinking water. Among communities facing problems, reports of bad water colour increased from 22% in March to 30% in April, probably caused by heavy rainfalls which increased turbidity in the Euphrates River, leading to service disruptions at Al-Karama and Al-Hawas water stations.^d In addition, KIs in 8% of assessed communities also indicated that water was perceived to make people sick. Water-borne diseases remained a concern in NES, with over 7,900 cases of Acute Watery Diarrhea recorded across the region in the last week of April.^e
- In Deir-ez-Zor governorate, KIs increasingly reported the threat from imminent conflict as a protection risk. In Deir-ez-Zor, the percentage of communities where KIs reported the threat from imminent conflict as a protection risk rose from 8% to 22% between March and April. Similarly, while no communities reported threats from shelling, snipers, or gunfire in March, KIs reported such threats in 28% of assessed communities in April. The security situation in Deir-ez-Zor was recently affected by increased violence targeting both local authorities and civilians in addition to heightened tribal clashes.

HSOS Dashboard

For a breakdown of sector-specific indicators by location, please see the <u>HSOS</u> <u>dashboard</u>. The interactive HSOS dashboard provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level.



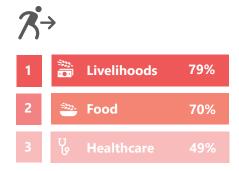


PRIORITY NEEDS AND HUMANITARIAN ASSISTANCE

Most commonly reported overall priority needs for host community households (by % of assessed communities) ²



Most commonly reported overall priority needs for IDP households (by % of assessed communities) ²



% of assessed communities where some of the host community households were able to access humanitarian assistance



% of assessed communities where KIs reported the presence of the following types of assistance for host community households³

| 2% | Livelihoods |
|-----|-------------|
| 16% | Food |
| 3% | WASH |

% of assessed communities where some of the IDP households were able to access humanitarian assistance



% of assessed communities where KIs reported the presence of the following types of assistance for IDP households³



Most commonly reported barriers that host community households faced in accessing humanitarian assistance (by % of assessed communities reporting barriers)³

Communities where access to humanitarian assistance was reported



Assistance provided was not 50%

relevant to all needs

Communities where no access to humanitarian assistance was reported



Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of assessed communities reporting barriers)³

Communities where access to humanitarian assistance was reported

| 64% | Assistance provided was insufficient to cover all people in need |
|-----|--|
| 61% | Assistance provided was not relevant to all needs |
| 53% | Quantity of assistance provided to households was |

insufficient

Communities where no access to humanitarian assistance was reported

| | | • |
|---|-----|--|
| 1 | 98% | No humanitarian assistance was available |
| 2 | 1% | Perceived discrimination in provision of humanitarian assistance |
| 3 | 1% | Not aware if assistance was available |





ECONOMIC CONDITIONS

| Region | Median estimated monthly expense for water for a household of six ^{4, 5} | Median estimated monthly rent price for a two-bedroom apartment 4,5 | Median estimated daily wage for unskilled labour ^{4, 6, 7} |
|-----------------|--|--|---|
| Aleppo | 15,000 SYP | 50,000 SYP | 12,000 SYP |
| Al-Hasakeh | 32,000 SYP | 100,000 SYP | 10,000 SYP |
| Ar-Raqqa | 2,000 SYP | 70,000 SYP | 15,000 SYP |
| Deir-ez-Zor | 50,000 SYP | 75,000 SYP | 10,000 SYP |
| Northeast Syria | 25,000 SYP | 75,000 SYP | 10,000 SYP |

Most common sources of meeting basic needs for households (by % of assessed communities) 3,7



Presence of host community and IDP households relying on non-productive sources of livelihoods to meet their basic needs (by % of assessed communities)3



Most commonly reported barriers to accessing livelihoods (by % of assessed communities) 3, 7



Most commonly reported barriers to accessing livelihoods related to agriculture (by % of assessed communities)3



% of assessed communities where livelihood sources from agriculture were reported ³

| Livelihood source | Host community households | IDP households |
|----------------------|---------------------------|----------------|
| Food crop production | 43% | 28% |
| Cash crop production | 69% | 19% |
| Livestock products | 53% | 25% |
| Sale of livestock | 44% | 19% |

Intersectoral findings on unaffordability hindering access to goods and services⁷



KIs in 22% of assessed communities cited rent was unaffordable for the majority of people



cost of **solar panels** as a common challenge



KIs in 83% of assessed communities cited the high cost of **food** as a common challenge



KIs in **64%** of assessed communities cited high cost of **fuel for generators** as a common challenge



Kls in 43% of assessed communities cited the high • cost of water trucking as a common challenge



KIs in 88% of assessed communities cited the high cost of **health services** as a common challenge







IDP households





BASIC NEEDS OVERVIEW

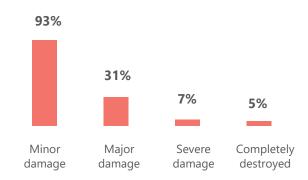
In 96% of assessed communities, at least 80% of the host community households reportedly owned their shelter

In **70**% of assessed communities, **none** of the IDP households reportedly **owned their shelter**

In 12% of assessed communities, at least one fifth of the IDP population reportedly lived in unfinished or abandoned residential buildings

In 4% of assessed communities, at least **one fifth** of the IDP population reportedly lived in **tents**

Reported presence of occupied shelters with damage (by % of assessed communities)^{4,8}



Shelter and repair materials being too expensive was the most commonly reported challenge for households to repair their shelter (reported by KIs in 93% of assessed communities)

Most commonly reported shelter inadequacies (by % of assessed communities)³

| Ţ↓ | | 7;→ |
|-----|---------------------------------|-----|
| 84% | Lack of lighting around shelter | 87% |
| 56% | Lack of privacy inside shelter | 64% |
| 52% | Lack of space/overcrowding | 60% |
| 46% | Shelter have minor damages | 43% |
| 40% | Unable to lock home securely | 41% |
| 16% | Lack of insulation from cold | 15% |



98%

% of assessed communities where KIs reported that **households experienced barriers to accessing sufficient food** ⁷



High price of suitable foods formula was the most commonly reported challenge to feeding young children (reported by KIs in 95% of assessed communities) ^{7,9}

Commonly reported barriers to accessing sufficient food (by % of communities)^{3,7}

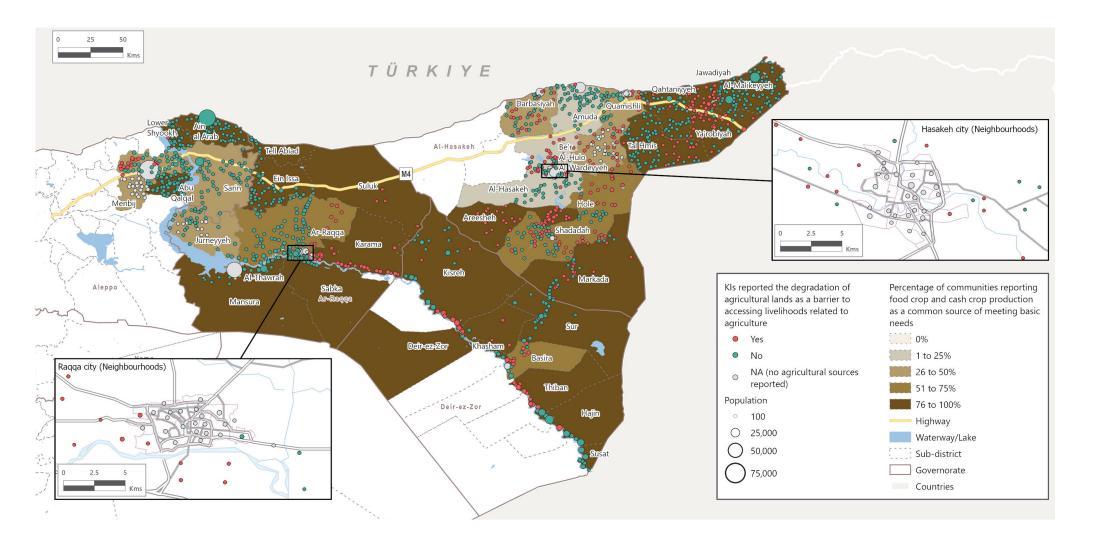
| 1 | Markets exist and food is available but households cannot afford essential food items | 83% |
|---|---|-----|
| 2 | Markets exist but not all essential food items are available | 22% |
| 2 | Markets are not functioning in the community | 22% |
| 3 | Markets exist but have insufficient quantities of food | 20% |

Commonly reported source of food for households other than markets (by % of assessed communities) $^{10,\,7}$

| 1 | Relying on food stored previously | 41% |
|---|------------------------------------|-----|
| 2 | Own production or farming | 39% |
| 3 | Food gifts from friends and family | 5% |







Degradation of agricultural lands

Note on the map

This map shows in red communities relying on agriculture in which KIs reported the degradation of agriculture lands as a barrier to access livelihoods. The sub-districts are represented according to the percentage of communities reporting food crop or cash crop production as the most common source of meeting the population's basic needs.





ACCESS TO BASIC SERVICES



Access to Electricity hrs/day

was the most commonly reported range of hours of electricity accessible to households (reported by KIs in 37% of assessed communities)

Main was the most commonly reported main source of electricity (reported by network KIs in 71% of assessed communities)

% of assessed communities where KIs reported Rationing electricity by local authorities as the most frequently reported barrier to electricity access



Access to Water

% of assessed communities where KIs reported that not all households had access to sufficient water



7 days 5-6 days **11%** 3-4 days **17%** 1-2 days 8%

0 days

Davs per week where water from the network was available (by % of 826 communities connected to a water 29% network)

borehole

Private was the most commonly reported source of water for all purposes (reported by KIs in Or Well 45% of assessed communities)



Access to Sanitation

% of assessed communities where KIs reported that no sewage system was present Most commonly reported ways people disposed of solid waste (by % of assessed communities)

36%

Free public waste collection

35%

Waste burnt

21%

Waste disposed of by household to a dumping location

% of assessed communities where KIs reported waste removal services as a WASH priority need 7



Access to Markets

% of assessed communities in which households reportedly were unable to access markets in the assessed location

People lack financial means to open shop/market

was the most commonly reported reason for why markets were not functioning (reported by KIs in 85% of assessed communities where markets were not functioning)

% of assessed communities where KIs reported lack of transportation to markets was a barrier to physically accessing food markets



Access to Health Services

% of assessed communities where KIs reported that households did not have access to health services in the assessed location

Most commonly reported health priority needs (by % of assessed communities)7, 10 60%

58%

50%

Medicines and other commodities Treatment for

consultations

functionality of

Reported

chronic diseases Paediatric

Cannot services

afford to was the most commonly reported barrier to accessing pay for healthcare (reported by KIs in health 88% of assessed communities)



Access to **Education** Services

% of assessed communities in which only half or less of the school aged-children accessed school in the last 30 days for host community and IDP households

Functioning

Not functioning

89%

education services in 11% the assessed location

% of assessed communities where KIs reported that families cannot afford to prioritize school and children must work 7



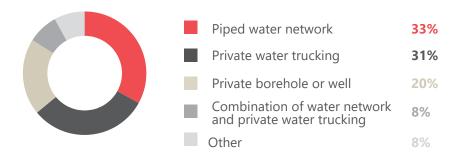


PUBLIC HEALTH

Most commonly reported sanitation issues (by % of assessed communities)³



Primary sources of drinking water (by % of assessed communities)



79%

% of assessed communities where KIs reported that households **did not use any methods** to make water safer to drink.

Methods used by households to make water safer to drink (by % of assessed communities in which KIs reported methods being used) ³

| 1 | Sedimentation | 68% |
|---|-------------------|-----|
| 2 | Household filters | 22% |
| 3 | Chlorine tablets | 21% |

42%

% of assessed communities where Kls reported that households **faced problems with drinking water.**

Problems with drinking water (by % of assessed communities in which KIs reported problems) 3,11

| 1 | Water tastes bad | 60% |
|---|-----------------------|-----|
| 2 | Water has bad colour | 30% |
| 3 | Water perceived to be | 8% |

Reported challenges related to quantity, quality and diversity of food for babies and young children (less than 2 years old)^{3, 9}

Limited variety of food reported in **57%** of assessed communities

Not enough food reported in 22% of assessed communities

Poor quality of food reported in 12% of assessed communities

18%

% of assessed communities where Kls reported that **no paediatric services** were available either in the assessed community or nearby locations

Reported barriers to accessing healthcare (by % of assessed communities)3,12

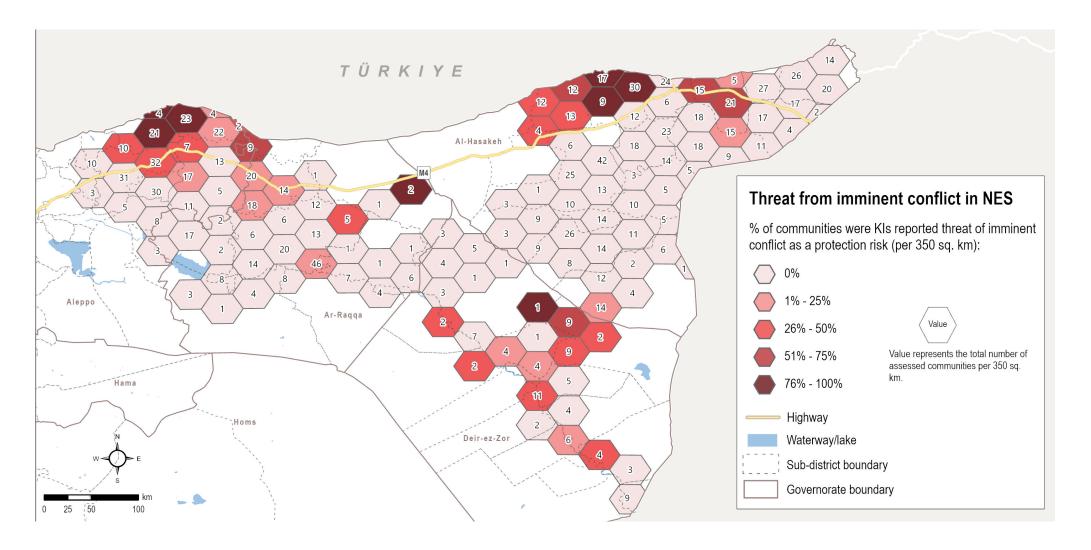


Essential health services available either in the assessed community or in nearby locations (by % of assessed communities)^{3, 13}

| | No Yes |
|---|---------|
| General and or specialist surgical services | 37% 63% |
| Treatment for parasitic infections | 27% 73% |
| Skilled care during childbirth (General obstetric care - normal deliveries) | 20% 80% |
| Vaccination | 18% 82% |
| First aid/emergency care (accident and injuries) | 9% 91% |







Perceived threat from imminent conflict

Note on the map

This map shows the percentage of communities in which Kls reported the threat of imminent conflict to be a protection risk for households. The figure displayed in the centre of each hexagon corresponds to the number of communities assessed in an area of 1,600sq.km. The map shows that concerns over imminent conflict occurred mainly in areas located along the northern border, as well as in Deir-ez-Zor governorate.





SECURITY AND PROTECTION

Intersectoral findings on security

General safety and security concerns restricting movement to markets was a reported barrier to market access in 21 assessed communities



General safety and security concerns at markets was a reported barrier to market access in 3 assessed communities

Movement restrictions was reported as a protection risk in 3 assessed communities ⁷



Theft was reported as a protection risk in 25% of assessed communities ⁷

Tribal disputes were reported as a protection risk in 42 assessed communities ⁷

Fear from imminent conflict was reported as a protection risk in 14% of assessed communities ⁷

Threat from shelling was reported as a protection risk in 1% of assessed communities ⁷



The security situation was reported as a barrier to shelter repairs in 106 assessed communities ⁷



Safety and security concerns travelling to health facilities was reported as a barrier to healthcare in 2 assessed communities



Lack of safety while travelling to or from school was reported as a barrier preventing access to education in 168 assessed communities ⁷

Most commonly reported protection priority needs (by % of assessed communities) 7, 10

| 1 | Special assistance for vulnerable groups | 76 % |
|---|--|-------------|
|---|--|-------------|

| 2 | Specialised | child | protection | services | 53% |
|---|-------------|-------|------------|----------|------|
| | | | | | 3370 |

| Psychosocial support 279 | 3 | Psychosocial support | 27% |
|--------------------------|---|----------------------|-----|
|--------------------------|---|----------------------|-----|



200/

% of assessed communities where the lack of civil documentation for host community and IDP households was reported

| 26% | protection risk |
|----------|--|
| 3% 2% | Some people did not have the necessary personal document as a barrier to accessing humanitarian assistance |
| 3% 6% | Lack of personal documentation required to enrol in school as a barrier to education access |

Lack or loss of civil documentation as a

83%

% of assessed communities where **child labour** was reported as a protection risk for **host community** and **IDP** households

Gender and diversity

Kls in **30%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to accessing livelihoods ⁷

Kls in 20% of assessed communities reported a lack of employment opportunities for persons with a disability as a barrier to accessing livelihoods ⁷

KIs in 13% of assessed communities reported a lack of privacy for women and girls at health facilities as a barrier to healthcare access

KIs in 20% of assessed communities reported a lack of market access for people with restricted mobility

KIs in 3% of assessed communities reported that women and girls feel unsafe when traveling to markets

Kls in 17% of assessed communities reported challenges specific to girls as a barrier preventing access to education 7, 14





ENDNOTES

- ¹ Aleppo governorate includes Menbij and Ain Al Arab districts
- ² KIs were asked to select a first, second, and third highest priority needs in their communities. The ranking shows the sectors most frequently chosen as either first, second or third highest priority. The overall priority need refers to the frequency a sector was selected across all three categories (first, second or third highest priority).
- ³ KIs could select multiple answers, thus findings might exceed 100%.
- ⁴ KIs were asked about the situation at the time of data collection, instead of the last 30 days.
- ⁵ KIs had the option to select the price in United Stated Dollars (USD), Turkish Lira (TRY), or Syrian Pounds (SYP). When the price was not reported in SYP, the NES Joint Market Monitoring Initiative (JMMI) exchange rate was used to calculate the amount in SYP. According to the REACH Market Monitoring April 2023, 1 USD = 7,700 SYP; 1TRY= 396 SYP.
- ⁶ According to the NES <u>JMMI</u> April 2023, 1 USD = 7,700 SYP.
- ⁷ Findings for residents and IDPs were merged. The merge was calculated as follows: (option was selected for either residents or IDPs) / (communities reporting challenges/barriers/coping strategies for either residents or IDPs).
- ⁸ Minor damage (cracks in walls, leaking roof, need of new doors and window repairs, etc.); Major damage (buildings with extensive damage to window frames and doors, but no structural damage to columns, slabs, or loadbearing walls); Severe damage (buildings with significant structural damage to column slabs, or loadbearing walls, cracking, steel elements and deformations visible in concrete; the building would require extensive repairs); Completely destroyed (buildings with structural damage so significant that rehabilitation is not possible).
- ⁹ KIs were asked about the situation in the last two months, instead of the last 30 days.
- ¹⁰ KIs could select three answers, thus findings might exceed 100%.
- ¹¹ This section provides a visualisation of three types of problems with drinking water. These problems were not selected based on how commonly they were reported, but rather on their potential negative impact on health.
- ¹² This section only focuses on barriers related to the heath facilities and exludes financial barriers as well as obstacles linked to transportation to health facilities.
- ¹³ This section provides a visualisation of the availability of five essential types of health services reported in the assessed communities or in nearby locations. The displayed services were not selected based on how commonly they were reported.
- ¹⁴ Challenges specific to girls include the following: Families not allowing attendance or continuation of education, fear of harassment on the way to or inside education facilities, and the lack of privacy in toilets.

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| N,o of communities reporting on: | Subset | N,o of communities reporting on: | Subset |
|--|--------|---|--------|
| Host community households | 1,317 | Barriers to assistance access (IDP) | 325 |
| IDP households | 556 | Days when water is available from network | 826 |
| Challenges to assistance access (host community) | 307 | Barriers to markets functioning | 452 |
| Barriers to assistance access (host community) | 989 | Methods to make water safer (merged) | 277 |
| Challenges to assistance access (IDP) | 212 | Problems with drinking water (merged) | 550 |

ABOUT REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).



