

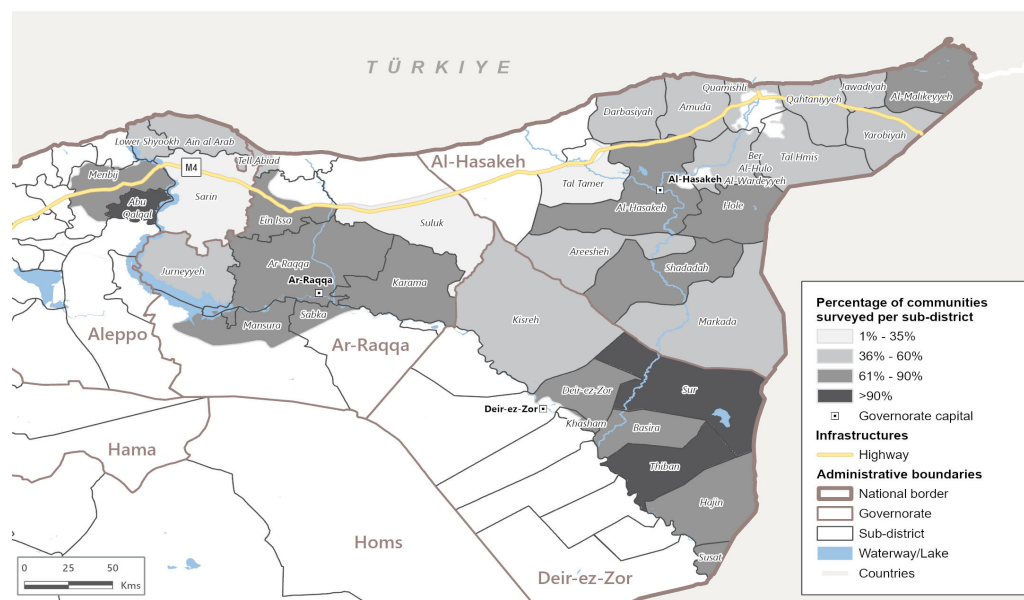
December 2023 | Northeast Syria

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 **1,351 communities** across Aleppo¹, Ar-Raqqa, Al-Hasakeh, and Deir-ez-Zor. Data was collected **between 3-19 December 2023** from **4,910 KIs** (20% female).



KEY MESSAGES

- As the cold season commences, **KIs in 97% of the assessed communities reported winter items as a top priority need.** However, in 98% of assessed communities, KIs also reported them as unaffordable. In particular, winter clothes were the top priority winter need among winter items (in 78% of the assessed communities).
- KIs in a vast majority of the assessed communities (96%) reported that **households had access to less than 12 hours of electricity per day.** Among the main barriers to access power, KIs reported the rationing of electricity in 85% of communities, the high cost of solar panels (in 78%), and the unaffordability of fuel for generators (64%).
- **KIs in 68% of the assessed communities disclosed that some households had insufficient access to water.** In 28% of these communities experiencing an insufficient access to water, KIs reported that the main network was either partially and/or completely not functioning.
- Moreover, **in 97% of assessed communities, KIs expressed that households faced barriers to accessing sufficient food.** This challenge persists despite the existence of markets and the availability of food. The inability to afford essential food items was one of the most common factors hindering households' access to food, as reported in 82% of the assessed communities.
- With regards to sanitation, **in 78% of the assessed communities, KIs reported households not being connected to the sewage system.** In particular, KIs for 83% of assessed communities claimed that unsafe soak pits were the most common sanitation issue, which may lead to severe health and safety problems.

HSOS Dashboards

The interactive [HSOS Sectoral Dashboard](#) provides a monthly thematic overview of key indicators disaggregated at different administrative levels. The [Humanitarian Trends Dashboard](#) uses HSOS data to visualise how the humanitarian situation in northern Syria has been changing over time. The [HSOS water and electricity dashboard](#) shows trends of access to water, access to electricity and problems with drinking water indicators in NES.

PRIORITY NEEDS AND HUMANITARIAN ASSISTANCE



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

1	 Livelihoods	73%
2	 Food	52%
3	 Healthcare	49%

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



Yes: **28%**
No: **72%**

% of assessed communities where KIs reported the presence of the following **types of assistance for host community households** ³

1%	 Livelihoods
13%	 Food
13%	 Healthcare

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 insufficient to cover all people in need	65%	1	95%
Assistance provided was not relevant to all needs	50%	2	4%
Quantity of assistance provided to households was insufficient	48%	3	1%

Communities where no access to humanitarian assistance was reported

No humanitarian assistance was available	95%
Not aware if assistance was available	4%
Perceived discrimination in provision of humanitarian assistance	1%



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




1	 Livelihoods	69%
2	 Food	64%
3	 Winterisation	39%

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



Yes: **41%**
No: **59%**

% of assessed communities where KIs reported the presence of the following **types of assistance for IDP households** ³

2%	 Livelihoods
23%	 Food
<1%	 Winterisation

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

Assistance provided was insufficient to cover all people in need	68%	1
Assistance provided was not relevant to all needs	56%	2
Quantity of assistance provided to households was insufficient	45%	3

Communities where no access to humanitarian assistance was reported

No humanitarian assistance was available	99%
Not aware if assistance was available	1%





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	35,000 SYP	100,000 SYP	25,000 SYP
Al-Hasakeh	80,000 SYP	200,000 SYP	15,000 SYP
Ar-Raqqa	4,000 SYP	150,000 SYP	25,000 SYP
Deir-ez-Zor	100,000 SYP	175,000 SYP	25,000 SYP
Northeast Syria	50,000 SYP	150,000 SYP	20,000 SYP

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

Cash crop production		77%
Waged labour (daily labour)		77%
Waged labour (regular work)		67%

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

Humanitarian assistance		<1%
Loans and remittances		30%
		34%

Intersectoral findings on **unaffordability** hindering access to goods and services ⁷



KIs in **21%** of assessed communities cited **rent** was unaffordable for the majority of people



KIs in **78%** of assessed communities cited the high cost of **solar panels** as a common challenge



KIs in **82%** 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






KIs in **46%** of assessed communities cited the high cost of **water trucking** as a common challenge




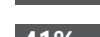


KIs in **88%** of assessed communities cited the high cost of **health services** as a common challenge

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

Income does not cover cost of living		92%
Lack of employment opportunities that match people's skills		62%
No available ways to access financial resources (no grants, no loans)		58%

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

		83%	
	High operational costs		39%
	Lack of resources for agriculture		39%
	Seasonality of production		41%

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

Livelihood source	Host community households	IDP households
Food crop production	44%	34%
Cash crop production	77%	20%
Livestock products	49%	27%
Sale of livestock	46%	18%



Host community households



IDP households

BASIC NEEDS OVERVIEW

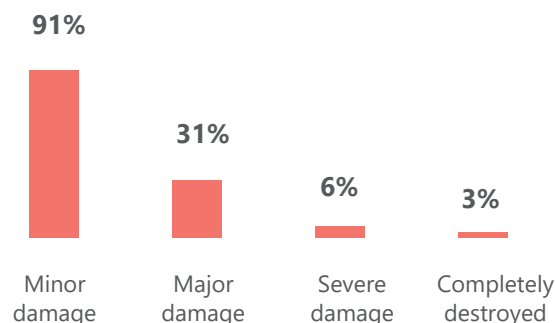
In **96%** of assessed communities, at least **80%** of the host community households reportedly **owned their shelter**

In **69%** of assessed communities, **none** of the IDP households reportedly **owned their shelter**

In **10%** of assessed communities, at least **one fifth** of the IDP population reportedly lived in **unfinished or abandoned residential buildings**

In **3%** 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 91% of assessed communities)

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



79%	Lack of lighting around shelter	82%
61%	Shelter have minor damages	60%
57%	Lack of privacy inside shelter	65%
55%	Lack of space/overcrowding	63%
38%	Unable to lock home securely	36%
29%	Lack of heating	36%



97%

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

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	82%
2	Markets exist but have insufficient quantities of food	21%
3	Markets exist but not all essential food items are available	20%
4	Markets are not functioning in the community	19%



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

1	Own production or farming	45%
2	Relying on food stored previously	40%
3	Food gifts from friends and family	2%

ACCESS TO BASIC SERVICES



Access to Electricity

2-4
hrs/day

was the most commonly reported range of hours of electricity accessible to households (reported by KIs in 36% of assessed communities)

Main network

was the most commonly reported main source of electricity (reported by KIs in 68% of assessed communities)

85%

% of assessed communities where KIs reported **rationing electricity by local authorities** as the most common barrier to electricity access



Access to Water

68%

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



Days per week where water from the network was available (by % of 859 communities connected to a water network)

Private borehole or well

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



Access to Sanitation

78%

% 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)

38%

Free public waste collection

32%

Waste burnt

18%

Waste disposed of by household to a dumping location

17%

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



Access to Markets

31%

% 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 82% of assessed communities where markets were not functioning)

79%

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



Access to Health Services

68%

% 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}

56%

Treatment for chronic diseases

53%

Medicines and other commodities

52%

Paediatric consultations

Cannot afford to pay for health services

was the most commonly reported **barrier to accessing healthcare** (reported by KIs in 88% of assessed communities)



Access to Education Services

27%
48%

% 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

Reported functionality of education services in the assessed location

89%

Functioning

11%

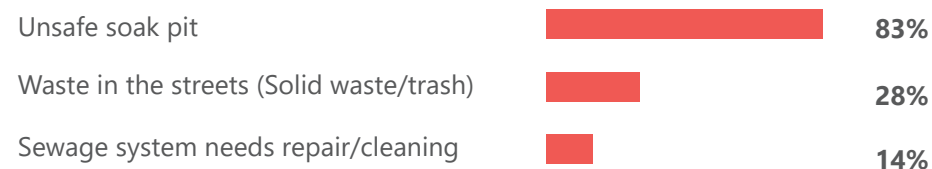
Not functioning

74%

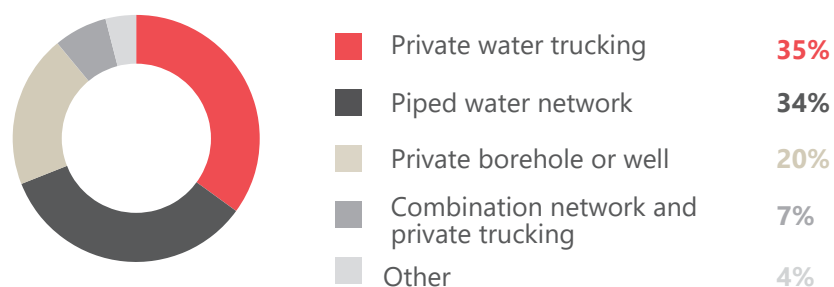
% of assessed communities where KIs reported that **families cannot afford to prioritize school and children must work** ⁷

PUBLIC HEALTH

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



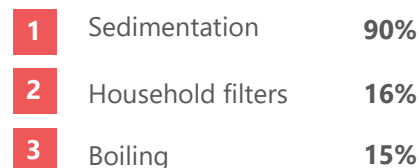
Primary sources of drinking water (by % of assessed communities)



78%

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

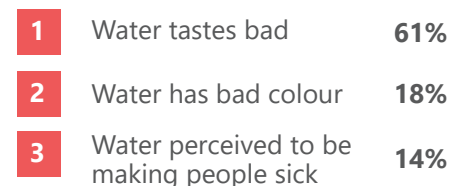
Methods used by households to make water safer to drink (by % of assessed communities in which KIs reported methods being used)³



40%

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

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



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 **49%** of assessed communities

Not enough food reported in **22%** of assessed communities

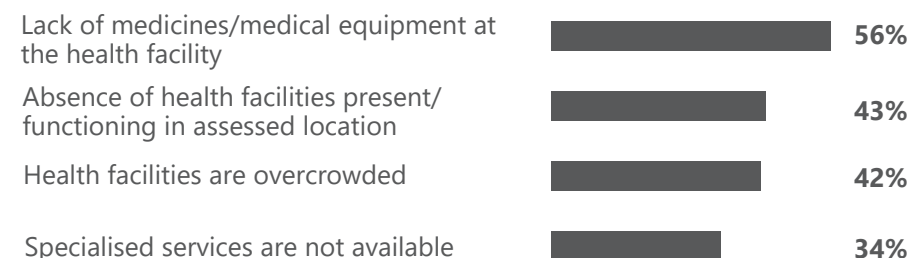
Poor quality of food reported in **12%** of assessed communities

18%

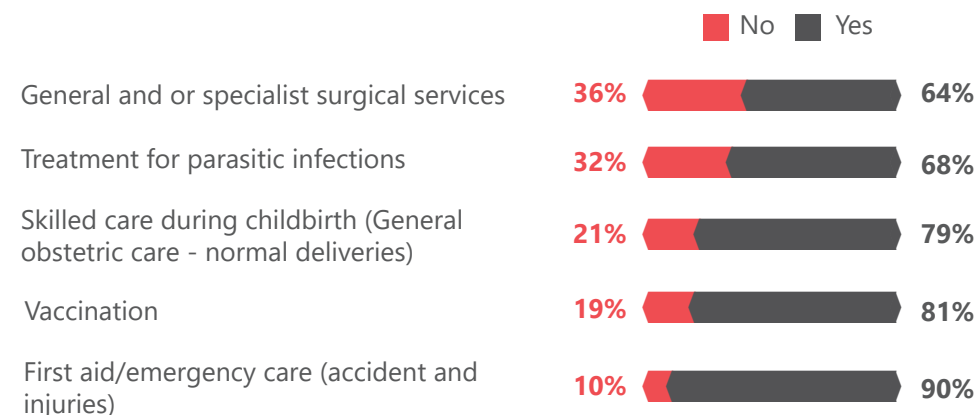


% of assessed communities where KIs reported that **no paediatric services** were available either in the assessed community or nearby locations

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 communities where households could access health services)¹³



SECURITY AND PROTECTION

Intersectoral findings on security



General safety and security concerns restricting movement to markets was a reported barrier to market access in 14 assessed communities

General safety and security concerns at markets was a reported barrier to market access in 7 assessed communities



Theft was reported as a protection risk in 30% of assessed communities ⁷

Tribal disputes were reported as a protection risk in 55 assessed communities ⁷

Fear from imminent conflict was reported as a protection risk in 15% of assessed communities ⁷

Threat from airstrikes was reported as a protection risk in 57 assessed communities ⁷

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



The security situation was reported as a barrier to shelter repairs in 53 assessed communities ⁷



Safety and security concerns travelling to health facilities was reported as a barrier to healthcare in 13 assessed communities



Lack of safety while travelling to or from school was reported as a barrier preventing access to education in 194 assessed communities ⁷

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

- 1** Special assistance for vulnerable groups **82%**
- 2** Specialised child protection services **56%**
- 3** Psychosocial support **31%**



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

- 23%** Lack or loss of civil documentation as a protection risk
- 31%**
- 1%** Lack of personal documentation required to enroll in schools
- 1%**

86%
79%

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

Gender and diversity

KIs in **31%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to accessing livelihoods ⁷

KIs in **9%** 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 **22%** 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**

KIs 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 States 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 October 2023, 1 USD = 13,600 SYP; 1TRY= 490 SYP.

⁶ According to the NES [JMMI](#) October 2023, 1 USD = 13,600 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 health facilities and excludes 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.

N,o of communities reporting on:	Subset	N,o of communities reporting on:	Subset
Host community households	1,345	Barriers to assistance access (IDP)	365
IDP households	622	Days when water is available from network	859
Challenges to assistance access (host community)	348	Barriers to markets functioning	425
Barriers to assistance access (host community)	971	Methods to make water safer (merged)	294
Challenges to assistance access (IDP)	241	Problems with drinking water (merged)	534

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).