

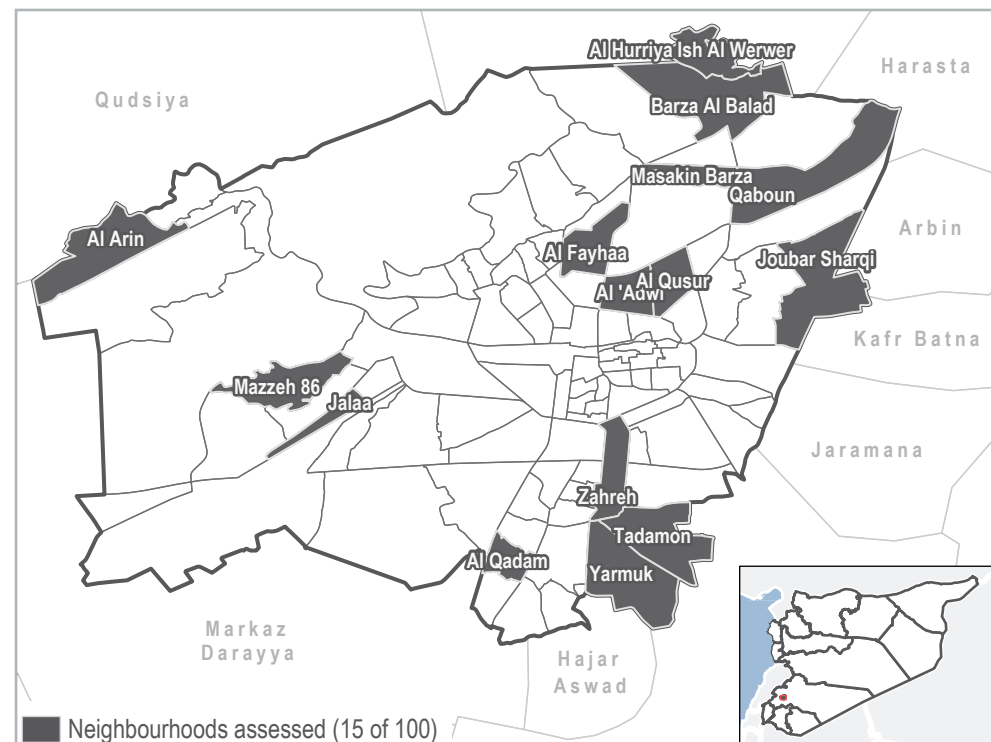
### OVERALL FINDINGS<sup>1</sup>

Syria's capital, Damascus city, is located in the southwest of the country, close to the border with Lebanon. The situation in the governorate is relatively stable compared to other assessed governorates across Syria. In January 2018, **none** of the 15 assessed neighbourhoods in Damascus reported departures of members of their pre-conflict population. Formerly contested Qaboun, and currently contested Yarmuk, Tadamon and Joubar Sharqi all reported that only **1-25%** of their original population remained present in January. **None** of the assessed neighbourhoods witnessed spontaneous returns in January<sup>2</sup>. IDPs were present in **all but four** of the assessed neighbourhoods. Of these neighbourhoods, **40%** reported hosting over 1,000 IDPs, while **two** neighbourhoods, Masakin Barza and Mazzeh 86, reported the presence of **35,000 – 40,000** and **10,000 – 10,100 IDPs**, respectively. KIs in both neighbourhoods cited improved access to employment, income and shelter as one of the main reasons why IDPs chose to remain.

Pre-conflict, returnee and IDP populations reportedly lived in independent apartments or houses across assessed neighbourhoods with the exception of Joubar Sharqi. While pre-conflict and returnee populations most commonly owned the property that they lived in, the majority of IDPs in assessed neighbourhoods were reportedly renting property or being hosted without rent. Average rent prices in **all but two** of these neighbourhoods were above the Syrian average of 7,482 SYP and were over 30,000 SYP in **4**. **All but three** of the assessed neighbourhoods reported that the main networks were their primary source of water and electricity: Tadamon, Yarmuk and Joubar Sharqi. Tadamon also reported that no health facilities were available in the neighbourhood, while in Joubar Sharqi, Zahreh and Yarmuk health facilities were available, but security concerns to enter and remain in facilities posed a barrier to accessing healthcare. Tadamon, Joubar Sharqi and Qaboun reported not having functioning educational facilities at any level, but children in Qaboun and Tadamon were able to attend schools in neighbouring areas, while no women and children reportedly lived in Joubar Sharqi<sup>3</sup>. Please see the individual Community Profiles for [Tadamon](#), [Yarmuk](#) and [Qaboun](#) for more information on those neighbourhoods.

All neighbourhoods, with the exception of Joubar Sharqi, reported that food was available for purchase in January, yet **six** reported challenges in accessing sufficient amounts of food. In these neighbourhoods, the most commonly reported barrier was the high cost of some food items. Some residents in **five** out of these six neighbourhoods reportedly relied on unstable employment as their main source of income, and **two**, Tadamon and Yarmuk, reported that high risk, illegal work was a common source of income. **All** assessed neighbourhoods reported that household incomes were insufficient to cover needs, and **87%** of assessed neighbourhoods reported that residents were coping with the lack of sufficient income by skipping meals.

### Coverage



#### Top 3 reported priority needs

1. Protection
2. Healthcare
3. Food security

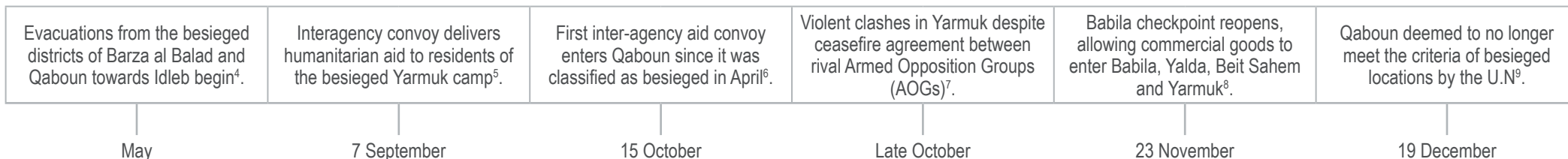
#### Demographics\*

**1,925,387** people in need

**1,028,157** **897,230**

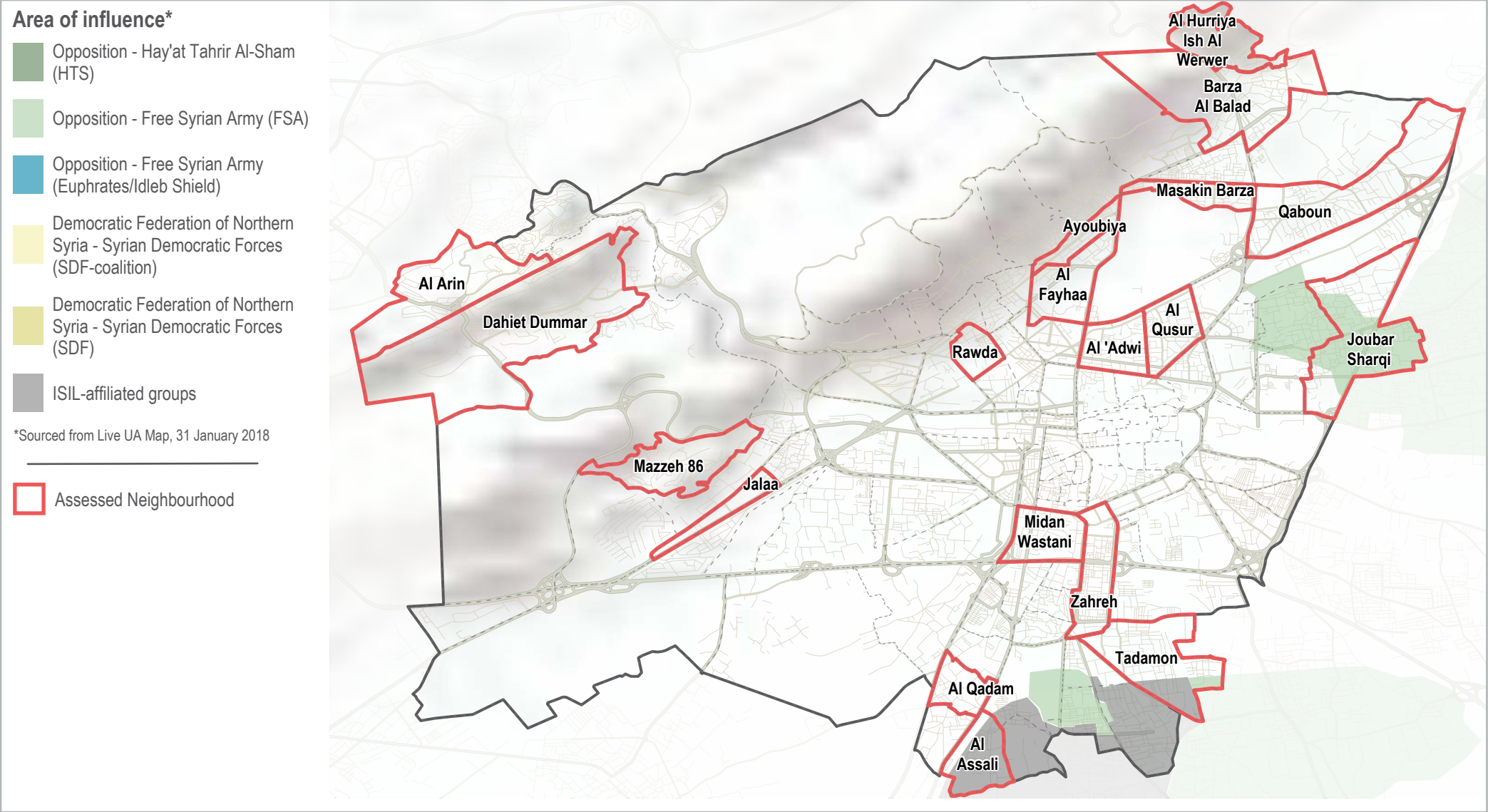
\* Figures based on HNO 2018 population data for the entire governorate.

### KEY EVENTS



# Damascus Governorate, January 2018

## Governorate areas of influence:



# Damascus Governorate, January 2018

## DISPLACEMENT

- 0 Estimated number of IDP arrivals in assessed neighbourhoods in January.
- 0 Estimated number of spontaneous returns in assessed neighbourhoods in January<sup>2</sup>.

### Neighbourhoods with the largest estimated number of IDP arrivals:

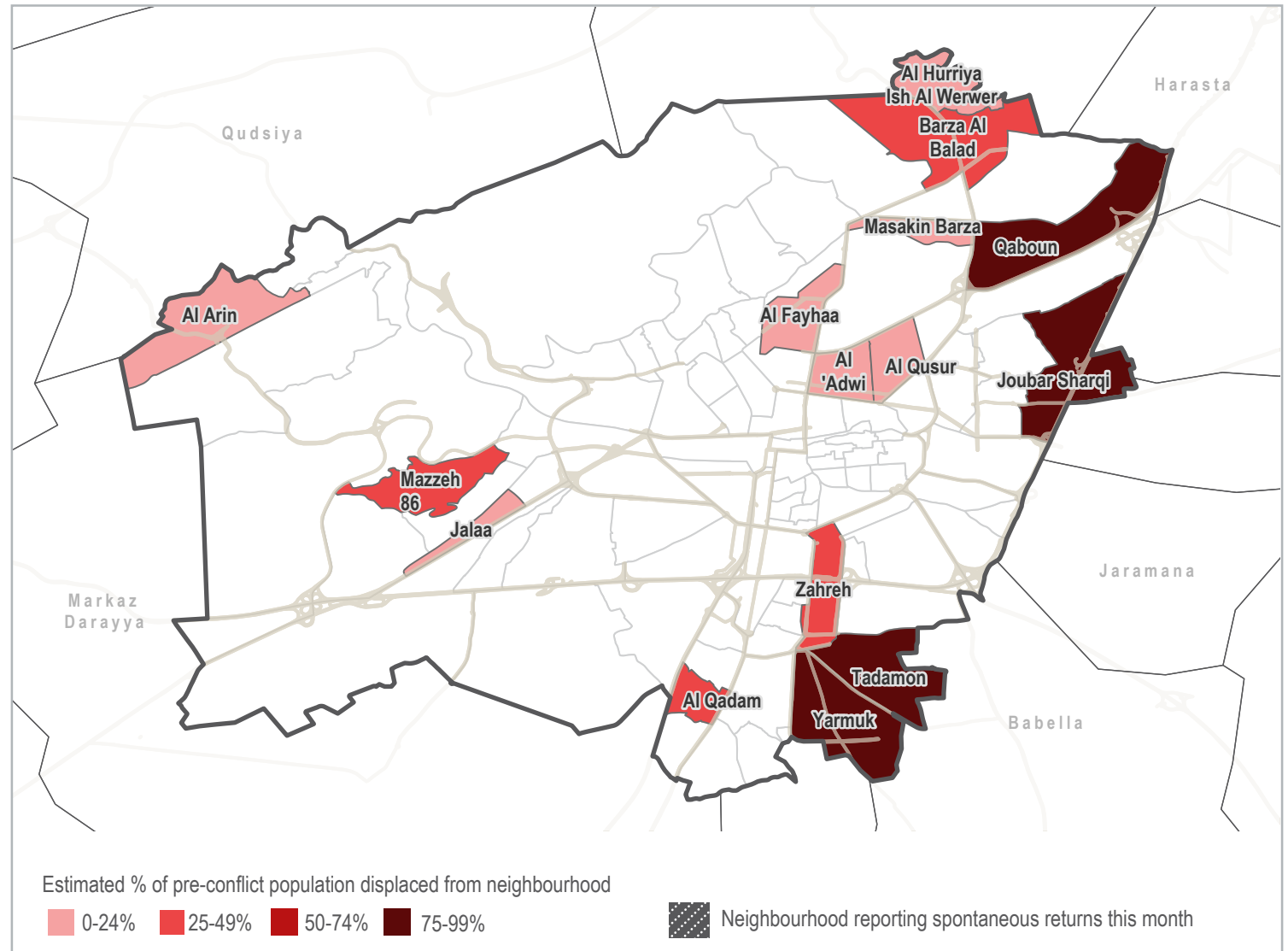
No reported IDP arrivals

### Top 3 subdistricts of origin of most IDPs arrivals<sup>3,4</sup>:

No reported IDP arrivals

15 neighbourhoods reported no PCP departures<sup>3,4</sup>.

Estimated percent of pre-conflict population (PCP) displaced from neighbourhood:



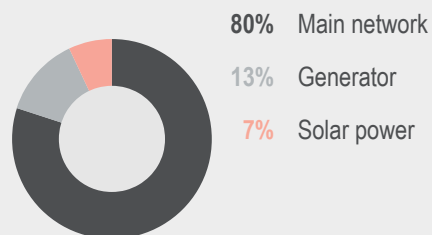
<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

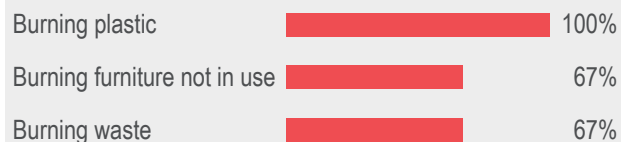
# Damascus Governorate, January 2018

## SHELTER AND NFI

Primary source of electricity reported:<sup>4</sup>



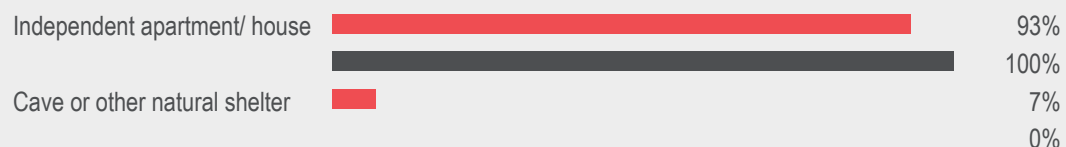
12 neighbourhoods reported no lack of fuel. Most common strategies to cope with insufficient fuel in the remaining 3 assessed neighbourhoods<sup>3,4</sup>:



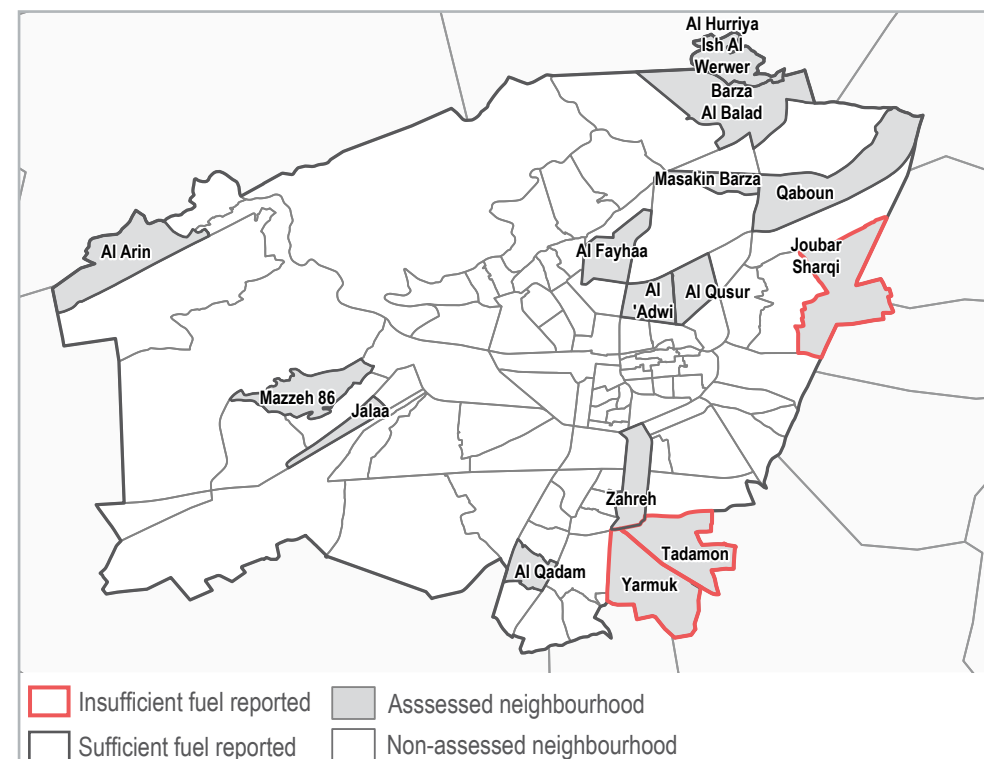
**19,292 SYP** Governorate average reported rent price in Syrian Pounds (SYP) across assessed neighbourhoods.<sup>5</sup>

**7,482 SYP** Syrian average reported rent price in SYP across assessed neighbourhoods.<sup>5</sup>

Most commonly reported shelter type for PCP (in red) and IDP (in grey) households<sup>4</sup>:



Fuel sufficiency:



Reported fuel prices (in SYP)<sup>5</sup>:

Fuel type:	Governorate average price in January:	Governorate average price in December:	Syrian average price in January:
Coal (1 kilogram)	396	393	325
Diesel (1 litre)	290	317	414
Butane (1 canister)	2,941	2,942	6,060
Firewood (1 tonne)	58,077	60,000	76,514

<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 February 2018)

# Damascus Governorate, January 2018

## HEALTH

- 1 Neighbourhood reported that no medical items were available in the neighbourhood.
- 1 Neighbourhood reported that the majority of women did not have access to formal health facilities to give birth.

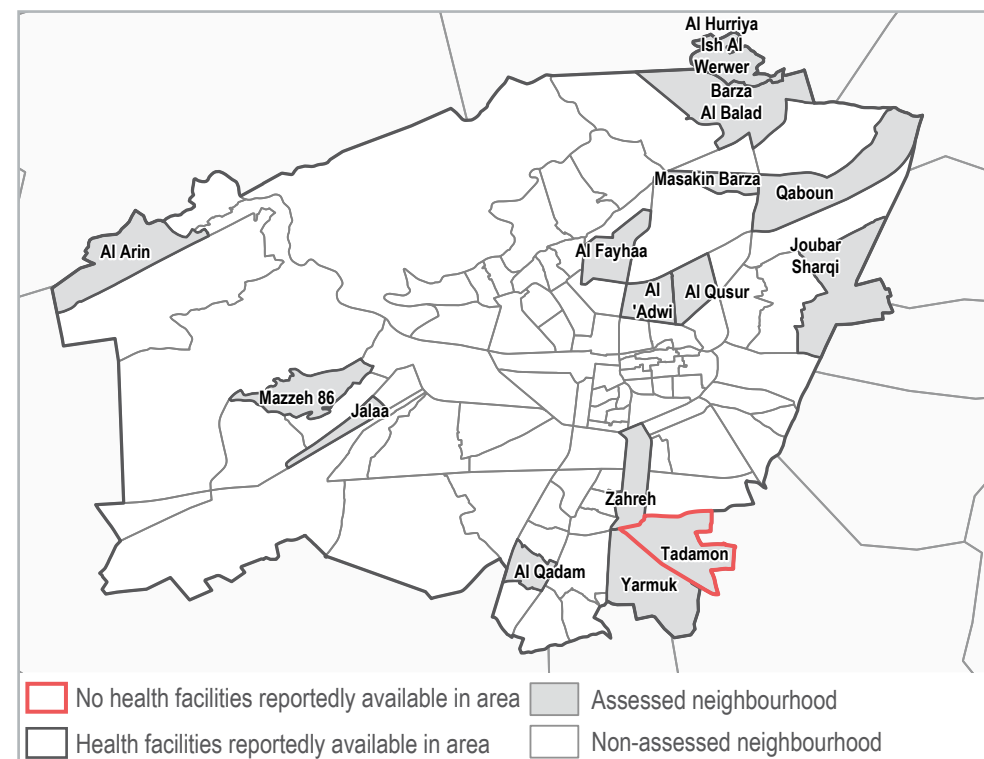
**10** neighbourhoods reported that residents experienced no barriers to accessing healthcare services. The barriers in the remaining **5** neighbourhoods were<sup>3,4</sup>:



**14** neighbourhoods reported that residents were not using coping strategies to deal with a lack of medical supplies. The coping strategies used in the remaining **1** neighbourhood were<sup>3,4</sup>:



### Presence of health facilities in assessed communities:



### Top 3 most needed healthcare services reported<sup>3,4</sup>:

Psychosocial support	67%
Medicine	27%
Surgical care	20%

### Top 3 most common health problems reported<sup>3,4</sup>:

Acute respiratory infections	73%
Severe diseases affecting those younger than 5	67%
Fever	40%

<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

# Damascus Governorate, January 2018



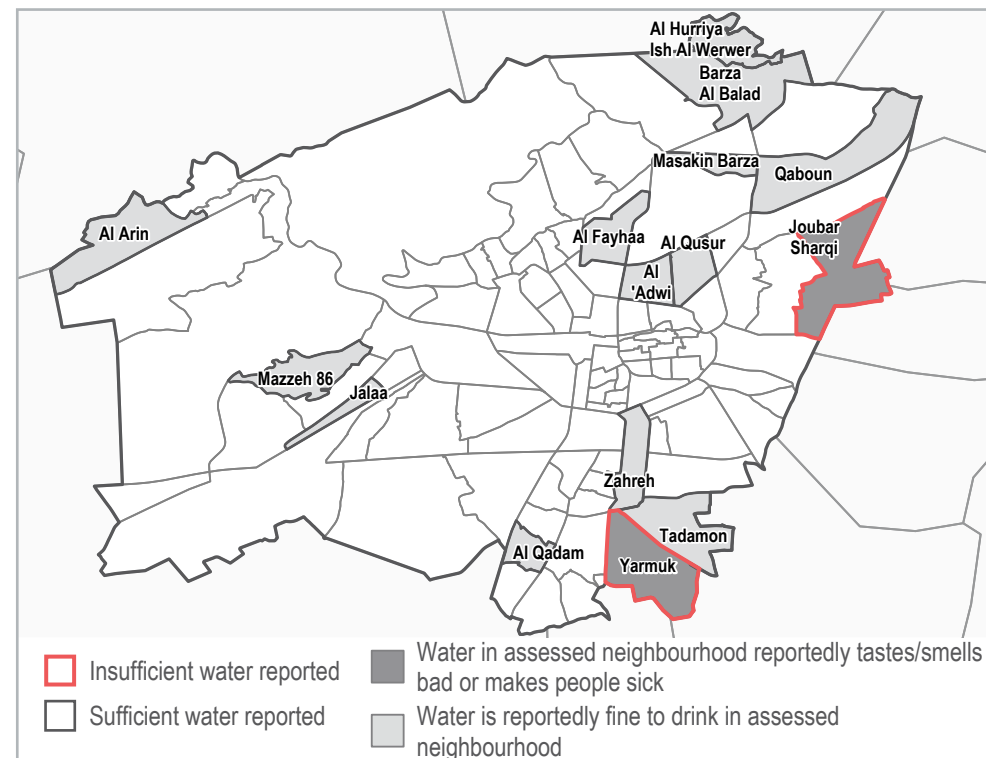
- 0 Neighbourhoods reported that water from their primary source tasted and/or smelled bad.
- 0 Neighbourhoods reported that drinking water from their primary source made people sick.

15 neighbourhoods reported that residents had no problems with latrines<sup>3,4</sup>.

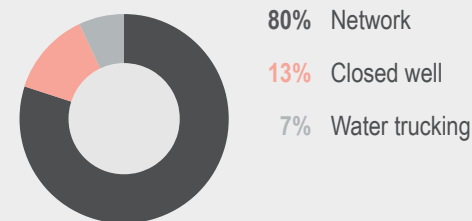
13 neighbourhoods reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining 2 assessed neighbourhoods were<sup>3,4</sup>:

Modify hygiene practices	<div style="width: 50%; height: 10px; background-color: red;"></div>	50%
Spend money usually spent on other things to buy water	<div style="width: 50%; height: 10px; background-color: red;"></div>	50%

## Water sufficiency for household needs:



## Primary drinking water source reported<sup>4</sup>:



## Top 3 reported methods of garbage disposal<sup>3,4</sup>:

Disposed at designated site	60%
Public free collection	20%
Buried or burned	20%

<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

# Damascus Governorate, January 2018

## FOOD SECURITY

- 6** Neighbourhoods reported not having received a food distribution in the last 12 months.
- 1** Neighbourhood reported that residents were unable to purchase food at shops and markets.

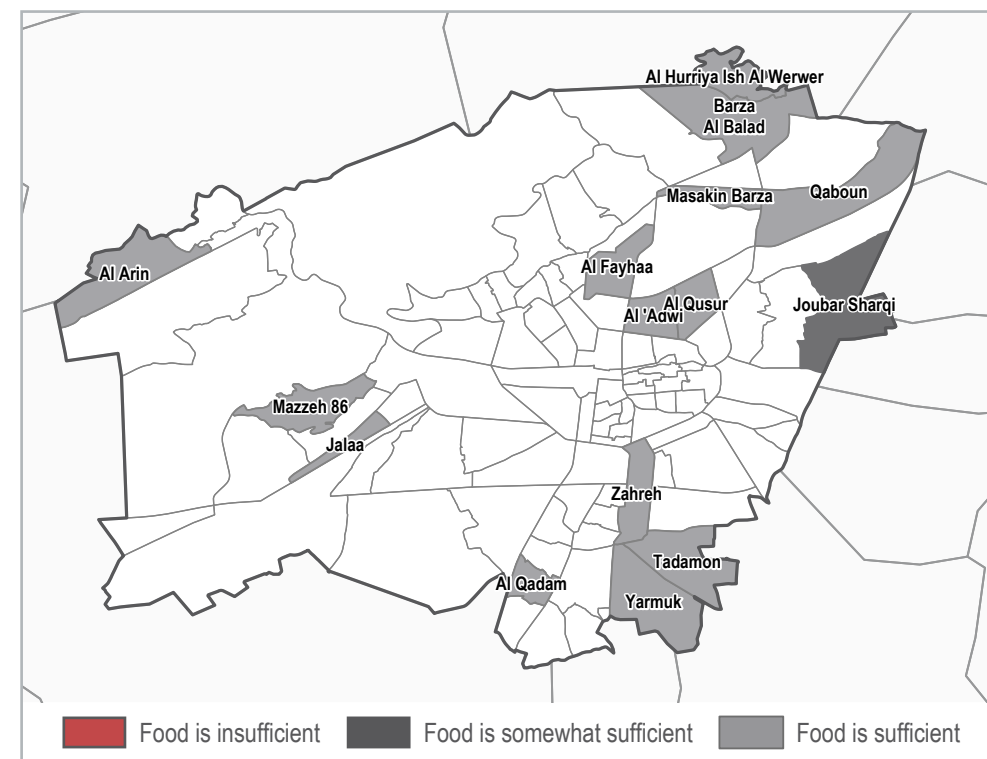
**9** neighbourhoods reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining **6** assessed neighbourhoods were<sup>3,4</sup>:



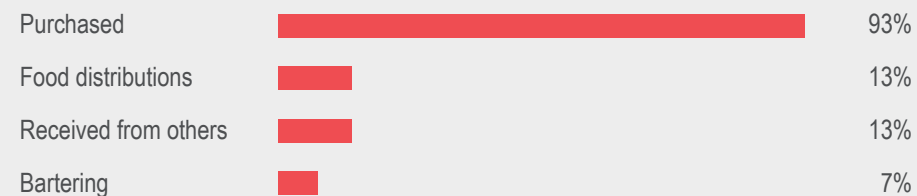
### Core food item prices reported (in SYP)<sup>5</sup>:

Food item:	Governorate average price in January:	Governorate average price in December:	Syrian average price in January:
Bread public bakery (1 loaf)	50	50	115
Rice (1 kilogram)	450	457	535
Lentils (1 kilogram)	446	499	416
Sugar (1 kilogram)	331	318	386
Cooking oil (1 litre)	633	658	669

### Food sufficiency:



### Most common ways of obtaining food reported<sup>3,4</sup>:



<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 February 2018)

# Damascus Governorate, January 2018

## LIVELIHOODS

**50,000 to 100,000 SYP** Most commonly reported household income range<sup>5</sup>.

**25,112 SYP** Governorate average food basket price<sup>5,6</sup>.

**0** Neighbourhoods reported that residents used extreme food-based coping strategies to deal with insufficient income<sup>7</sup>.

**0** neighbourhoods reported that residents had enough income to cover household needs. The most commonly reported coping strategies to deal with a lack of income in the remaining **15** assessed neighbourhoods were<sup>3,4</sup>:



**Most commonly reported main sources of income<sup>3,4</sup>:**



<sup>3</sup> Multiple choices allowed.

<sup>4</sup> By percent of neighbourhoods reporting.

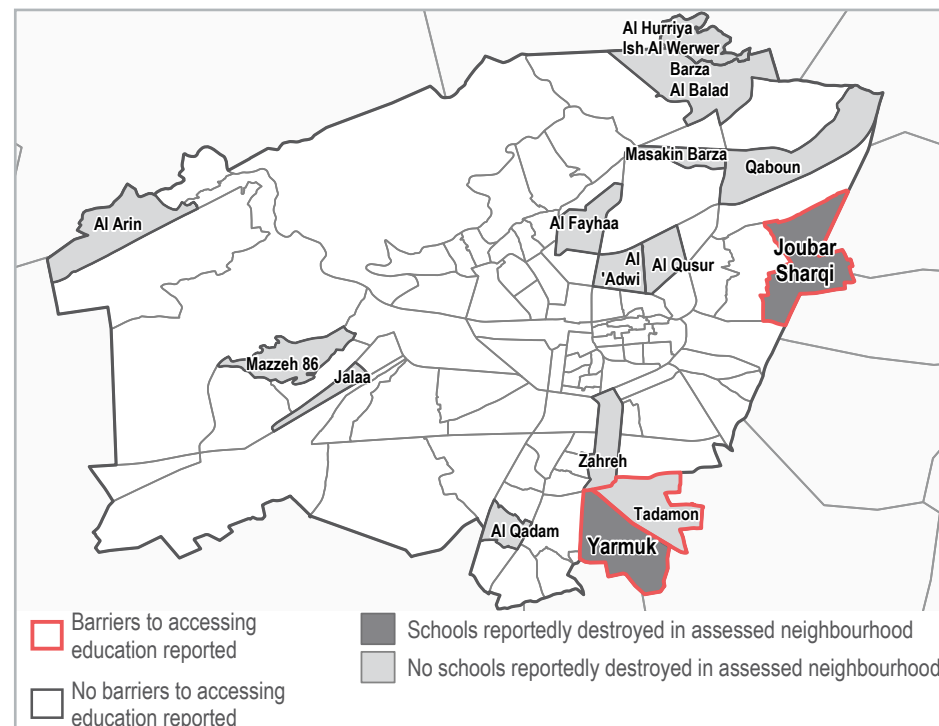
<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 February 2018)

<sup>6</sup> Calculation of the average price of a food basket is based on the World Food Programme's standard basket of dry goods. The food basket includes 37 kg of bread, 19 kg of rice, 19 kg of lentils, 5 kg of sugar, and 7 kg of vegetable oil, and provides 1,930 kcal a day for a family of five for a month.

<sup>7</sup> Extreme food-based strategies: Eating food waste; eating non-edible plants and spending days without eating.

## EDUCATION

Barriers to accessing education services:



**12** neighbourhoods reported that most children were able to access education. The most commonly reported barriers to education in the remaining **3** assessed neighbourhoods were<sup>3,4</sup>:



## METHODOLOGY

The HSOS project, formerly known as the AoO (Area of Origin) project, is a monthly assessment that aims to provide comprehensive, multi-sectoral information about the humanitarian situation inside Syria. This factsheet presents information gathered in 15 communities in February 2018, referring to the situation in Damascus Governorate in January 2018. It presents key indicators, rather than the entire range of indicators gathered in the HSOS questionnaire. For community-level data on assessed subdistricts in Al Hasakeh, Dar'a, Idleb, Rural Damascus and Quneitra, please refer to the monthly subdistrict factsheets, available on the [REACH Resource Centre](#). The complete HSOS dataset is disseminated monthly via the REACH Syria mailing list.

Wherever possible, information was collected through an enumerator network. REACH enumerators are based inside Syria and interview Key Informants (KIs) directly in the community they report about. Where access and security constraints rendered direct data collection unfeasible, KI interviews were conducted indirectly through participants identified in camps and settlements in neighbouring countries by REACH field teams. Participants contact KIs in their community in Syria to collect information about their community. KIs were asked to report at the community level.

A minimum of three KIs were interviewed per community to enhance data accuracy. KIs generally included local council members, Syrian NGO workers, medical professionals, teachers, shop owners and farmers, among others, and were chosen based on their community-level or sector specific knowledge. In cases where KIs disagreed on a certain piece of information, enumerators triangulated the data with secondary sources or selected the response provided by the KI with the more relevant sector-specific background. For each question asked, confidence levels were assigned based on the KIs area of expertise and knowledge of the sector-specific situation. The confidence levels associated with each question are presented in the final dataset. The full confidence matrix used to assign confidence levels is available upon request.

Findings were triangulated through secondary sources, including news monitoring and humanitarian reports. Where necessary, follow-up was conducted with enumerators and participants. Findings are indicative rather than representative, and should not be generalised across the governorate.

## ENDNOTES

<sup>1</sup> All information and figures reported in HSOS factsheets refer to the situation in assessed neighbourhoods and cannot be generalised to other non-assessed communities of the governorate.

<sup>2</sup> Returns are not necessarily voluntary, safe, or sustainable.

<sup>3</sup> 'Children' includes all persons below the age of 18.

<sup>4</sup> Syrian Observatory for Human Rights. (9 May 2017). Syrian rebels quit suburb of Damascus as Assad tightens grip. Retrieved from <http://www.syriahr.com>; Al-Khalidi. (14 May 2017). Over 2,000 rebels, families evacuate Damascus district: state media. Reuters. Retrieved from <https://www.reuters.com>.

<sup>5</sup> UNHCR. (14 September 2017). Syria: Flash update on recent events - 14 September 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

<sup>6</sup> UNHCR. (18 October 2017). Syria: Flash update on recent events - 18 October 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

<sup>7</sup> a-Noufal et al. (23 October 2017). De-escalation falls flat in south Damascus as Islamic State, FSA exchange fire. Retrieved from <http://syriadirect.org>.

<sup>8</sup> Baric. (23 November 2017). Syrian War Daily – 23 November 2017. Retrieved from <https://syrianwardaily.wordpress.com>.

<sup>9</sup> UNHCR. (11 January 2018). Syria: Flash update on recent events - 11 January 2018. Retrieved from <https://reliefweb.int>.

## About REACH

REACH is a joint initiative of two international non-governmental organisations - ACTED and IMPACT Initiatives - and the UN Operational Satellite Applications Programme (UNOSAT). REACH aims to strengthen evidence-based decision making by aid actors through efficient data collection, management and analysis before, during and after an emergency. By doing so, REACH contributes to ensuring that communities affected by emergencies receive the support they need. All REACH activities are conducted in support to, and within the framework of, inter-agency aid coordination mechanisms. For more information, please visit our website: [www.reach-initiative.org](http://www.reach-initiative.org). You can contact us directly at: [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) and follow us on Twitter: @REACH\_info.