

# Homs Governorate, December 2017

## Humanitarian Situation Overview in Syria (HSOS)

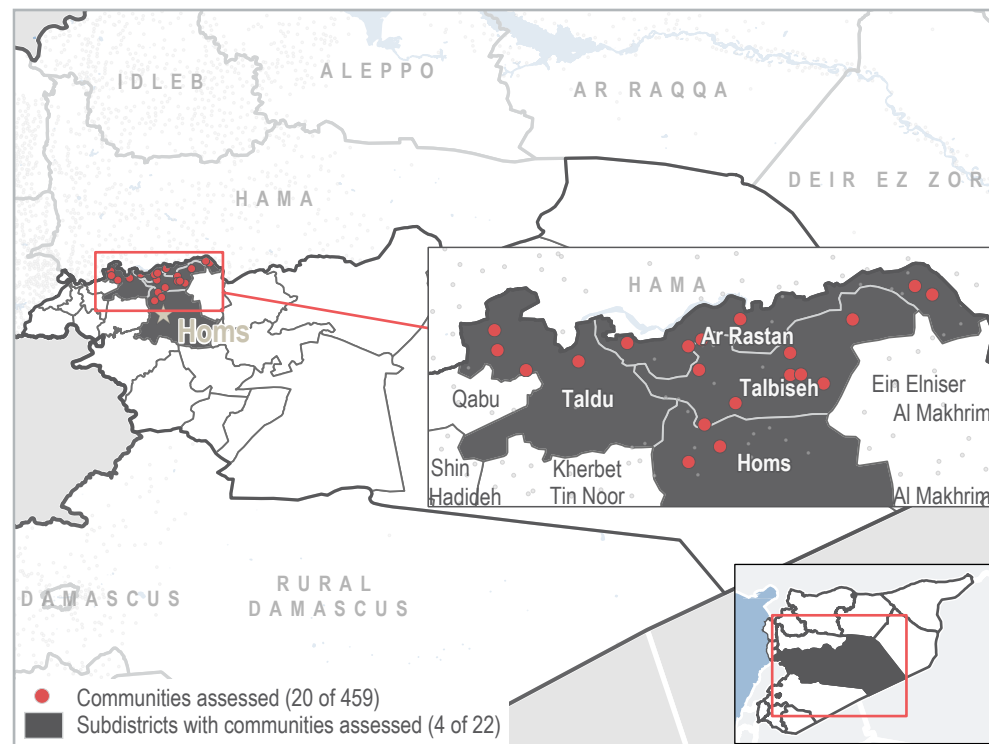
### OVERALL FINDINGS<sup>1</sup>

Homs governorate is located in central Syria, bordering Lebanon in the west. In all assessed communities aside from two, only **26-50%** of the pre-conflict population remained, with no further departures or spontaneous returns indicated<sup>2</sup>. **Two** of the assessed communities in Homms had no pre-conflict population remaining in December: Kisein (Ar Rastan subdistrict) and Um Sharshouh (Talbiseh subdistrict). These communities have not been assessed for a majority of indicators displayed in these factsheets. IDPs were present in **70%** of the assessed communities. Of these communities, **10** reported the presence of over 1,000 IDPs and **one**, Zafaraniya, reported the presence of approximately **10,500** IDPs, out of a total estimated population of 17,500 (including IDPs). **All** communities that reported an IDP presence cited a lack of money to pay for onward movement as well as physical obstacles to movement as the reasons why IDPs remained in their host communities. While original populations across assessed communities predominantly lived in independent apartments or houses owned pre-conflict, IDPs most commonly lived in unfinished houses or apartments, where they were either being hosted without rent or squatting.

**All** communities reported that they were unable to empty septic tanks and that connections to the sewage system were blocked, and **50%** reported having insufficient water to meet household needs. **Half** of these communities reported hosting over 1,000 IDPs. **One** community, Saan Elosud, reported that drinking water from the community's primary water source, a closed well, made people sick. Saan Elosud was also the only assessed community to report communicable diseases as one of the main health challenges faced by residents. **All** assessed communities, reported a lack of fuel and that community members were burning plastic as a strategy to cope with fuel shortages. Of these communities, **85%** reported acute respiratory infections as a common health problem. For detailed, community-level information on Ar Rastan, Talbiseh and Taldu, please refer to the latest [community profile](#) covering this area.

**All** assessed communities reported that residents were able to access somewhat sufficient amounts of food, although the high cost of some food items and a decrease in local food production were reported as challenges in accessing sufficient amounts of food across **all** communities. The governorate average price of a food basket was approximately **25-50%** of the governorate average household income of 50,000 – 100,000 SYP. **Eight** communities reported that their average, monthly household income was below 50,000 SYP. Farm ownership and business and trade were cited as the most common sources of income across communities assessed in Homms, yet given the decrease in local food production and access restrictions to the area, it is likely that income generated was insufficient to cover household needs. Skipping meals and reducing the size of meals were reported in **all** assessed communities. Primary and secondary schools were functioning in **all** of the assessed communities, although **18** reported that some children experienced barriers to accessing education<sup>3</sup>. All of these communities reported that a lack of teaching staff and unsafe routes to services posed barriers to accessing education.

### Coverage



#### Top 3 reported priority needs

1. Education
2. Food security
3. Water security

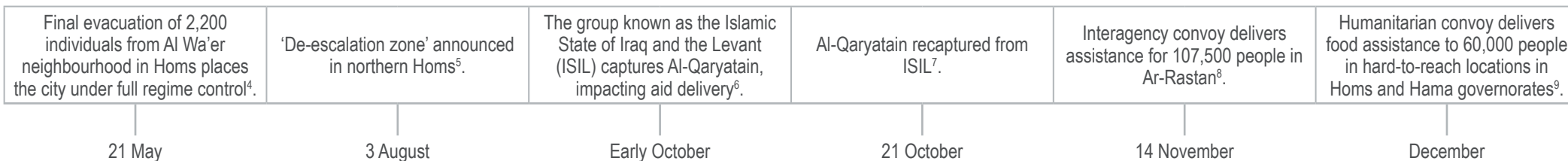
#### Demographics\*

**1,415,805** people in need

**714,982** **700,823**

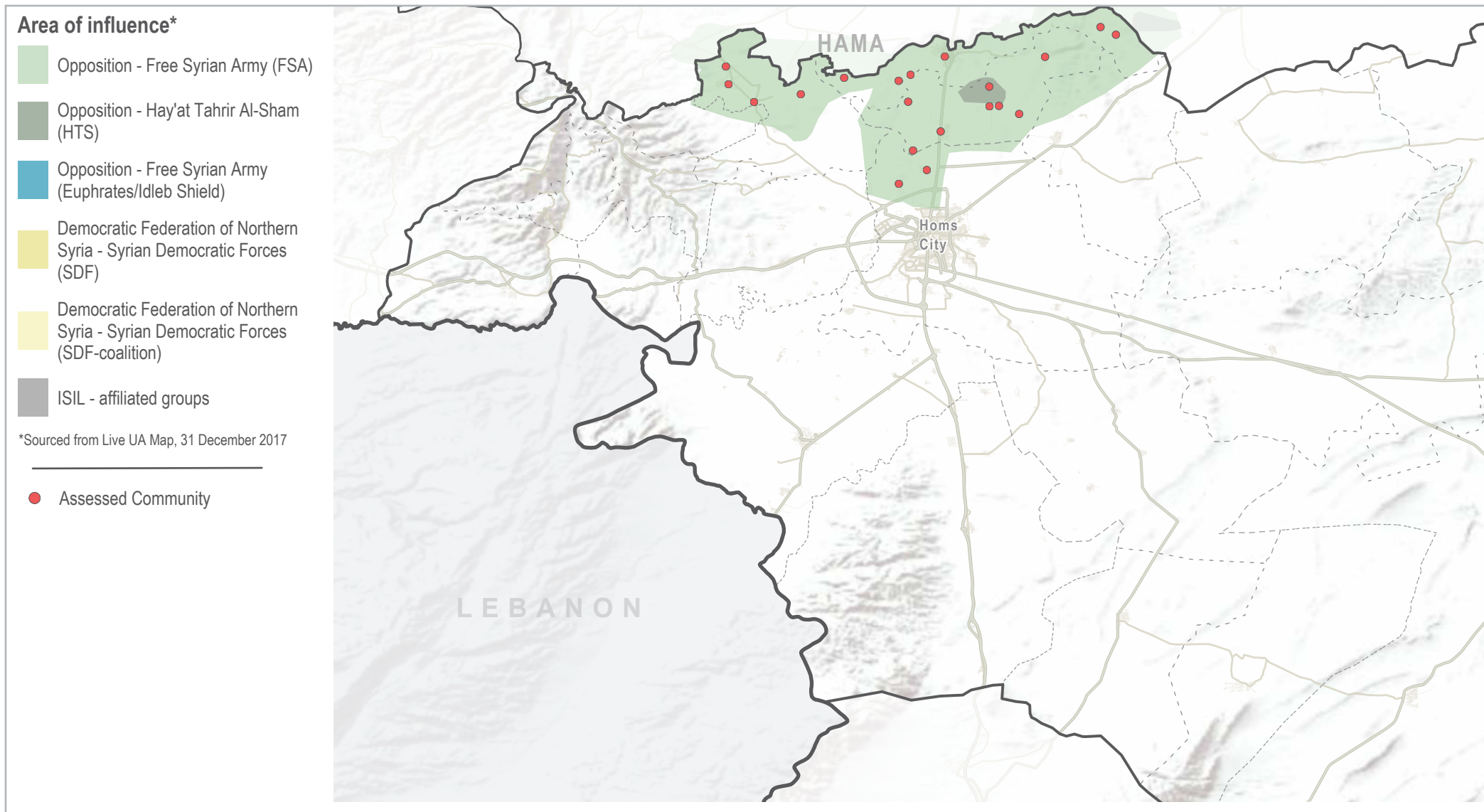
\* Figures based on HNO 2018 population data for the entire governorate.

### KEY EVENTS



# Homs Governorate, December 2017

## Governorate areas of influence:



# Homs Governorate, December 2017

## DISPLACEMENT

0 Estimated number of IDP arrivals in assessed communities in December.

0 Estimated number of spontaneous returns in assessed communities in December<sup>2</sup>.

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

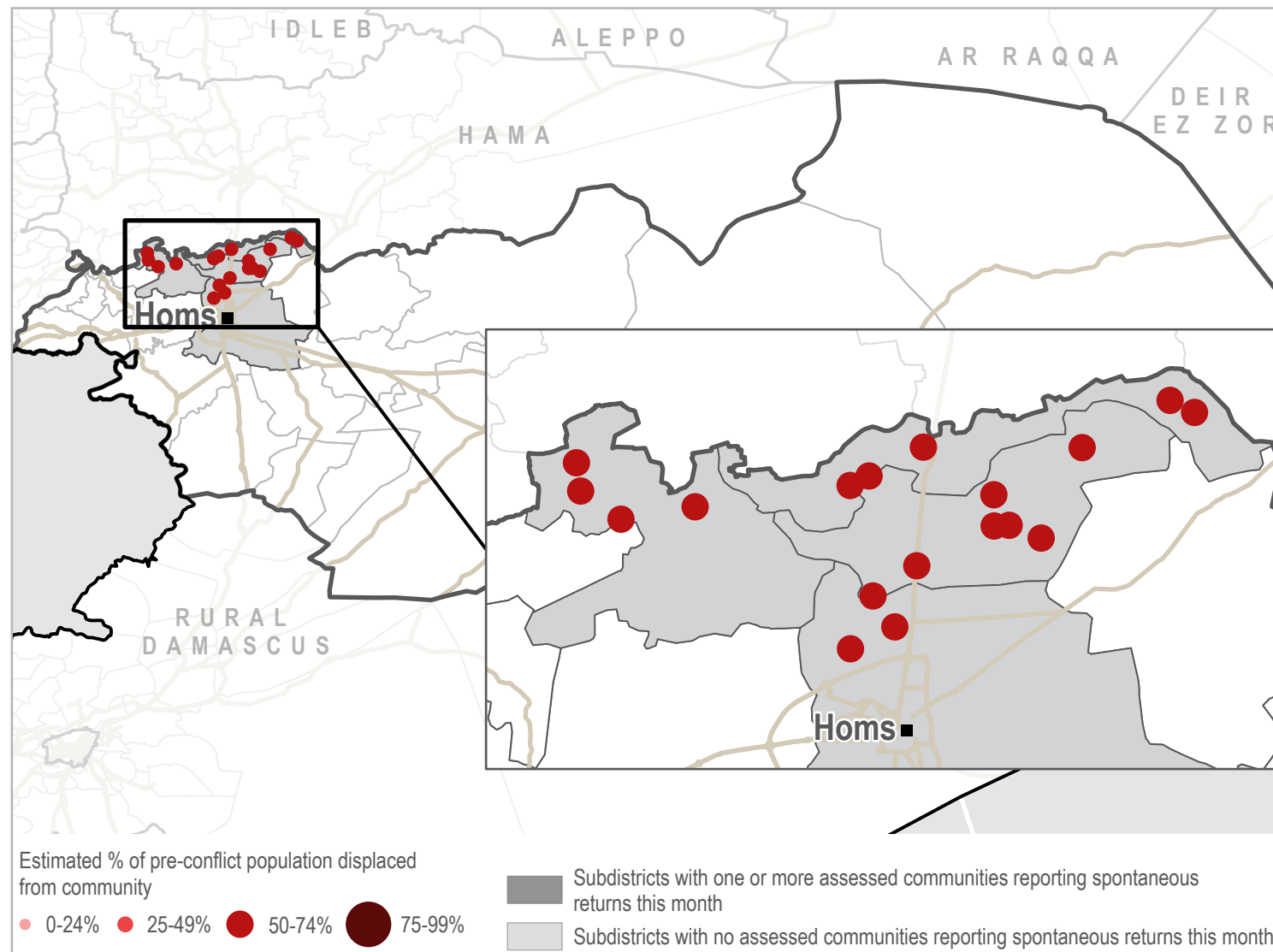
No reported IDP arrivals

### Top 3 sub-districts of origin of most IDPs arrivals<sup>3,4</sup>:

No reported IDP arrivals

20 communities reported no PCP departures<sup>3,4</sup>.

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



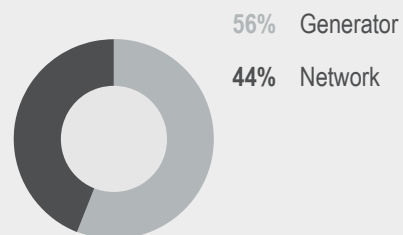
<sup>3</sup> Multiple choices allowed.

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

# Homs Governorate, December 2017

## SHELTER AND NFI

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

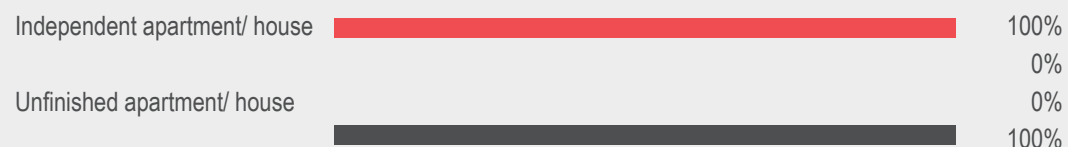


0 communities reported no lack of fuel. Most common strategies to cope with a lack of fuel in the remaining 18 assessed communities<sup>3,4</sup>:

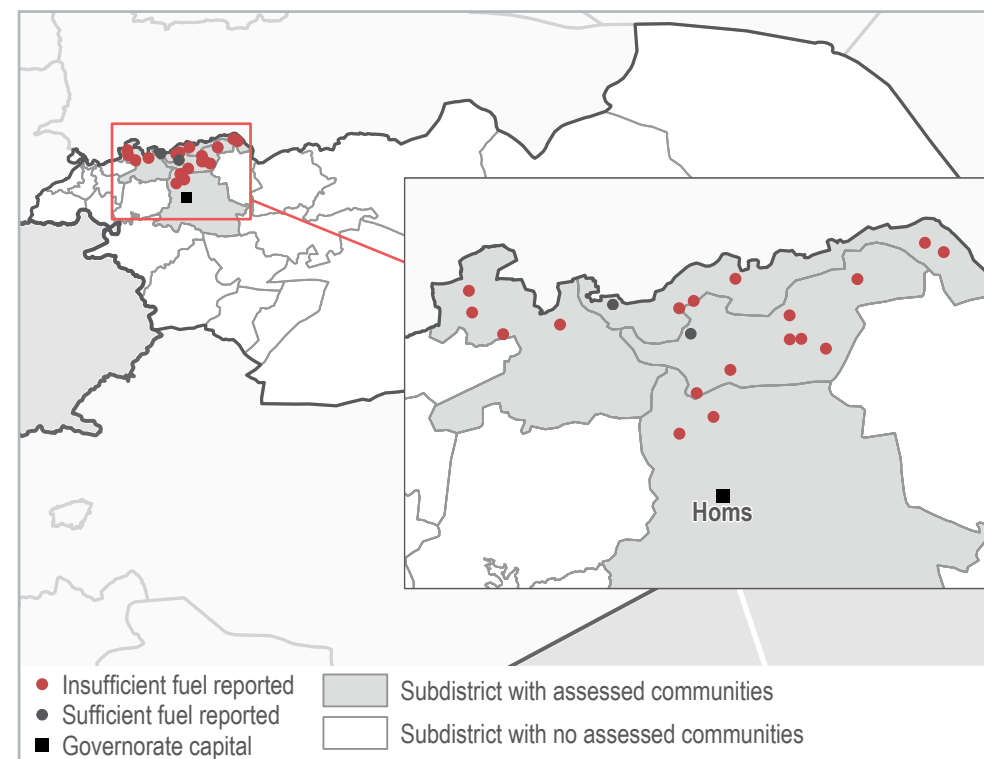


The average reported rent price in the governorate could not be calculated due to a lack of information in most of the communities assessed.

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 December:	Governorate average price in November:	Syrian average price in December:
Coal (1 kilogram)	800	803	337
Diesel (1 litre)	400	400	472
Butane (1 canister)	8,094	7,567	6,125
Firewood (1 tonne)	85,000	90,000	84,744

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

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

<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 December 2017)

# Homs Governorate, December 2017

## HEALTH

**0** Communities reported that no medical items were available in their community.

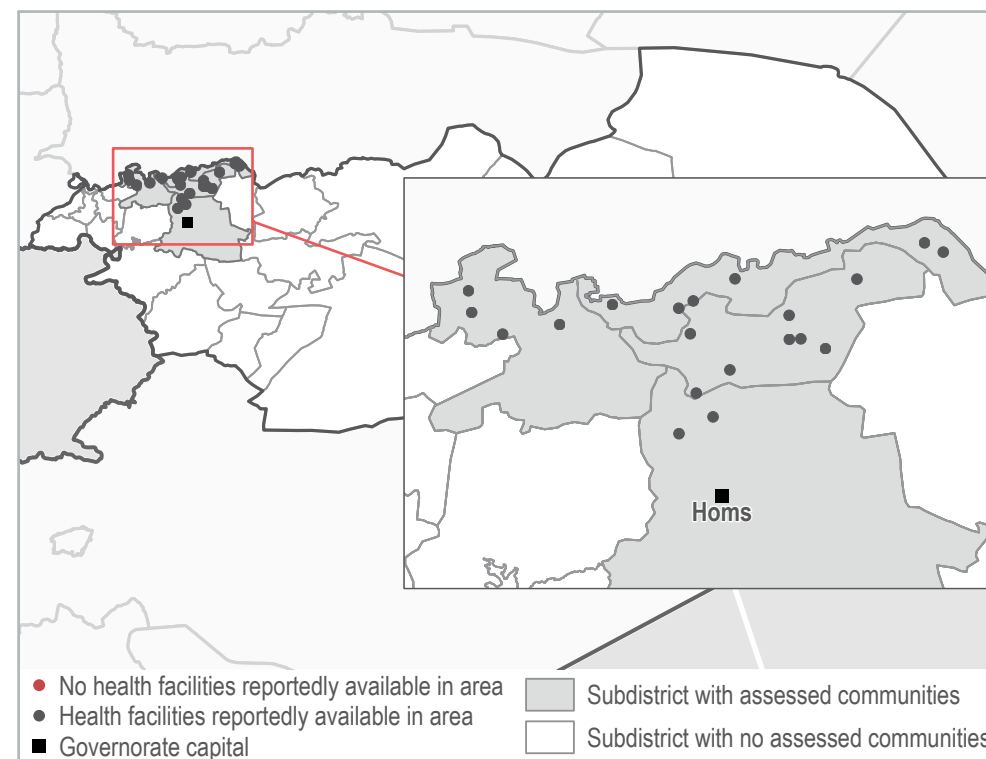
**18** Communities reported that the majority of women did not have access to formal health facilities to give birth.

**0** communities reported that residents experienced no barriers to accessing healthcare services. The barriers in the remaining **18** assessed communities were<sup>3,4</sup>:

Disability/injuries/illness preventing travel	<div style="width: 100%; height: 10px; background-color: red;"></div>	100%
Security concerns to enter/remain in facilities	<div style="width: 100%; height: 10px; background-color: red;"></div>	100%

**18** communities reported that residents were not using coping strategies to deal with a lack of medical supplies<sup>3,4</sup>.

### Presence of health facilities in assessed communities:



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

Assistive devices	85%
Prosthetics and orthotics	85%
Rehabilitation services	80%

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

Severe diseases affecting those younger than 5	90%
Acute respiratory infections	85%
Pregnancy related diseases	70%

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

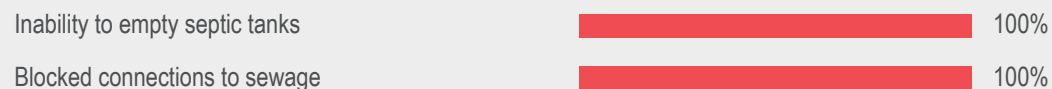
<sup>4</sup> By percent of communities reporting.

# Homs Governorate, December 2017

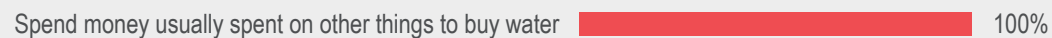


- 0** Communities reported that water from their primary source tasted and/or smelled bad.
- 1** Community reported that drinking water from its primary source made people sick.

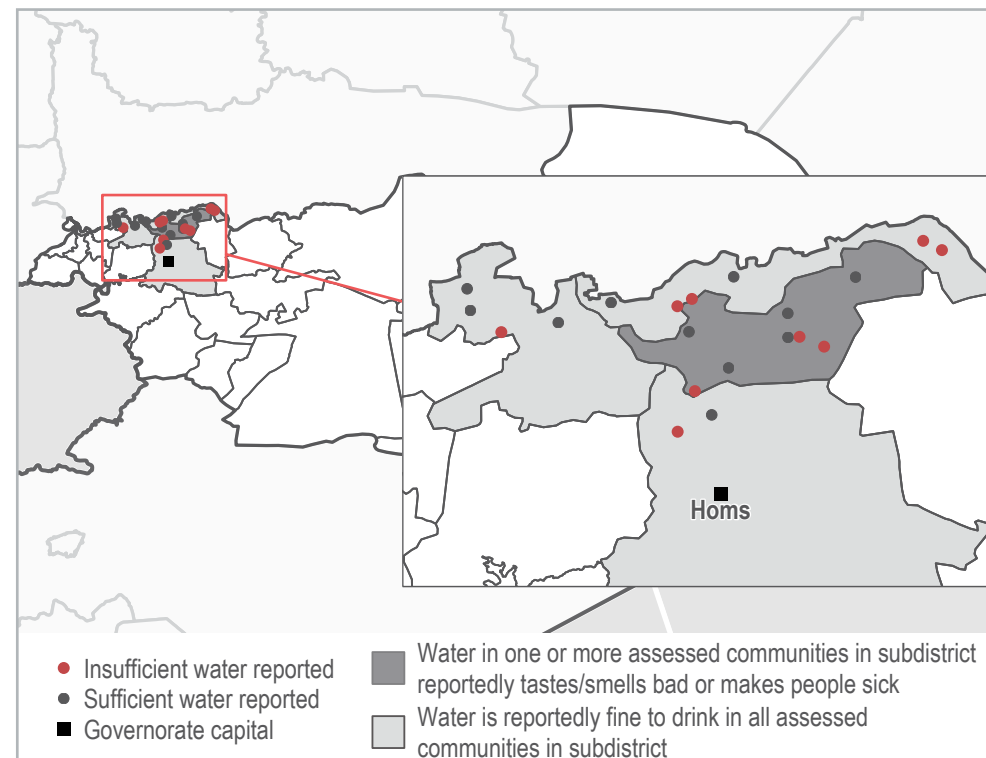
**0** communities reported that residents had no problems with latrines. The most prevalent problems with latrines in the remaining **18** assessed communities were<sup>3,4</sup>:



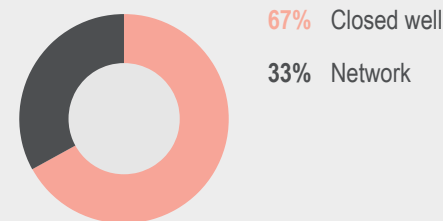
**9** communities reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining **9** assessed communities were<sup>3,4</sup>:



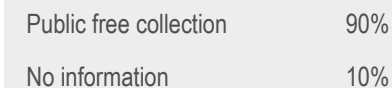
## Water sufficiency for household needs:



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



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



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

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

# Homs Governorate, December 2017

## FOOD SECURITY

- 0 Communities reported not having received a food distribution in the last 12 months.
- 0 Communities reported that residents were unable to purchase food at shops and markets.

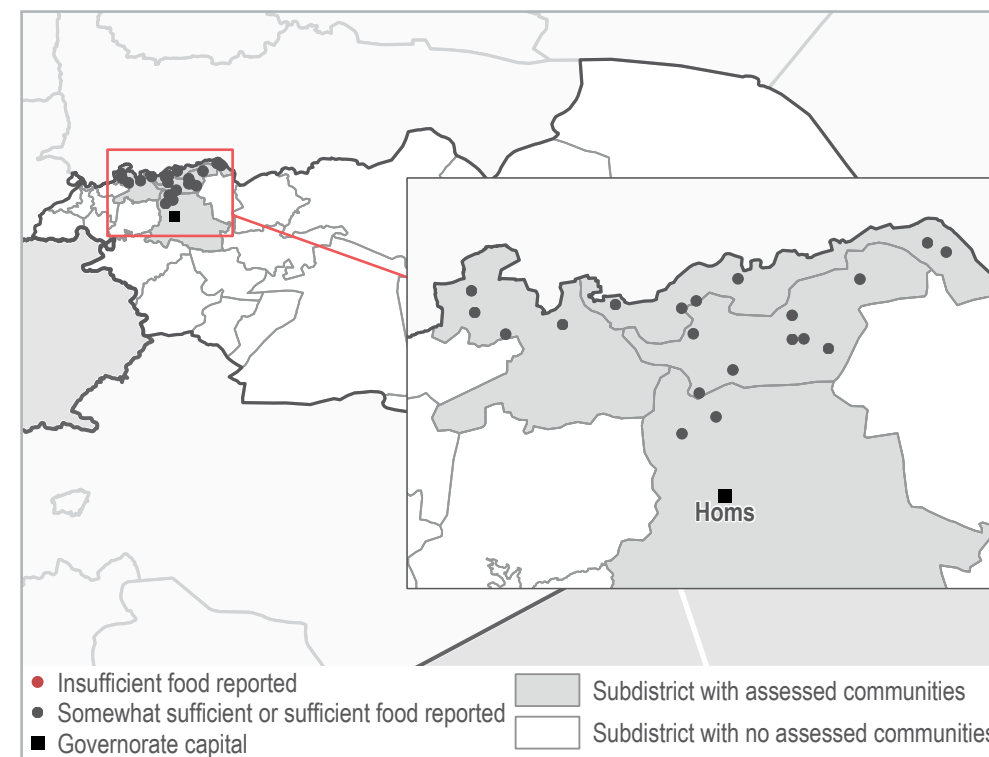
0 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining 18 assessed communities were<sup>3,4</sup>:



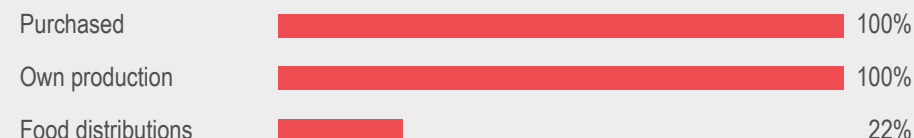
### Core food item prices reported (in SYP)<sup>5</sup>:

Food item:	Governorate average price in December:	Governorate average price in November:	Syrian average price in December:
Bread public bakery (1 loaf)	Unavailable	Unavailable	114
Rice (1 kilogram)	200	200	565
Lentils (1 kilogram)	322	304	472
Sugar (1 kilogram)	275	323	410
Cooking oil (1 litre)	719	783	697

### 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 communities reporting.

<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 December 2017)

# Homs Governorate, December 2017

## LIVELIHOODS

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

**27,027 SYP** Governorate average food basket price<sup>5,6</sup>.

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

**0** communities 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 **18** assessed communities were<sup>3,4</sup>:

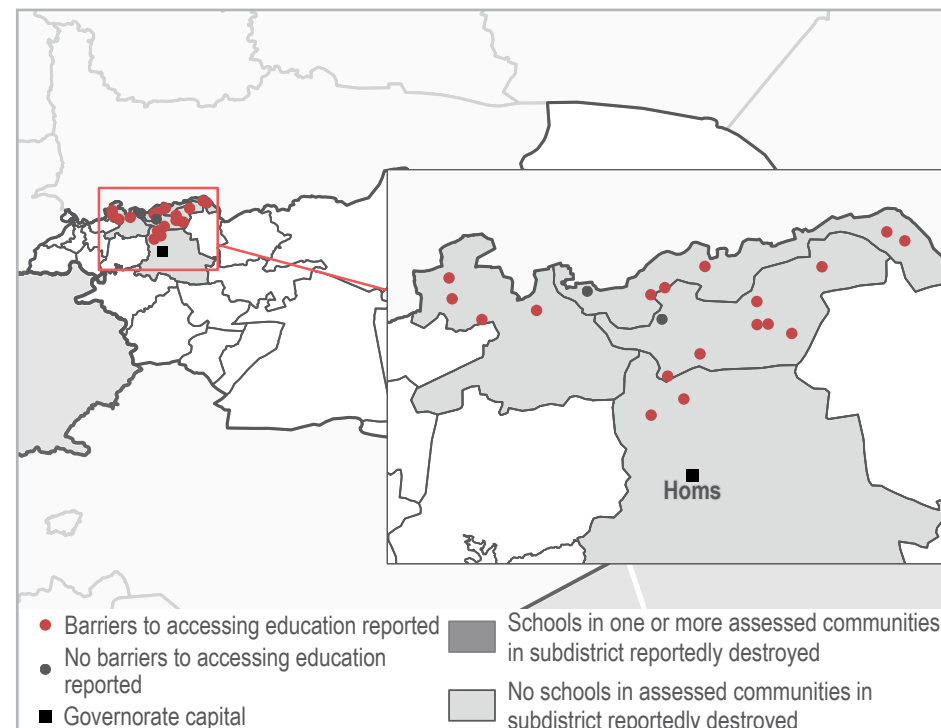


**Most commonly reported main sources of income<sup>3,4</sup>:**

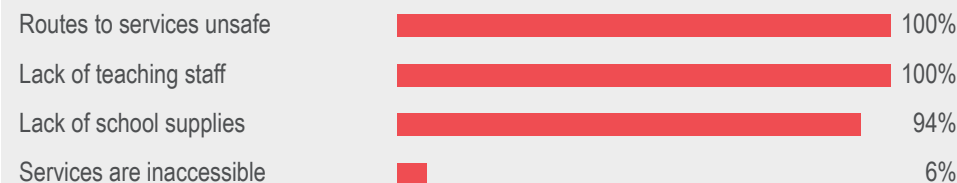


## EDUCATION

**Barriers to accessing education services:**



**0** communities reported that most children were able to access education. The most commonly reported barriers to education in the remaining **18** assessed communities were<sup>3,4</sup>:



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

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

<sup>5</sup> 1 USD = 434 SYP (UN operational rates of exchange as of 1 December 2017)

<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.

## 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 20 communities in January 2018, referring to the situation in Homs Governorate in December 2017. 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 communities 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> Reuters (21 May 2017). Syrian rebels leave last opposition district in Homs. Retrieved from <https://www.reuters.com>.

<sup>5</sup> Reuters (3 August 2017). Russia announces 'de-escalation zone' north of Syria's city of Homs. Retrieved from <https://www.reuters.com>.

<sup>6</sup> Aljazeera (23 October 2017). ISIL accused of killing scores of Qaryatayn civilians. Retrieved from <http://www.aljazeera.com>.

<sup>7</sup> UNHCR (25 October 2017). Syria: Flash update on recent events - 25 October 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

<sup>8</sup> UNHCR (15 November 2017). Syria: Flash update on recent events - 15 November 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

<sup>9</sup> WFP (31 December 2017). WFP Syria Country Brief, December 2017. 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.