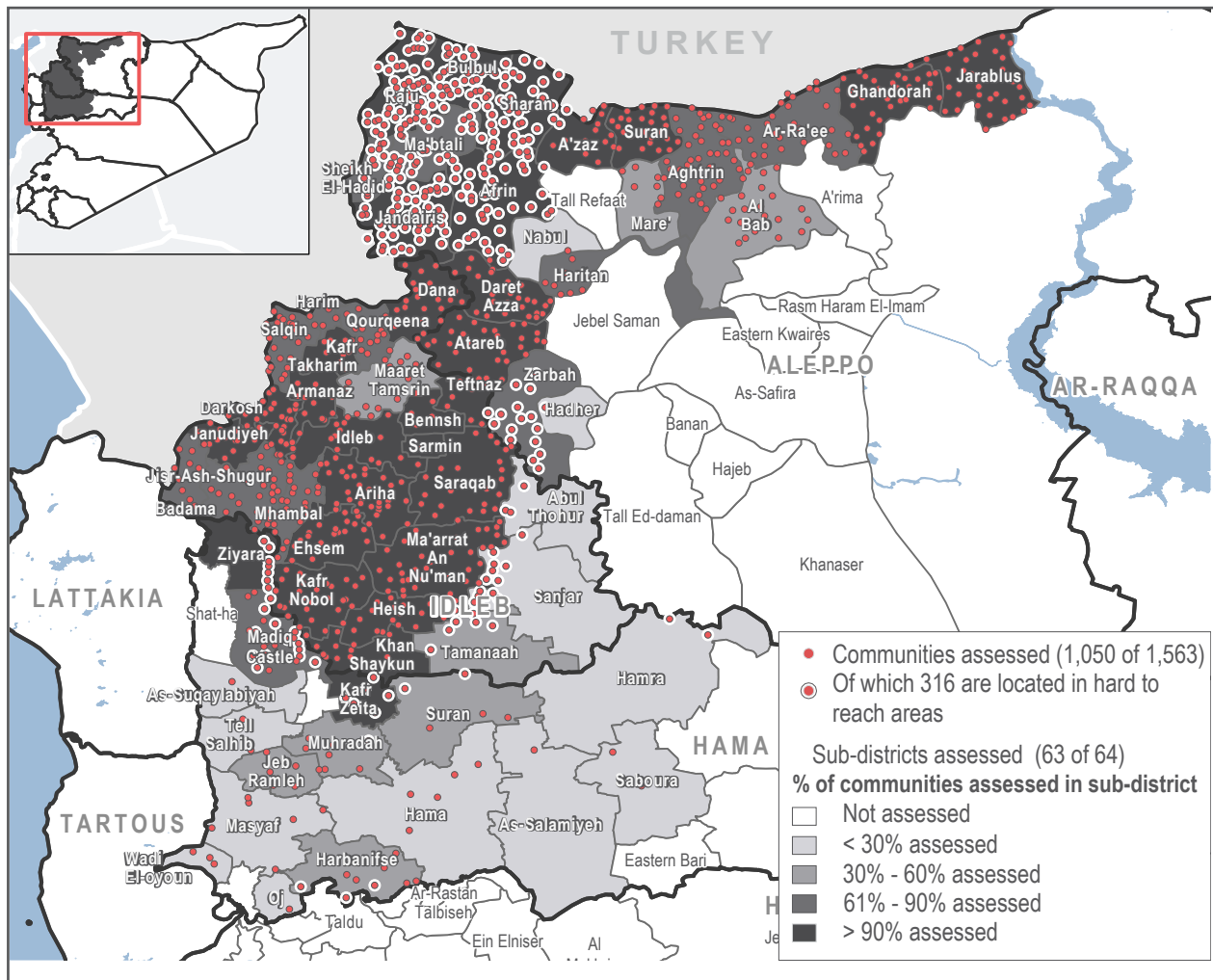


Northwest Syria, December 2018

Humanitarian Situation Overview in Syria (HSOS)

Coverage



Introduction

HSOS is a monthly assessment that aims to provide comprehensive, multi-sectoral information about the humanitarian situation inside Syria. The assessment is conducted at the community level covering [displacement, shelter and non-food items \(SNFI\)](#), [health, water, sanitation and hygiene \(WASH\)](#), [food security and livelihoods \(FSL\)](#), and [education](#).

The factsheet presents information gathered in 1,050 communities across Idlib (426 communities), northern and western Aleppo* (533 communities), and Hama (91 communities) governorates. Data was collected during the month of January 2019, and refers to the situation in the northwest region during December 2018. Findings are indicative rather than representative, and should not be generalised across the region.

For community-level data, datasets are available on the [REACH Resource Centre](#), [the Humanitarian Data Exchange](#), and are also distributed through partners across the humanitarian community.

*The northern and western parts of Aleppo where humanitarian response and coordination is conducted from the northwest rather than the northeast.

Top 3 reported priority needs in assessed communities:

- 1 Healthcare
- 2 Food Security
- 3 Livelihoods

People in need (PIN) Demographics*

5,696,896 total PIN 2,860,560 2,836,336

Survival Minimum Expenditure Basket (SMEB):^{1,2}

Average price in December 2018 57,558 Syrian pound (SYP)
 One month change: -2.2
 Six month change: +7.6

*Figure estimates based on HNO 2018 population data for the entire NWS region including areas not covered by HSOS. These numbers were collected in 2017 and provide a baseline as updated numbers are currently not available.

Key events impacting the humanitarian situation in NWS

Operation "Olive Branch" commences in Afrin. ^a	212,724 individuals spontaneously return to 287 communities in rural Aleppo governorate and 354,682 individuals return to Aleppo city. ^b	Approximately 1.9 million IDPs reside in Idlib, western Aleppo, northern Hama and Eastern Lattakia according to UNHCR. ^c	Announcement of a demilitarised zone in NWS that bars the presence of heavy weaponry and certain armed opposition groups. ^d	Cold temperatures, heavy rainfall, and flooding lead to deterioration of humanitarian situation in IDP camps in Idlib and Aleppo governorates. ^e	Hostilities within the area considered part of the announced demilitarised zone in Idlib and surrounding areas add to further displacement. ^f
January 2018	February 2018	End of August 2018	17 September 2018	End of December 2018	Ongoing

CONTEXT

In December 2018, adverse weather conditions including cold temperatures and heavy rainfall in Idlib and Aleppo governorates led to deterioration of humanitarian conditions across northwest Syria (NWS). High displacement numbers and a concentration of camps and sites located in NWS make it a region with a large vulnerable population. Further exacerbating this issue, heavy rain and associated flooding reportedly swept away hundreds of tents and damaged concrete houses in camps, impacting thousands of people.^f In addition, ongoing hostilities and tensions between armed opposition groups in NWS led to civilian casualties^g and contributed to displacement.^h For more context information, please see the forthcoming ISMI Overview of IDP Movements in Northern Syria, December 2018, [North-west Syria: Inter-Sector Rapid Needs Assessment - Flood Impact, January 2019](#), and the [REACH Southern Idlib & Northern Hama Rapid Needs Assessment](#).

KEY HIGHLIGHTS³

Lack of access to fuel in Afrin district, northern Aleppo governorate

In December, among the 452 assessed communities in northern Aleppo governorate, key informants (KIs) in 171 (38%) reported a lack of fuel. Of the 171 assessed communities that reportedly faced a lack of fuel, the majority (131 (77%)) were located in Jandaris, Sheik El-Hadid, Raju, Bulbul, and Sharan sub-districts in Afrin district. KIs reported that existing fuel supply centers from northeast Syria to Afrin district were disrupted in December, due to anticipation of a possible military offensive. The lack of fuel in winter months likely impacted access to electricity, as KIs in 153 (89%) assessed communities that faced a lack of fuel reported generators as the main source of electricity. The most commonly reported coping strategies to deal with a lack of fuel were burning plastic (reported in 98 (57%) assessed communities) and burning furniture (reported in 97 (57%) assessed communities).

Insufficient water negatively impacting purchasing power in Idlib governorate

Of the 426 assessed communities in Idlib governorate, KIs in 179 (42%) reported that access to water was insufficient to meet household needs, the majority of which were located in western Idlib governorate. The most commonly reported strategy to cope with a lack of water was to purchase water with money usually spent on other items (reported in 139 (33%) assessed communities). Of all 139 assessed communities where KIs reported that residents purchased water with money usually spent on other items, KIs in 134 (96%) reported unstable daily employment as a main source of income. Moreover, KIs in 133 (96%) assessed communities reported an average monthly household income of less than SYP 50,000, while KIs in 124 (89%) reported that income was insufficient to meet household needs. This suggests that additional expenses for water impacted purchasing power, already strained by a lack of livelihoods opportunities in Idlib governorate.

Lack of medical facilities in northern and western Aleppo and Idlib governorates

In December, across the 959 assessed communities in northern and western Aleppo and Idlib governorates, KIs in 671 (70%) reported healthcare as a top priority need, which was also reported in October and November. In addition, in 711 (74%) assessed communities, barriers to accessing healthcare were reported. The most commonly reported barrier to accessing healthcare was a lack of medical facilities in the community (440 (46%) assessed communities). This was also observed in October and November where the most commonly reported barrier to accessing services was a lack of medical facilities in the area as reported by KIs in northern and western Aleppo and Idlib governorates. This highlights that for an extended period of time these governorates have faced barriers in accessing medical facilities, potentially impacting public health.



Displacement⁴

- Of the 1,050 assessed communities in NWS, KIs in 931 (89%) reported that IDPs resided in the community. In addition, KIs in 229 (22%) assessed communities reported that IDPs left the host community in December. The most commonly reported reasons for IDPs to leave were reduced access to basic services (reported in 43 (19%) assessed communities), loss of income (reported in 36 (16%) assessed communities), and area of origin perceived as safer (reported in 31 (14%) assessed communities).



Food Security & Livelihoods

- Among the 426 assessed communities in Idlib governorate, KIs in 67 (16%) reported that access to food was insufficient to meet household needs. Of the 67 assessed communities where KIs reported insufficient food, the majority (56 (84%) assessed communities) were located in Jisr-Ash-Shugur, Ariha, and Mhambal sub-districts.
- Across all assessed communities in NWS, KIs in 1,050 communities (100%) reported that residents obtained food through purchase in markets and in 889 (85%) assessed communities KIs reported through own production, with little differences between governorates. However, food distributions were reported in 67 (83%) assessed communities in Western Aleppo, and 8 (9%) assessed communities in Hama governorate, highlighting differences in access to humanitarian food distributions.



Education

- Across the 1,050 assessed communities in NWS, KIs in 424 (40%) reported that not all school-aged children had access to education services in December. Among the 518 assessed communities in Idlib and northern Aleppo governorates, the most commonly reported barrier was the long distance to educational services (reported in 202 (39%) assessed communities). In comparison, the most commonly reported barrier across the 81 assessed communities in western Aleppo governorate was a lack of teaching staff (reported by KIs in 20 (25%) assessed communities).



WASH

- Among the 426 assessed communities in Idlib governorate, KIs in 114 (27%) reported free public collection as the most common way to dispose of garbage, followed by burying or burning garbage (reported in 100 (23%) assessed communities), and paid private collection (reported in 90 (21%) assessed communities). In addition, KIs in 60 (14%) assessed communities reported that garbage was most commonly left in streets/public areas.
- Of the 878 assessed communities in northern Aleppo and Idlib governorates, KIs in 385 (44%) reported difficulties with latrines/toilets. The most commonly reported issues were the inability to empty septic tanks (reported in 268 (70%) assessed communities), followed by blocked sewage connections (reported in 151 (39%) assessed communities), and the lack of separation between men and women's facilities (reported in 93 (24%) assessed communities), essential to reducing protection risks.



Health

- Among the 959 assessed communities in Idlib and northern and western Aleppo governorates, the most commonly reported health issues were severe diseases affecting those aged less than five (reported in 671 (76%) assessed communities). In comparison, the most commonly reported health issues in Hama governorate were skin diseases and severe diseases affecting those aged less than five (each reported in 46 (51%) of the 91 assessed communities).
- Across the 878 assessed communities in northern Aleppo and Idlib governorates, the most commonly reported healthcare services needed were antenatal care (reported in 483 (55%) assessed communities), followed by access to medication (reported in 453 (52%) assessed communities).

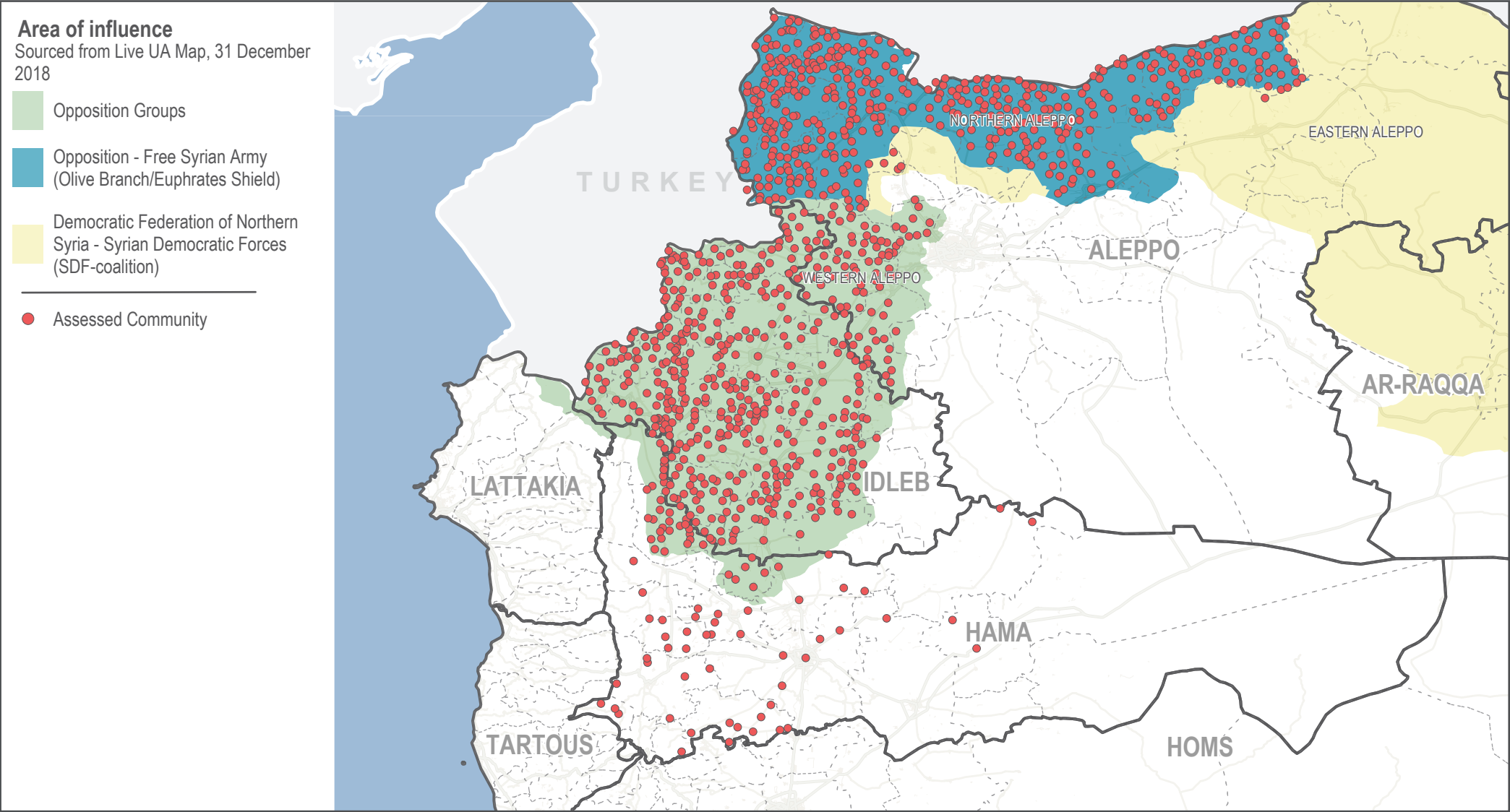


Shelter and NFI

- The majority of KIs in the 426 assessed communities in northern Aleppo governorate reported generators as the main electricity source (reported in 392 (87%) assessed communities). In comparison, in Idlib governorate the most commonly reported electricity sources were generators (reported in 183 (43%) of 426 assessed communities), followed by solar alternatives (reported in 121 (28%) assessed communities), highlighting more diverse options in electricity sources.

Northwest Syria, December 2018

Regional areas of influence:



Northwest Syria, December 2018

DISPLACEMENT⁴

15,570 - 17,590 Estimated number of IDP arrivals in assessed communities in December 2018.

7,340 - 8,630 Estimated number of spontaneous returns in assessed communities in December 2018.⁵

Communities with the largest estimated number of IDP arrivals:

Sarja (Ariha, Idlib)	1,400 - 1,450
Idleb (Idleb, Idleb)	1,250 - 1,300
Babuline (Heish, Idlib)	1,000 - 1,200

*Reported as community, (sub-district, governorate)

Top 4 reported sub-districts of origin for IDP arrivals:^{6,7}

- Ma'arrat An Nu'man (Idlib)
- Heish (Idlib)
- Afrin (Aleppo)
- Menbij (Aleppo)

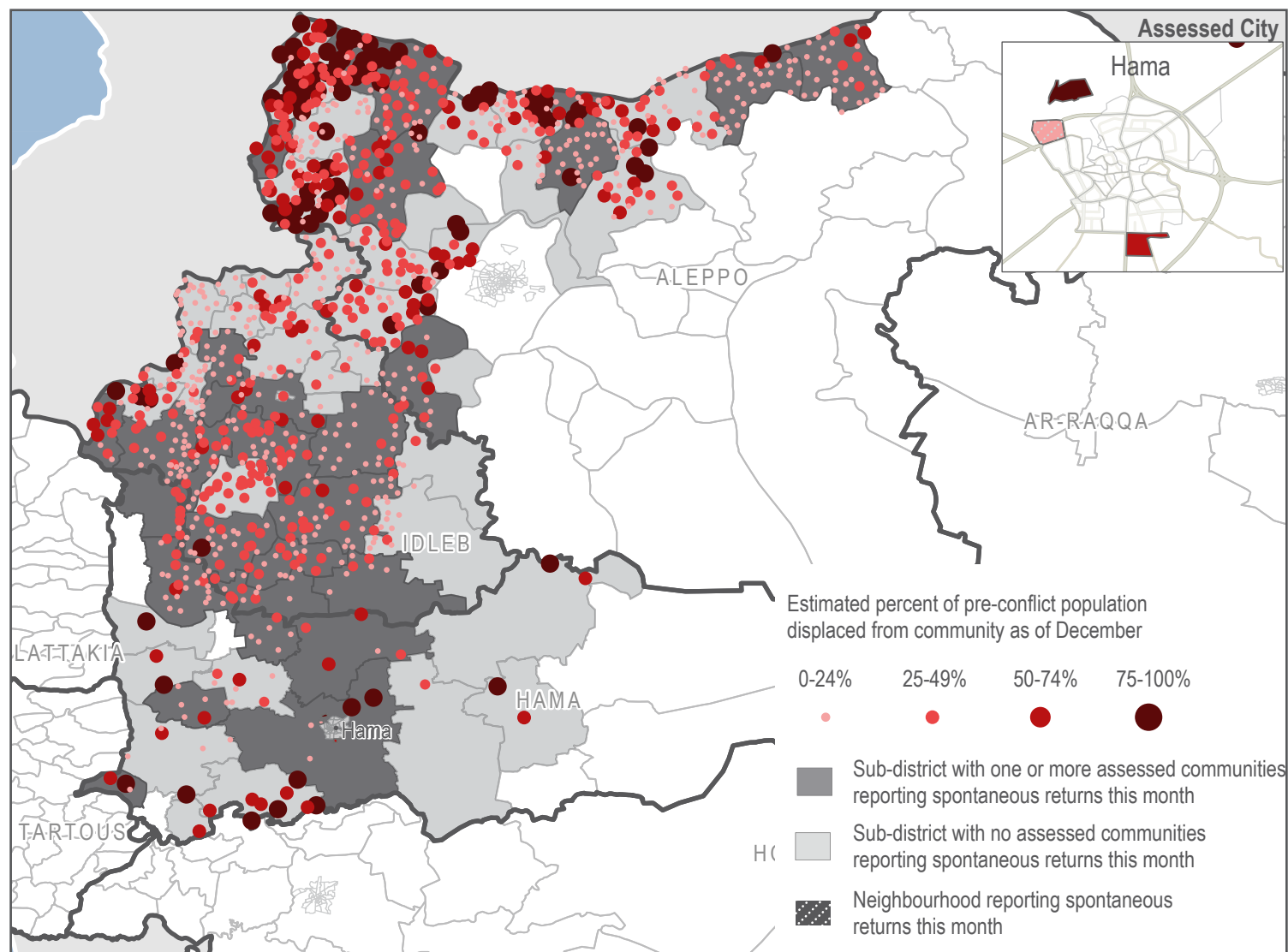
*Reported as sub-district (governorate)

996 communities reported no PCP departures.⁸

Top 3 reasons for PCP departures in the remaining 54 assessed communities:^{6,7,9}

Loss of income	54%
Reduced access to basic services	46%
Escalation of conflict	44%

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



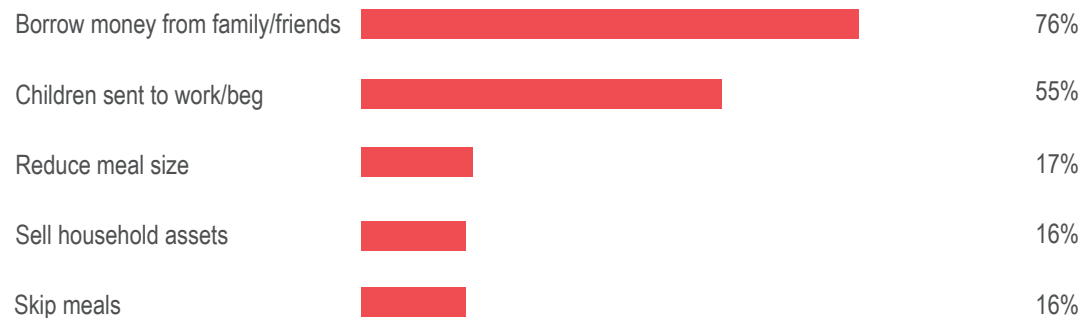
Northwest Syria, December 2018



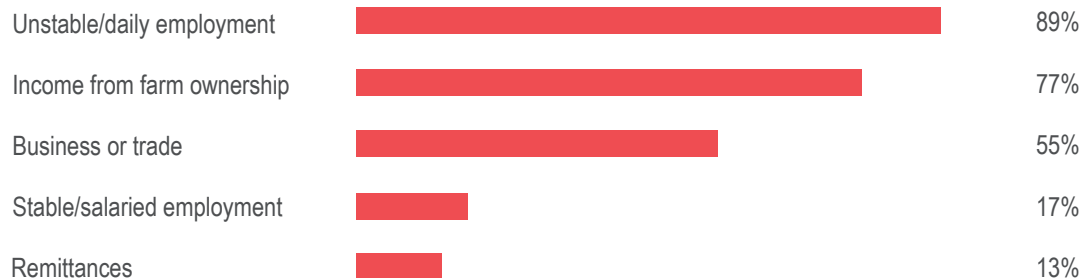
FOOD SECURITY & LIVELIHOODS

- 245/1,050** Communities reported having received food distributions in the last month.
- 244/1,050** Communities reported that residents were unable to access shops and markets.
- 0** Communities reported that residents used extreme food-based coping strategies to deal with insufficient income.¹⁰
- Less than 50,000 SYP** Most commonly reported household monthly income range.¹

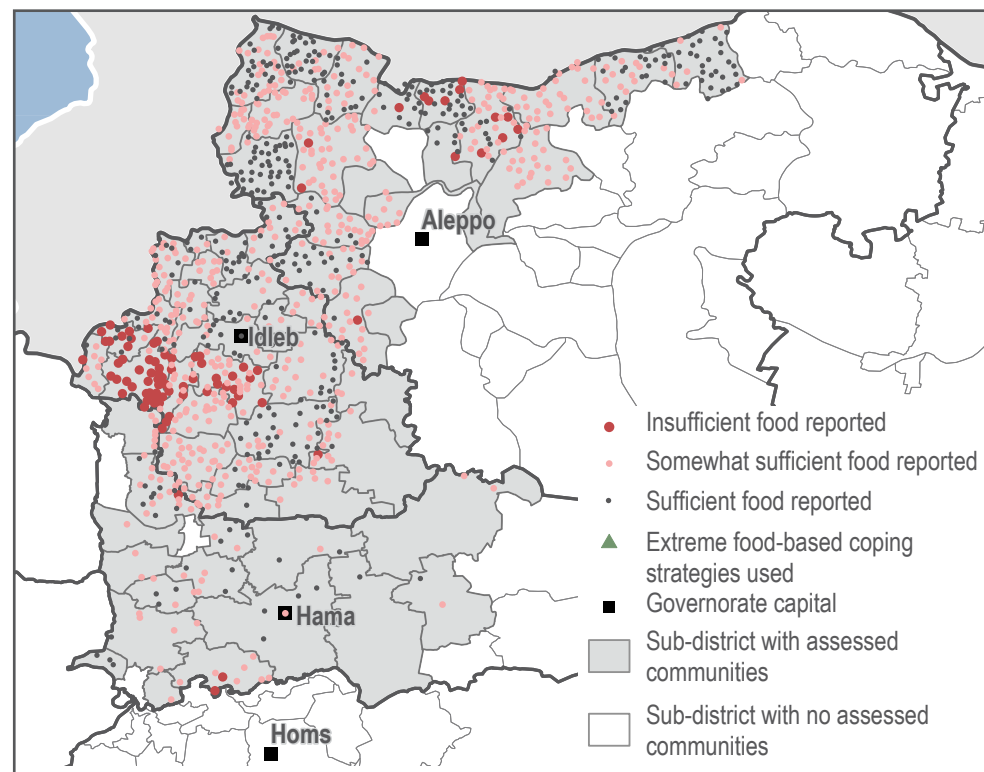
163 communities reported that residents had enough income to cover household needs. The most commonly reported coping strategies to deal with a lack of income in the remaining 884 assessed communities were:^{6,7,9}



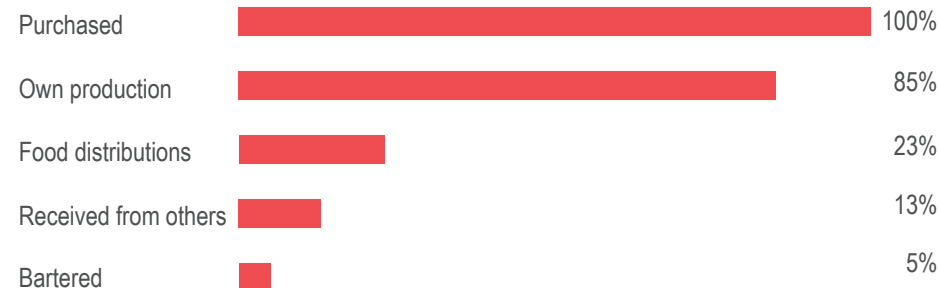
Most commonly reported main sources of income:^{6,7}



Communities that reported having an insufficient quantity of food:¹¹



Most commonly reported ways of obtaining food:^{6,7}



Northwest Syria, December 2018



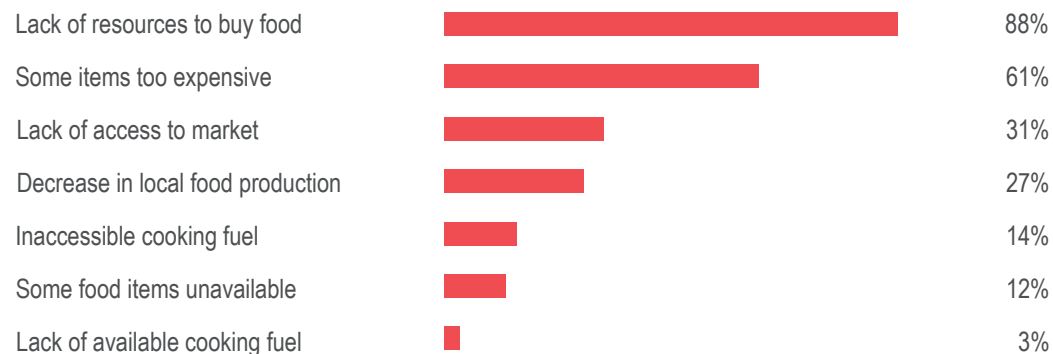
FOOD SECURITY & LIVELIHOODS

Core food item prices reported (in SYP):^{1,12}

Food item:	Regional average price in December:	One month change:	Six month change:
Bread (8 pieces)	150	0%	+7%
Rice (1 kilogram)	300	0%	-14%
Lentils (1 kilogram)	255	+2%	+11%
Sugar (1 kilogram)	225	0%	-25%
Cooking oil (1 litre)*	3,588	-1%	+1%

*includes the combined vegetable oil and ghee prices

251 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining 798 assessed communities were:^{6,7,9}



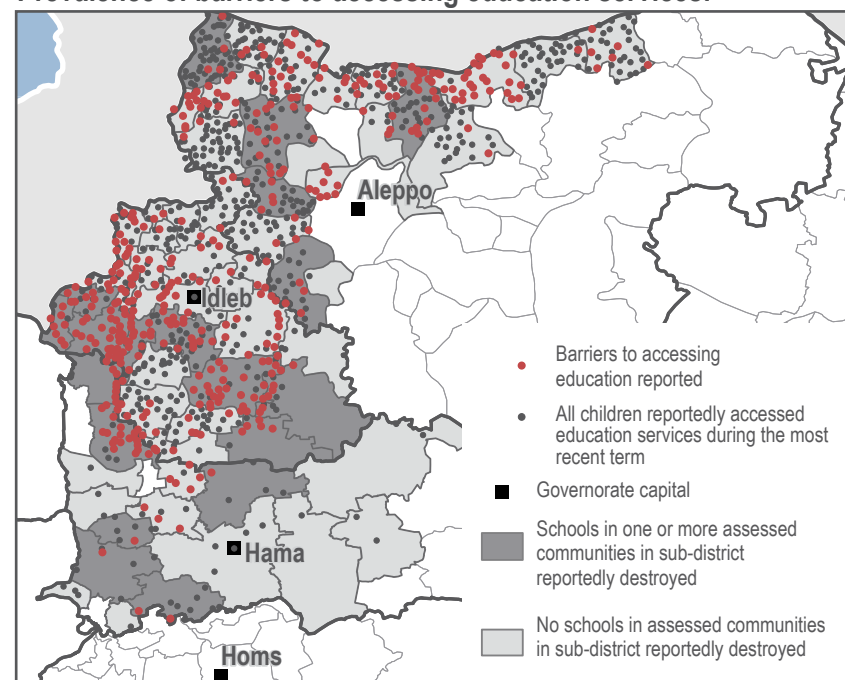
EDUCATION

979/1,050 communities reported having functioning primary education facilities, while 485 communities reported having functioning secondary education facilities.¹³

626 communities reported that all children were able to access education. The most commonly reported barriers to education in the remaining 424 assessed communities were:^{6,7,9}



Prevalence of barriers to accessing education services:



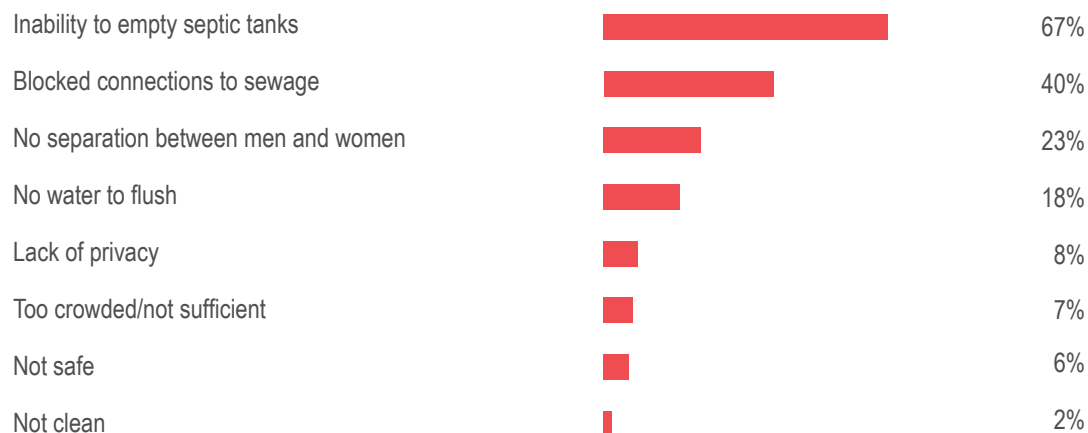
Northwest Syria, December 2018



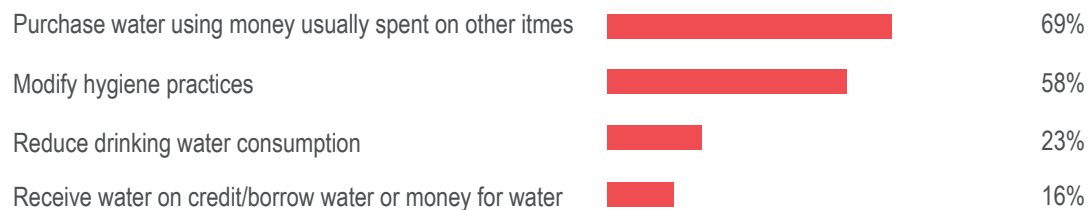
15/1,050 Communities reported that water from their primary source tasted and/or smelled bad.

1/1,050 Community, Al Bab (Aleppo governorate), reported that drinking water from their primary source made people sick.

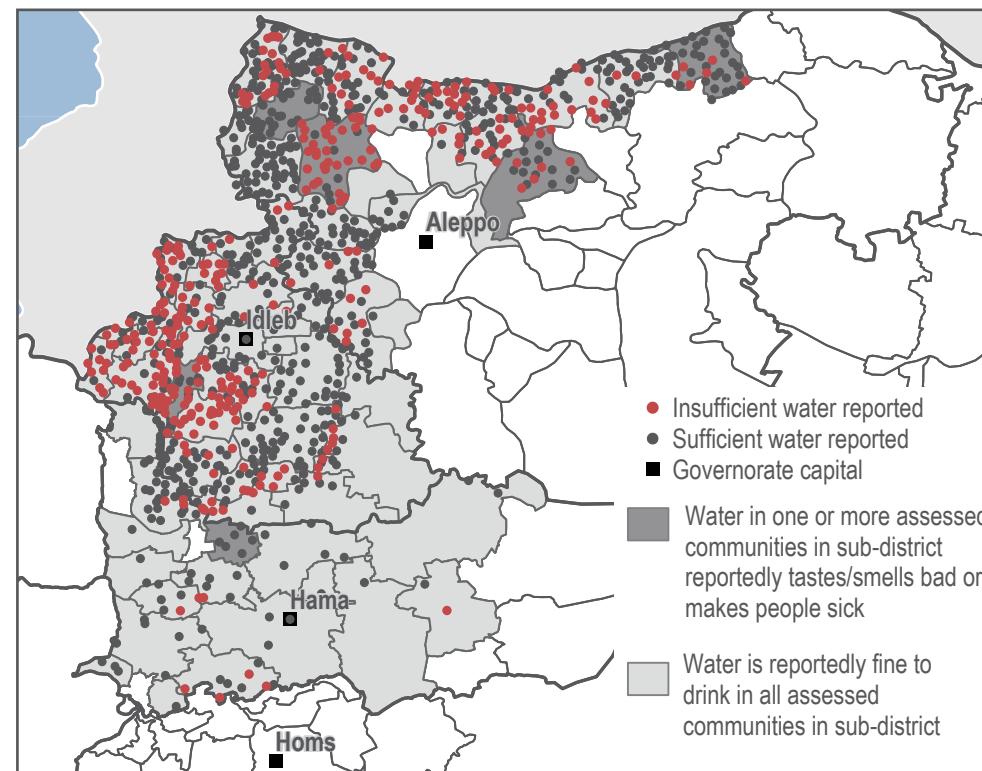
629 communities reported that residents had no problems with latrines. The most commonly reported problems with latrines in the remaining **421** assessed communities were:^{5,7,9}



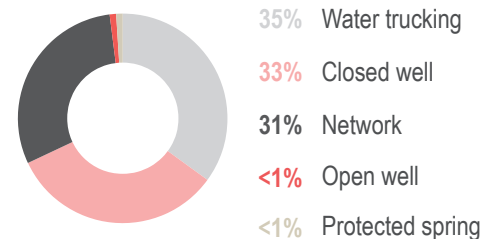
706 communities reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining **343** assessed communities were:^{6,7,9}



Communities that reported insufficient amounts of water to meet household needs:¹¹



Primary drinking water source reported:⁷



Primary method of garbage disposal reported:^{6,7}



Northwest Syria, December 2018

HEALTH

215/1,050 Communities reported that no assessed medical items were available in their community.¹⁴

139/1,050 Communities reported that the majority of women did not give birth in a formal health facility.

5/600 Communities reported that some individuals had been diagnosed with SAM (Severe Acute Malnutrition).¹⁵

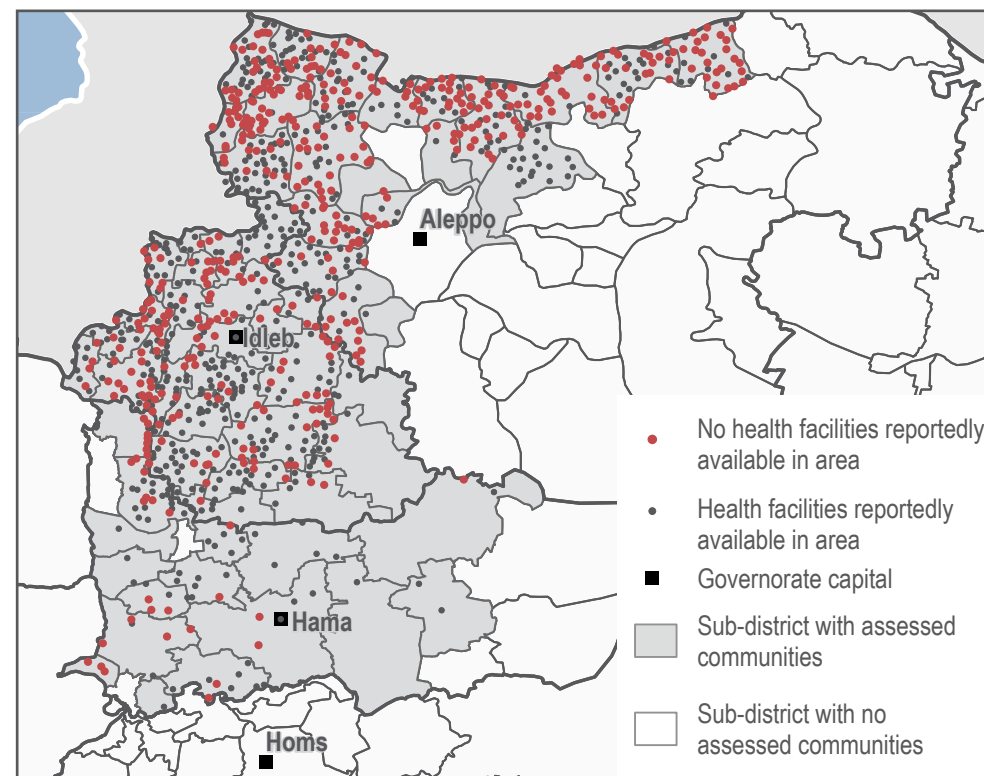
281 communities reported that residents experienced no barriers to accessing healthcare services. The most commonly reported barriers in the remaining **769 assessed communities** were:^{6,7,9}



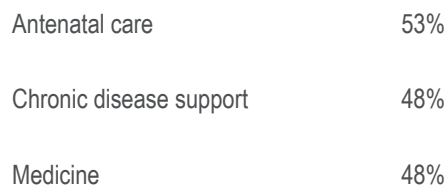
941 communities reported that residents were not using coping strategies to deal with a lack of medical services and items. The coping strategies used in the remaining **106 communities** were:^{6,7,9}



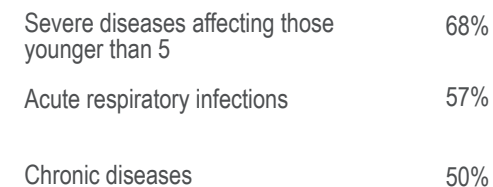
Presence of health facilities in assessed communities:



Top 3 most needed healthcare services reported:^{6,7}



Top 3 most common health problems reported:^{6,7}



Northwest Syria, December 2018

SHELTER AND NFI

5,620 SYP Regional average monthly reported rent price in SYP across assessed communities.¹

5,210 SYP Northern Syria average monthly reported rent price in SYP across assessed communities.^{1,16}

Most commonly reported shelter type for PCP households:⁷



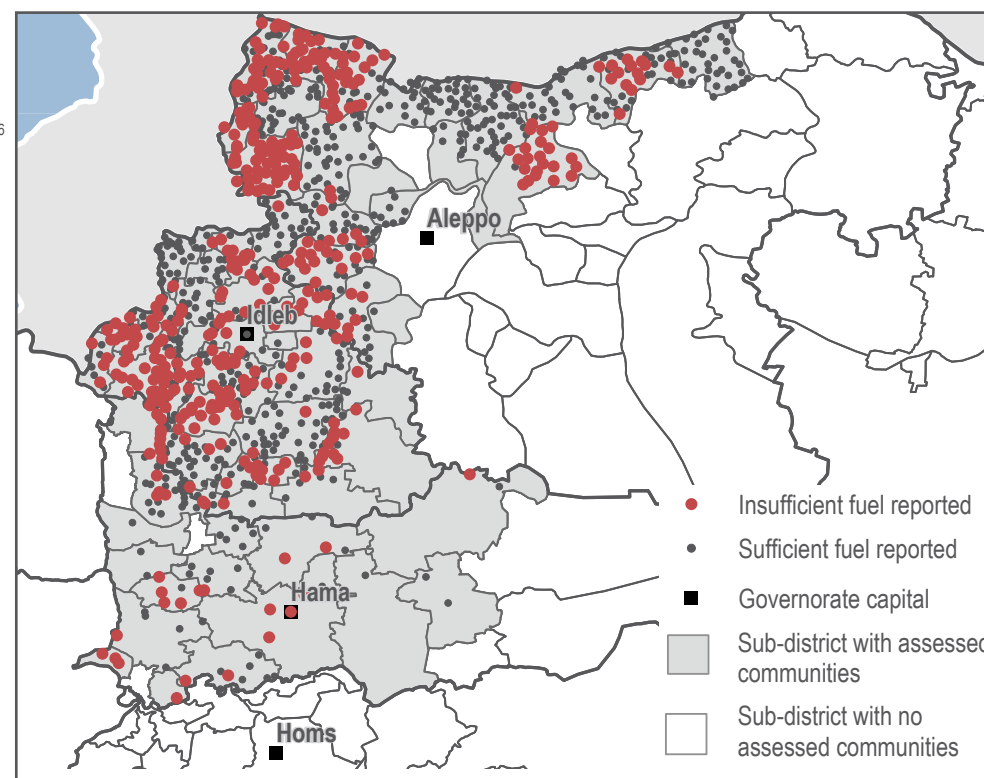
Most commonly reported shelter type for IDP households:⁷



Reported fuel prices (in SYP):^{1,2}

Fuel type (1L):	Regional average price in December:	One month change:	Six month change:
GoS petrol	400	-5%	0%
GoS diesel	375	0%	+5%
Manually refined petrol	270	0%	+8%
Manually refined diesel	235	-2%	+21%
Cooking fuel	6,875	+2%	+10%

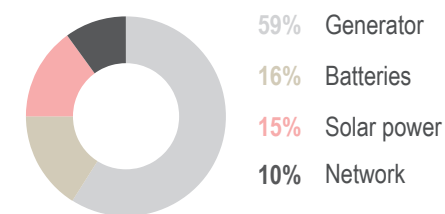
Communities that reported insufficient amounts of fuel to meet household needs:¹¹



637 communities reported no lack of fuel. Most common strategies to cope with lack of fuel in the remaining **413** assessed communities:^{6,7,9}

Burning plastics	59%
Cutting trees to burn	53%
Burning productive assets	48%
Burning furniture not in use	32%
Burning clothes	22%

Primary source of electricity reported:⁷



METHODOLOGY

HSOS data collection is conducted through an enumerator network in accessible locations throughout Idlib, Aleppo, Hama, Homs, Deir-ez-Zor, Ar-Raqqa, and Al-Hasakeh governorates. REACH enumerators are based inside Syria and interview Key Informants (KIs) directly in the community about which they are reporting. Where access and security constraints renders direct data collection unfeasible, some KI interviews are conducted remotely through participants identified in camps and settlements in neighbouring countries by REACH field teams. Participants contact multiple KIs in their community in Syria to collect information about their community. KIs are asked to report at the community level.

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 disagree on a certain piece of information, enumerators triangulate the data with secondary sources or select the response provided by the KI with the more relevant sector-specific background. For each question asked, confidence levels are 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 are triangulated through secondary sources, including news monitoring and humanitarian reports. Where necessary, follow-up is conducted with enumerators and participants. Findings are indicative rather than representative, and should not be generalised across the region.

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. You can contact us directly at: geneva@reach-initiative.org and follow us on Twitter: [@REACH_info](https://twitter.com/REACH_info).

ENDNOTES

KEYEVENTS AND DEVELOPMENTS

- ^a Ibrahim and Edelman (26 February 2018). Turkish-backed offensive on Afrin leaves 50,000 students out of school. Retrieved from <https://syriadirect.org>.
- ^b World Health Organisation (1 March 2018). Health Cluster Weekly Situation Report: Whole of Syria, Week 9 (23 February - 1 March 2018). Retrieved from <https://reliefweb.int>.
- ^c UN High Commissioner for Refugees. (31. August 2018). Cross-Border Humanitarian Response Fact Sheet - Northwest Syria - August 2018. Retrieved from <https://reliefweb.int>.
- ^d France 24 (17 September 2018). Russia and Turkey agree to demilitarised zone around Syria's Idlib. Retrieved from <https://www.france24.com>.
- ^e Union of Medical Care and Relief Organizations. (27 December 2018). Record Rainfall Devastates IDP Camps in Northern Syria. Retrieved from <https://reliefweb.int>.
- ^f CCCM ISIMM list. (November 2018). CCCM cluster IDP sites integrated monitoring matrix isimm November 2018. Retrieved from <https://www.humanitarianresponse.info>
- ^g Syrian Network for Human Rights. (1 January 2019). Documenting the Death of 6,964 Civilians in Syria in 2018. Retrieved from <https://reliefweb.int>.
- ^h World Food Programme. (31 December 2018). WFP Syria Situation Report #12, December 2018. Retrieved from <https://reliefweb.int>

MAIN TEXT

- ¹ 1 USD = 434 SYP (UN operational rates of exchange as of 1 December 2018).
- ² 18 items comprise the Survival Minimum Expenditure Basket (SMEB), which represents the minimum culturally adjusted items required to support a 6-person household for a month. SMEB items: Bread, bulgur, chicken, eggs, fresh vegetables, ghee/vegetable oil, red lentils, rice, salt, sugar, tomato paste, bathing soap, laundry/dish soap, sanitary pads, toothpaste, cooking fuel, water trucking, smartphone data, float (other costs).
- ³ 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 region.

⁴ All data presented in this product was collected, triangulated and verified based on submissions from the REACH network following the HSOS methodology. Please note that due to differences in methodology and coverage, the population and movement figures presented herein may differ from other sources. In particular, discrepancies with other available data may be the result of: differences in definitions of population sub-groups; differences in KI profiles interviewed; differences in assessed coverage dates; differences in geographic scope of assessed communities (i.e. included/excluded nearby camps and sites reported on at the community-level); and differences in overall coverage. In addition, the data herein does not claim to be comprehensive on displacements and spontaneous returns in northwest Syria, and should only be taken as indicative of the region as a whole. For more detailed information on displacements and spontaneous returns in opposition-held territories of northwest Syria, please refer to the CCCM Cluster/REACH IDP Situation Monitoring Initiative, the recent output of which is available in the forthcoming CCCM/REACH, ISMI Monthly Displacement Summary, December 2018.

⁵ Spontaneous returns refers to IDPs or refugees who return to their community of origin that they left due to conflict but not necessarily to their places of habitual residence (their former homes); who intend to remain in the community for an undetermined period; and who do not meet the IASC framework on durable solutions (IASC framework includes “not necessarily voluntary, safe or sustainable” elements).

⁶ Assessed using select multiple questions.

⁷ By percentage of communities reporting.

⁸ The definition of resident (pre-conflict) population (PCP), was ‘Individuals or groups of people who currently reside in their communities of origin, or communities of permanent residence prior to the Syrian conflict. This includes populations that were never displaced as well as previously displaced populations that have returned to their communities of origin’.

⁹ Not all surveys have answers for every question, in these scenarios the KI or participant will input no answer. When the dataset has no answer for a particular question the reported number of assessed communities will not add up to total number of communities assessed and percentages will be calculated based on submitted responses.

¹⁰ Extreme food-based strategies: eating food waste; eating non-edible plants and spending days without eating.

¹¹ Based on KI perception of sufficiency.

¹² Bread, rice, lentils, sugar, and cooking oil are considered core food items used in food baskets across Syria. For further information on all SMEB items please see the [Syria Market Monitoring report](#).

¹³ Reported numbers indicate the number of communities with functioning primary and secondary education facilities during the data collection period. It is important to note that simply having a functioning facility is not indicative of students being able to attend said facility. In addition, in some cases KIs reported that children attend schools in a neighbouring community.

¹⁴ Assessed HSOS medical items; anti-anxiety medication, contraception, clean bandages, blood transfusion bags, diabetes medicine, anaesthetics, blood pressure medicine, antibiotics, burn treatment.

¹⁵ This information was derived from medical professionals (KIs). The number of total communities refers to all communities that had a KI as medical professional available.

¹⁶ Includes HSOS data for Idlib, Aleppo, Hama, Homs, Deir-ez-Zor, Ar-Raqqa and Al-Hasakeh governorates.