

# Comparative analysis of besieged areas and communities of concern

## Case Study: Rural Damascus

Image © UN News



**REACH Area of Origin data**

January 2016

# Introduction

- This presentation **explores specific vulnerabilities of communities experiencing limited freedom of movement** based on data collected in December 2015
- **This study compares humanitarian needs** between communities in Rural Damascus.

For the purpose of this analysis, communities are divided into 3 groups:

1. **Besieged communities**: those besieged at the time of data collection\*
2. **Accessible communities**: those regularly accessible by aid actors
3. **Communities of concern**: those with high levels of conflict/ close to frontlines/ surrounded by military/ or not regularly accessed by aid actors

\* Modamiyat El Sham, Madaya & Bqine, recently classified as besieged were included within the category 'communities of concern' at the time of the assessment

# Sectors covered

**This study covers the following humanitarian sectors:**

- Food
- Livelihoods
- Non-Food-Items
- Health
- Displacement / Freedom of movement

# Methodology

- This study uses data from REACH's **Humanitarian Situation Overview in Syria (HSOS) Program**
- Using the **Area of Origin methodology**, multi-sector data is collected on a monthly basis to understand the humanitarian situation inside Syria
- Data is collected through **community level questionnaires**. These are completed with the aid of refugee **Participants** who contact **Key Informants** that remain in their communities of origin
- Information was collected from **Key Informants in the assessed communities during December 2015**.
- **Between 1 and 6 KIs contributed information for each of the communities selected for this analysis – 101 in total**

# Key Informant types contributing information for each location

Analysis category	Key Informant types that contributed information to the questionnaire	Minimum total KI types
Besieged	Students	1
Besieged	Teachers Shop owners business men Activists group	3
Besieged	Activists group	1
Besieged	Activists group Host populations Teachers Nurses hospital	4
Besieged	Local Council Activists group Nurses hospital Teachers IDPs	5
Besieged	IDPs	1
Besieged	Activists group Doctors hospital Teachers Shop owners business men Midwives non-hospital	5
Besieged	Local Council Teachers Focal point pump station employee Doctors hospital Trader Middlemen	5
Besieged	Host populations	1
Besieged	Activists group	1
Besieged	Trader Middlemen Activists group Shop owners business men Midwives hospital IDPs	5
Area of Concern	Activists group	1
Area of Concern	Teachers	1
Area of Concern	Third sector employee Trader Middlemen	2
Area of Concern	Midwives hospital	1
Area of Concern	Students	1
Area of Concern	Activists group	1
Area of Concern	Local Council Activists group Nurses hospital Teachers	4
Area of Concern	Activists group	1
Area of Concern	Teachers	1
Area of Concern	Host populations School Managers Local Relief Committees Shop owners business men Doctors hospital Teachers	6
Area of Concern	Nurses hospital Shop owners business men	2
Area of Concern	Activists group Third sector employee	2
Area of Concern	Local Council Doctors non-hospital	2
Area of Concern	Local Council Trader Middlemen Teachers Doctors hospital Self employed	5
Area of Concern	Land Owner Host populations	2
Area of Concern	Activists group	1
Area of Concern	Local Council Nurses hospital	2
Area of Concern	Farmers	1
Area of Concern	Doctors hospital Teachers Pharmacy staff	3
Area of Concern	Activists group	1
Non-besieged	Third sector employee Shop owners business men Nurses hospital	3
Non-besieged	Third sector employee Teachers Transportation employees Shop owners business men Doctors hospital Nurses hospital	6
Non-besieged	Activists group Third sector employee	2
Non-besieged	Trader Middlemen	1
Non-besieged	Teachers Nurses hospital	2
Non-besieged	Host populations	1
Non-besieged	Host populations Shop owners business men Teachers Doctors hospital Trader Middlemen Teachers	6
Non-besieged	Trader Middlemen Self employed Host populations	3
Non-besieged	Self employed Activists group	2
Non-besieged	Third sector employee Host populations	2
Non-besieged	Shop owners business men	1

# Coverage

Communities were selected based on the following criteria:

- Within Rural Damascus Governorate
  - Status: Besieged / Non-besieged / Of concern\*
  - Where data was available at the time of data collection
- 
- Rural Damascus was selected as a case study due to the extent of coverage which allows for comprehensive analysis. In further rounds of comparisons, where coverage permits, further analysis will be conducted

Modamiyat El Sham, Madaya & Bqine were classified as besieged in January, after the December data collection of this assessment, and thus were included within the category 'communities of concern'

## Assessed areas include **11 besieged communities**:

<u>District</u>	<u>Sub-district</u>	<u>Community</u>
Az Zabdani	Az Zabdani	Az Zabdani
Darayya	Markaz Darayya	Darayya
Rural Damascus	Arbin	Arbin
Rural Damascus	Arbin	Zamalka
Rural Damascus	Kafr Batna	Ein Terma
Rural Damascus	Kafr Batna	Jisrein
Rural Damascus	Kafr Batna	Kafr Batna
Rural Damascus	Kafr Batna	Saqba
Rural Damascus	Maliha	Zabadin
Duma	Duma	Duma
Duma	Harasta	Harasta

Modamiyat El Sham, Madaya & Bqine were classified as besieged in January, after the December data collection of this assessment, and thus were included within the category 'communities of concern'

## 11 accessible communities:

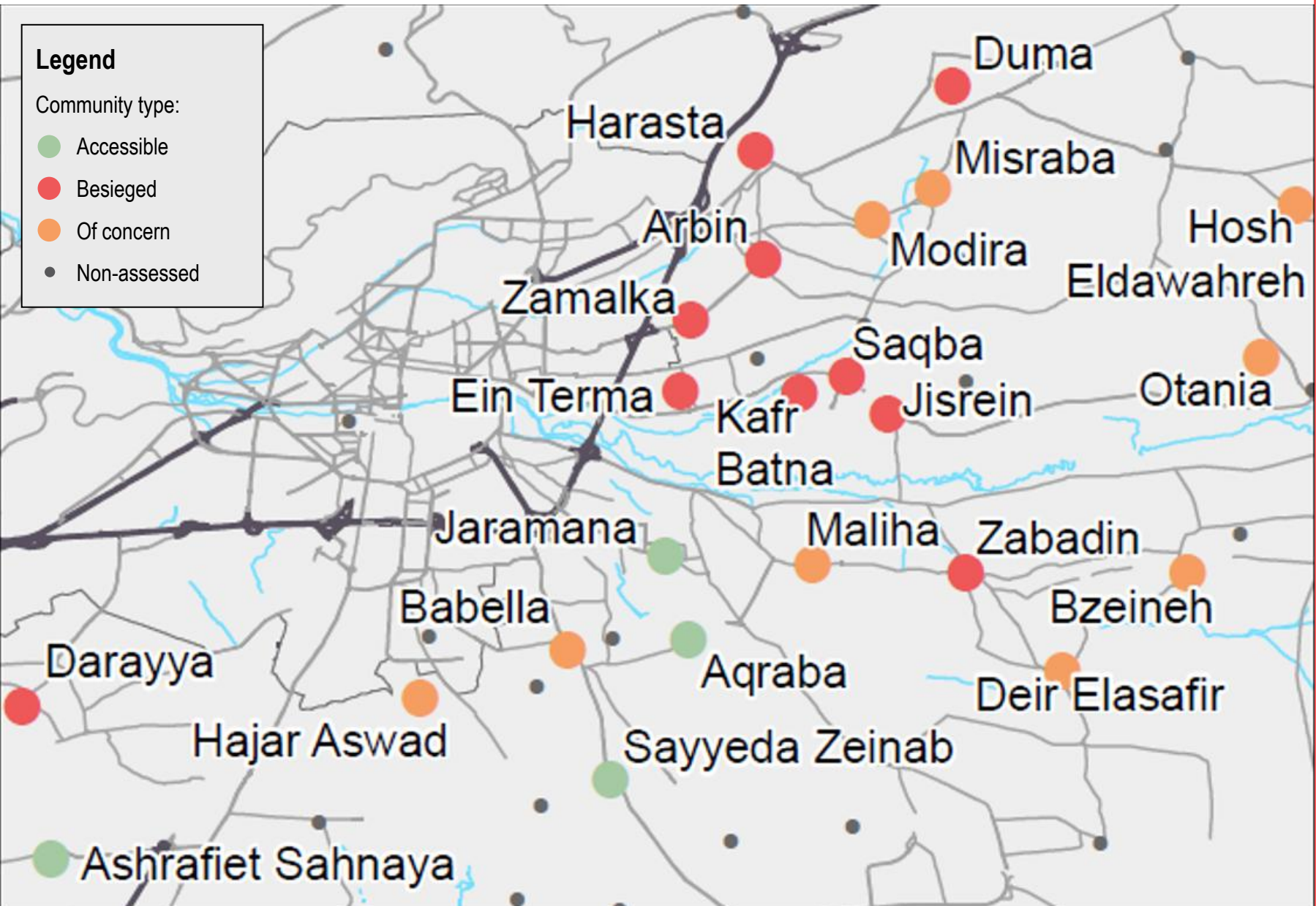
<u>District</u>	<u>Sub-district</u>	<u>Community</u>
An Nabk	Deir Attiyeh	Hmeireh
Darayya	Sahnaya	Ashrafiet Sahnaya
Darayya	Sahnaya	Sahnaya
Qatana	Sa'sa'	Deir Maker
Qatana	Sa'sa'	Dinaji
Qatana	Sa'sa'	Sa'sa'
Rural Damascus	Babella	Aqraba
Rural Damascus	Kisweh	Deir Ali
Rural Damascus	Jaramana	Jaramana
Rural Damascus	Kisweh	Kisweh
Rural Damascus	Babella	Sayyeda Zeinab

## 20 communities in of concern:

<u>District</u>	<u>Sub-district</u>	<u>Community</u>
Al Qutayfah	Jirud	Jirud
Az Zabdani	Madaya	Bqine
Az Zabdani	Madaya	Madaya
Darayya	Hajar Aswad	Hajar Aswad
Darayya	Markaz Darayya	Madamiyet Elsham
Duma	Duma	Adra
Duma	Nashabiyeh	Bzeineh
Duma	Ghizlaniyyeh	Ghizlaniyyeh
Duma	Duma	Hosh Eldawahreh
Duma	Harasta	Misraba
Duma	Harasta	Modira
Duma	Nashabiyeh	Nashabiyeh
Duma	Nashabiyeh	Otania
Qatana	Bait Jan	Bait Jan
Rural Damascus	Babella	Babella
Rural Damascus	Maliha	Deir Elasafir
Rural Damascus	Qudsiya	Hama
Rural Damascus	Maliha	Maliha
Rural Damascus	Qudsiya	Qudsiya
Rural Damascus	Kisweh	Zakyeh

Modamiyat El Sham, Madaya & Bqine were classified as besieged in January, after the December data collection of this assessment, and thus were included within the category 'communities of concern'

# Location of assessed communities



# Sectoral Analysis: Food

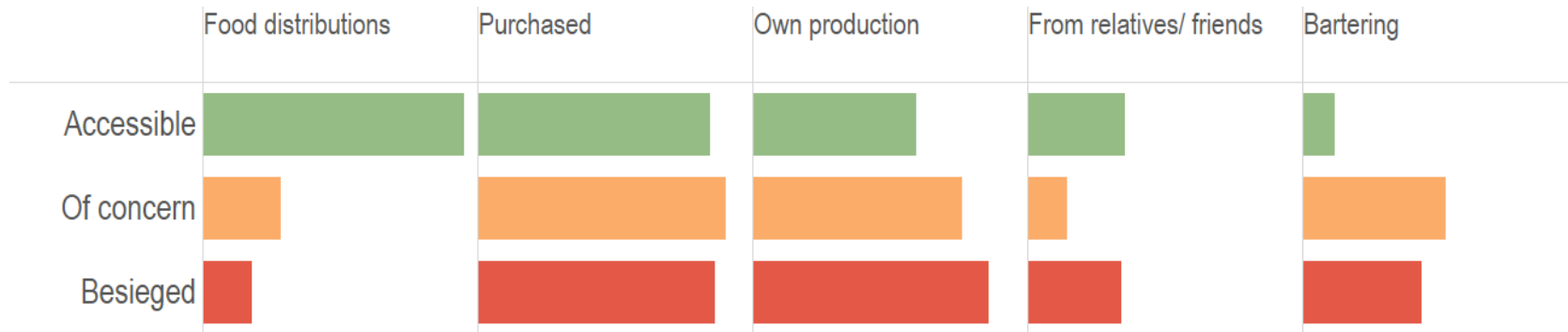
- Sources of food
- Availability of food items
- Prices of core food items
- Challenges to accessing food
- *Case study: bread*





# Sources of food

*How did people in your village obtain food during the previous month? (select all that apply)*

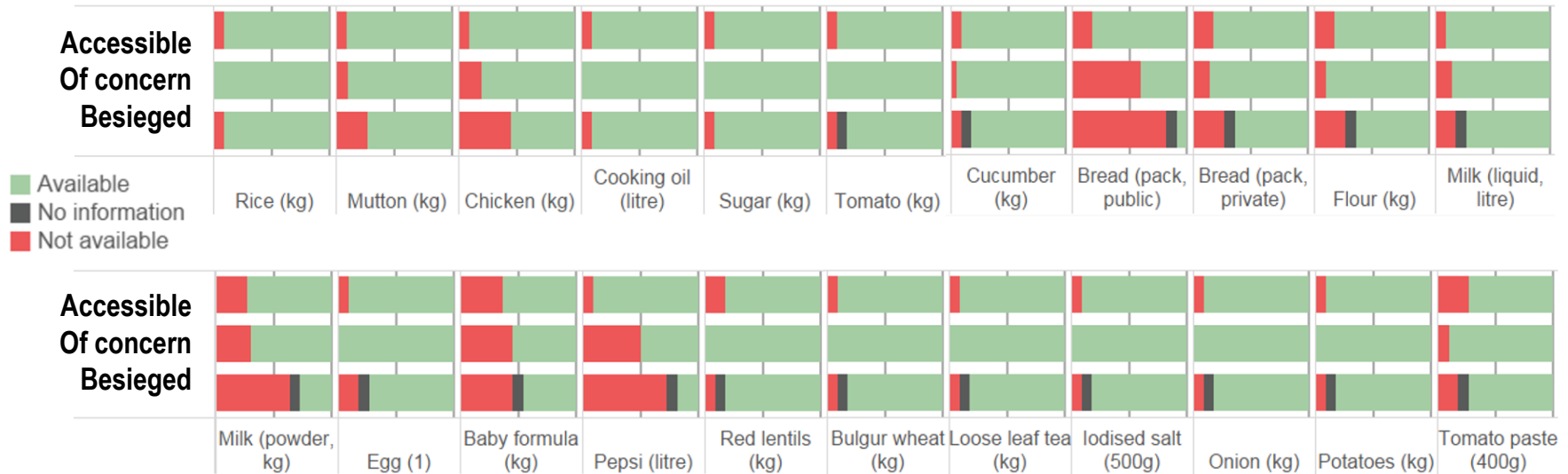


- People in **besieged communities** or **communities of concern** were **significantly less likely to obtain food from distributions**: only 2 of the 11 besieged communities reported obtaining food through distributions, compared to 9 of 11 accessible communities and 6 of 20 communities of concern.
- **Bartering and home production were more common in besieged areas and communities of concern** than in accessible communities, likely to compensate for a lack of availability through other means.



# Availability of food

Were the following items available in your village during the previous month?

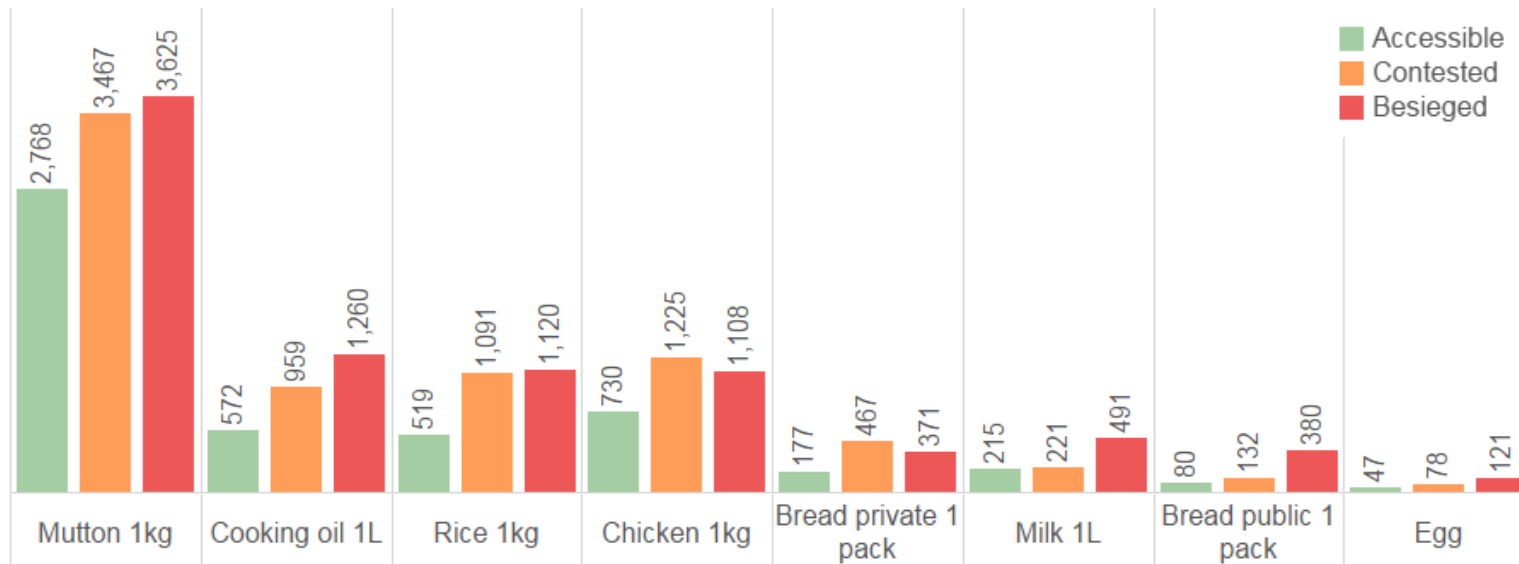


- **Most food items assessed were less likely to be available in besieged communities** in comparison to accessible communities and areas of concern
- Notably, **chicken was reportedly unavailable in 5 of 11 of besieged communities** compared to only 1 of 11 accessible communities and 4 of 20 communities of concern.
- Powdered milk, public bread and pepsi were unavailable in more than half of besieged communities.
- **Some food items were generally available across all types of community:** rice, cooking oil, sugar, tomatoes, cucumbers, bulgur wheat, tea, salt, onions and potatoes.



# Average prices (SYP) of core food items

*What was the average price of the following items during the previous month?*

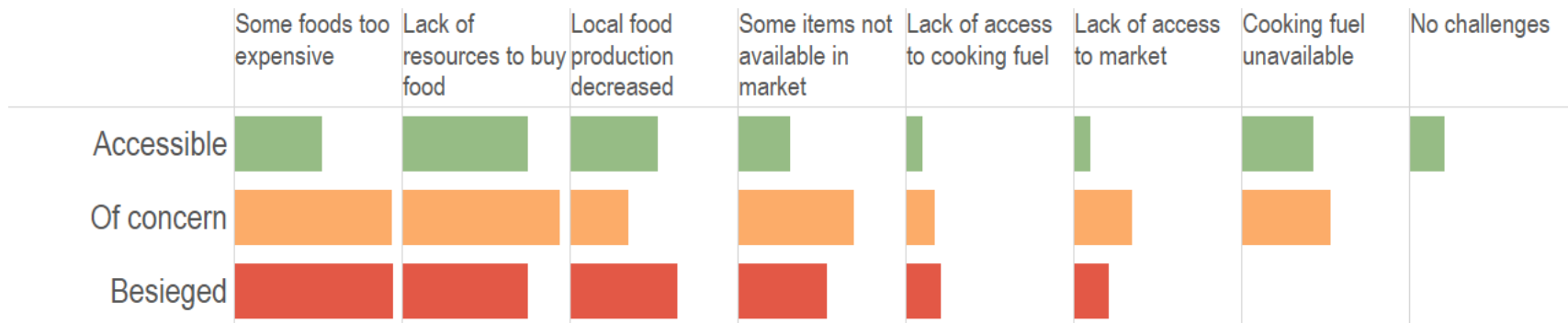


- **Average prices of eight core food items were significantly higher in besieged communities.** With the exception of chicken and private bread, prices for all items were higher in besieged communities than communities of concern.
- **The average price of liquid milk in besieged locations was more than double that observed elsewhere** (Besieged = 491 SYP, Contested = 215 SYP, Accessible = 221 SYP)
- **Prices of all core food items in communities of concern were higher than prices in accessible areas.** Mutton, rice, chicken and private bread were as, or more expensive than in besieged locations, whereas cooking oil, milk, public bread and eggs were cheaper



# Challenges to accessing food

*What were the main reasons why people in your village had difficulties accessing enough food during the previous month? (select all that apply)*



- **All assessed besieged communities and areas of concern reported difficulties obtaining food**, compared to 4 of 20 accessible communities.
- **The prohibitively expensive cost of food was the most commonly reported challenge across besieged locations** (9 of 11 communities), followed by a lack of resources to buy available foods (7 of 11).
- **Communities of concern appeared as vulnerable as besieged communities:** similar proportions reported the expense of food and lack of access to cooking fuel as major challenges.
- Accessible communities were less likely than besieged areas and communities of concern to report food being prohibitively expensive, lack of available food in markets, lack of access to cooking fuel, and a lack of access to markets.

# Case study: bread

- **In besieged communities, bread was more likely to be home made** (6 of 11 communities assessed). This was the case in a smaller proportion of communities of concern (6 of 20), and in none of the accessible communities (0 of 11).
- **In accessible communities, public bakeries were the most common source of bread.** This was true in almost half (5 of 11) accessible communities, compared to only 4 of 20 locations of concern, and 0 of 11 besieged communities.
- However, **people in besieged and accessible communities relied equally on shops and private bakeries**, more commonly than in communities of concern.
- **Public bakeries were less likely to be present and fully functioning in besieged locations.** Public bakeries existed in less than half (5 of 11) besieged communities. In three of these locations, bakeries produced bread for less than 21 days per month.
- **Public bakeries were present in the majority (15 of 20) communities of concern**, though they were only able to provide bread for more than 10 days per month in 6 locations. In contrast, public bakeries were present in 8 of 11 of assessed accessible locations, and were able to provide bread daily in 7 locations.





# Case study: bread

- **Private bakeries were more likely to be present and fully functioning in accessible locations.** They were present in 9 of 11 of assessed accessible communities and provided bread daily in the majority (8 of 11) of these.
- In contrast, **daily bread production was reported in only 1 of 20 communities of concern and in none of the 11 assessed besieged communities.** There were no functioning private bakeries at all in 5 of 20 communities of concern, and in 3 of 11 besieged communities.
- **Overall, no besieged community reported daily access to bread,** compared to 5 of 11 accessible communities and 3 of 20 communities of concern.
- **The most commonly reported challenges across besieged communities were:**
  - **Expense or lack of access to flour** (reported in 8 of 11 besieged communities compared to 1 of 11 accessible communities and 10 of 20 communities of concern)
  - **Lack of availability of flour** (reported in 6 of 11 besieged communities compared to 4 of 11 accessible communities and 7 of 20 communities of concern)
  - **Lack of electricity/fuel, a lack of availability of wheat and the expense or lack of availability of yeast** were also commonly reported issues

# Sectoral Analysis: Livelihoods

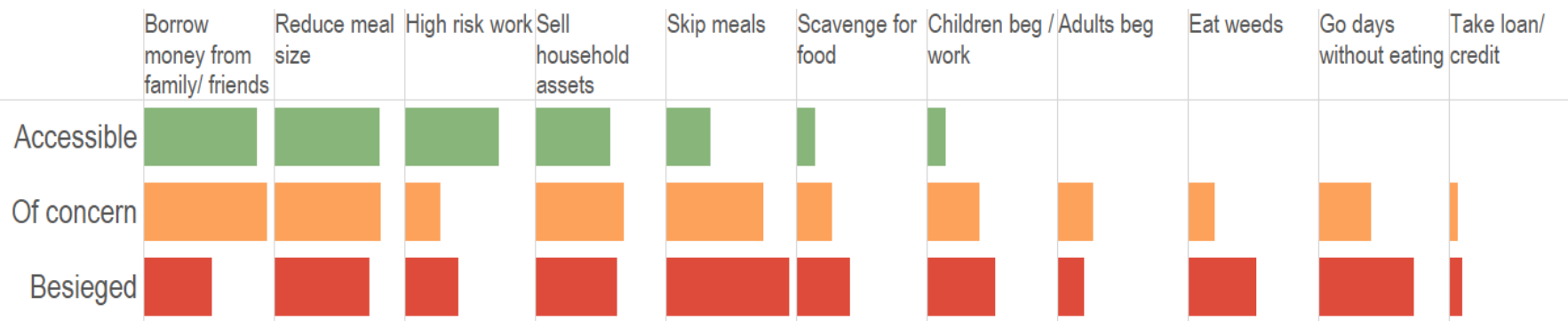
- Most common coping strategies used to deal with a lack of income / resources





# Coping strategies used to deal with lack of income / resources

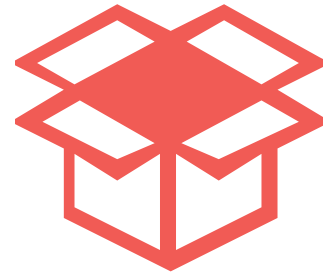
*Which of the following coping strategies did people in your village use to cope with a lack of income / resources during the previous month?*



- **Extreme coping strategies to deal with a lack of income and resources were more commonly used in besieged communities.** These include:
  - **Spending days without eating and skipping meals** were the most commonly reported strategies in besieged communities. Spending days without food was not reported at all in accessible communities.
  - **Eating weeds:** used in 5 of 11 of besieged communities compared to 3 of 20 areas of concern and no accessible communities.
  - **Looking for food in garbage; skipping meals; and sending children being to work or beg** were also more commonly reported in besieged communities. These coping strategies were all more likely to be reported in communities of concern than accessible communities.

# Sectoral Analysis: NFIs

- Availability of fuel sources
- Prices of fuel sources
- Most common source of electricity

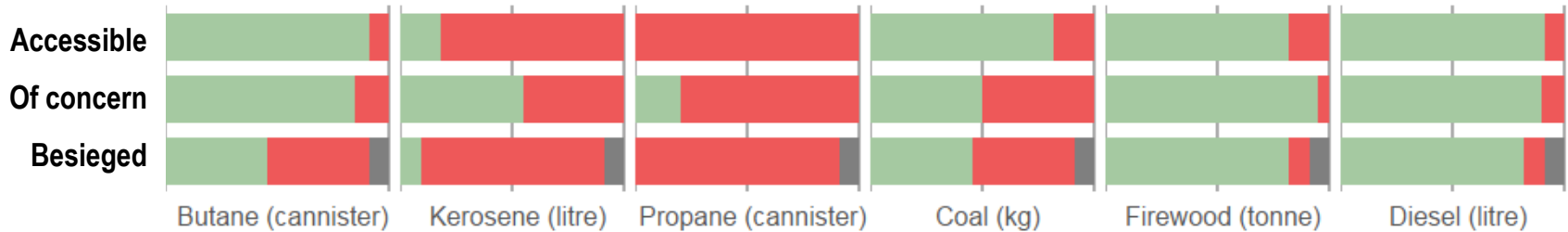




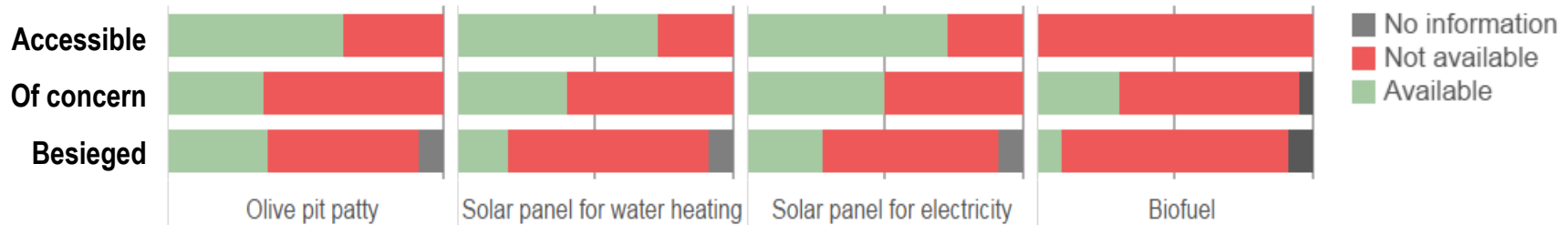
# Availability of fuel sources

*Which of the following items were available on village markets during the previous month?*

## Traditional fuel sources:



## Alternative fuel sources:



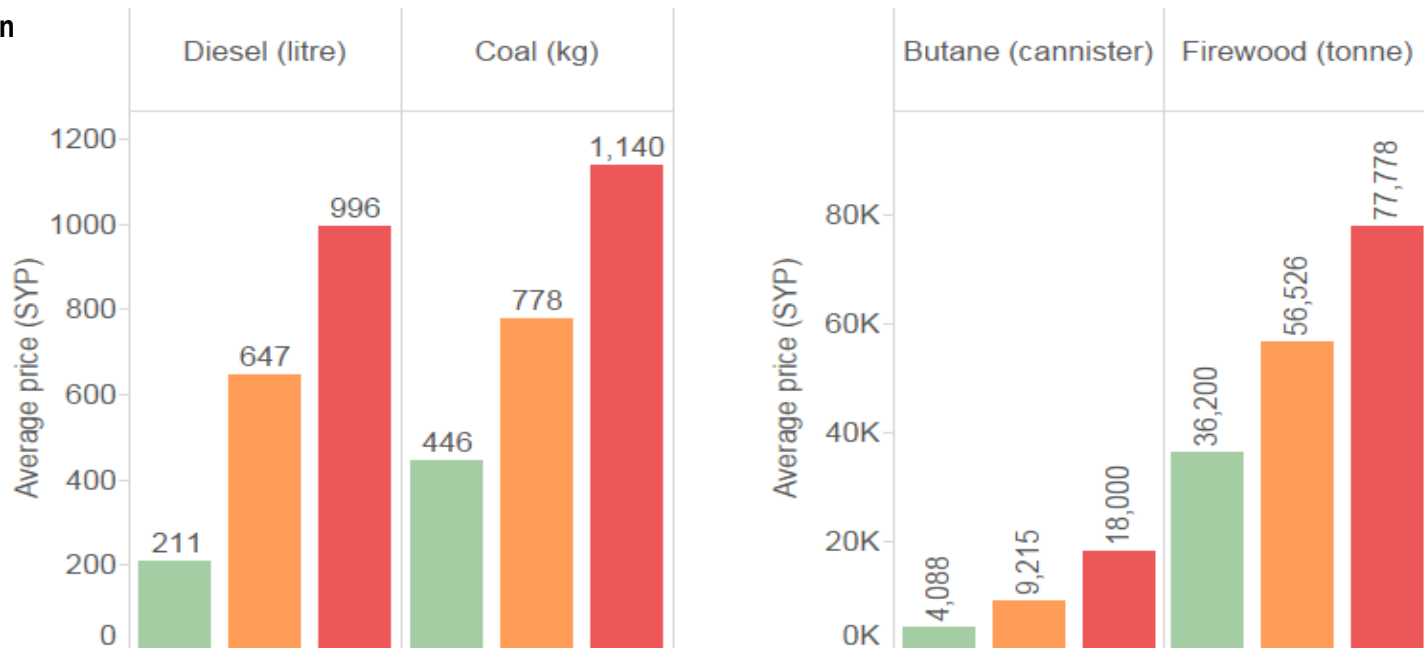
- **Diesel & firewood were the most accessible** fuel sources across all assessed communities.
- **Other traditional fuels were less available in besieged communities** (butane, kerosene, propane & coal).
- **Alternative fuels were significantly less commonly available in besieged communities** (eg. olive pit patties, and solar panels for water heating or electricity).
- In contrast, **biofuel was unavailable across all accessible communities**, but available in 1 of 11 besieged communities and 6 of 20 communities of concern.



# Average prices (SYP) of fuel sources

*What was the average price of the following items on village markets during the previous month?*

■ Accessible  
■ Of concern  
■ Besieged

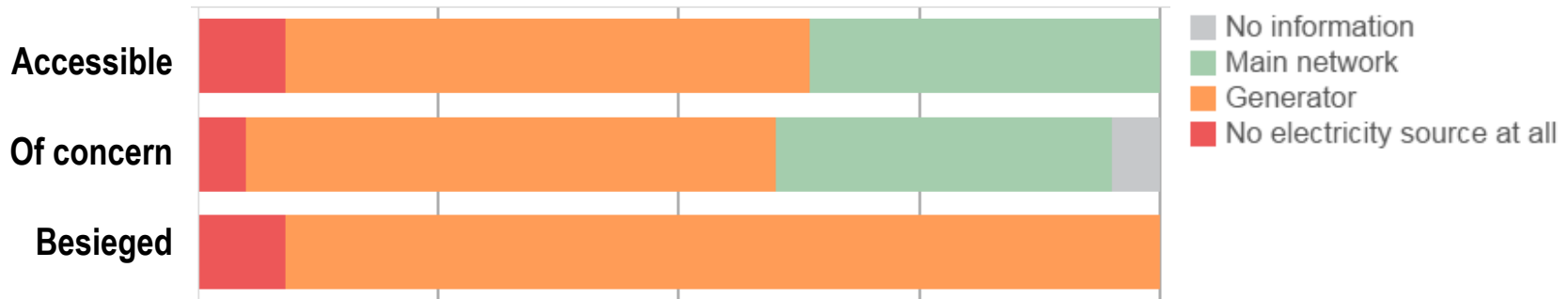


- **Average prices for firewood, coal, diesel and butane (the most commonly available fuel sources) were significantly higher in besieged locations compared to communities of concern and accessible locations.**
- Average prices in besieged locations were up to 372% higher than in accessible locations, while communities of concern were up to 207% higher.



# Main source of electricity

*What source of electricity was used by village population for the most hours during the previous month?*



- **Before the conflict, all assessed communities in Rural Damascus reportedly used the mains network as their primary source of electricity.**
- **None of the besieged communities assessed were still able to use the main network as their primary electricity source during the previous month.** In accessible communities and communities of concern, similar proportions still reported good access to the main network (4 of 11 accessible communities and 7 of 20 contested communities).
- **Accessible and besieged communities were equally likely to have no electricity source at all** (1 of 11 communities assessed in each location). Communities of concern were slightly less likely to have no electricity source (1 of 20 communities).

# Sectoral Analysis: Health

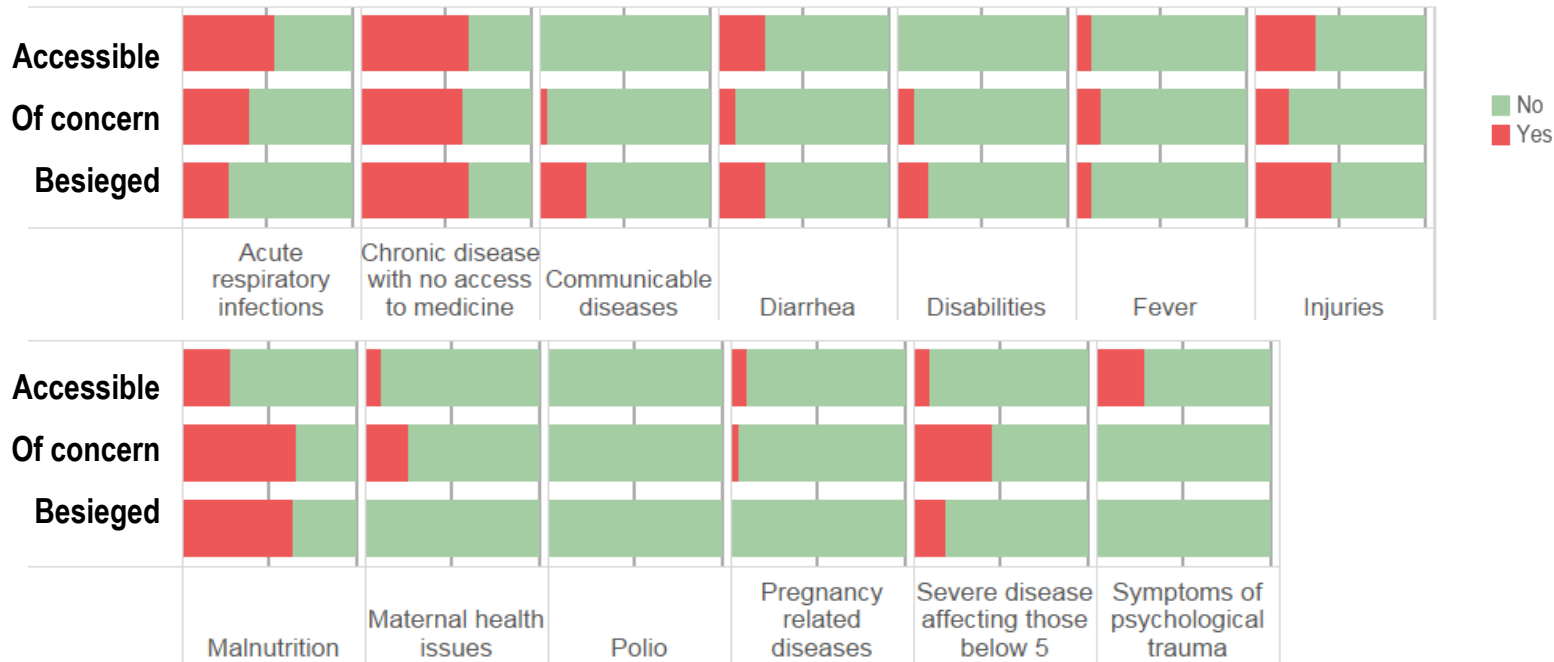


- Most common health problems: general population
- Most common health problems: children
- Availability of medical items
- Coping strategies used to deal with a lack of medical items / services
- Most common place for women to give birth in the community



# Most common health problems

*What were the most common health problems reported by all people in your village during the previous month?*

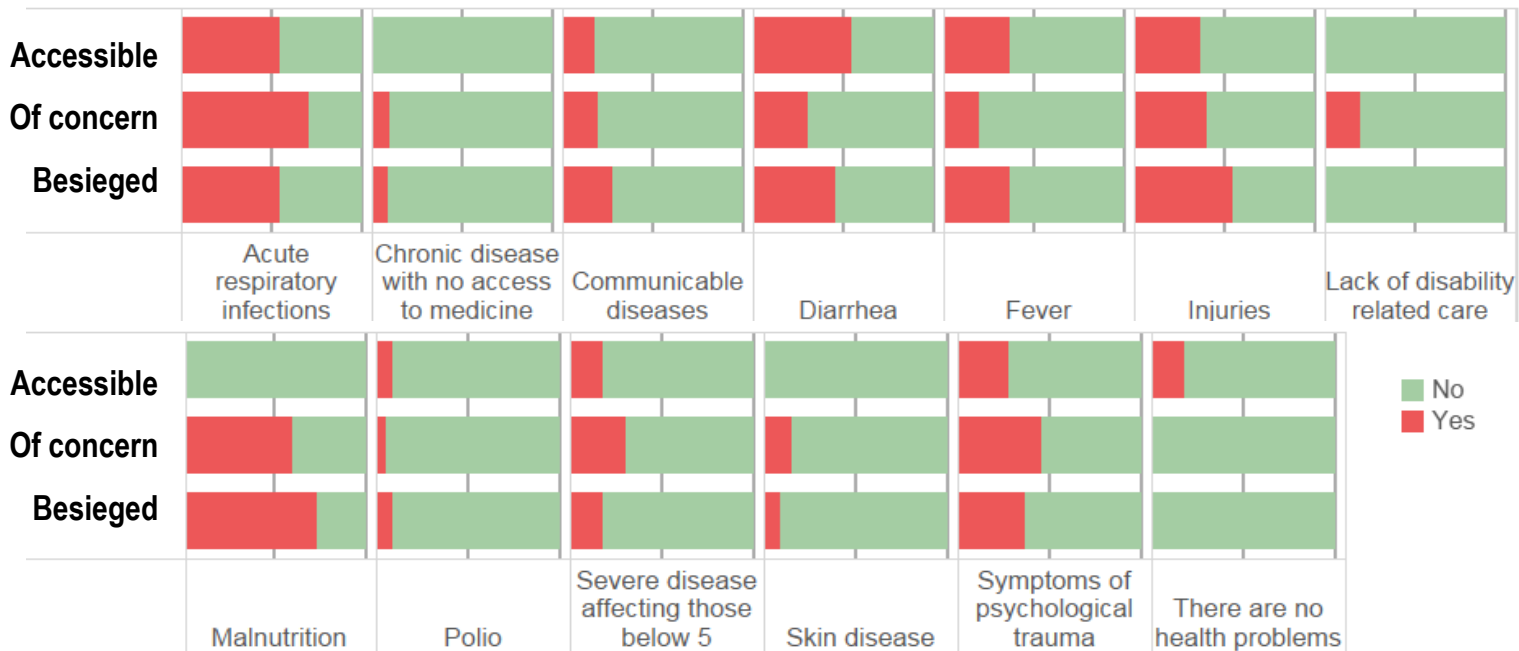


- **Besieged areas & communities of concern more commonly reported malnutrition** as a common health problem. (7 of 11 besieged areas, and 13 of 20 communities of concern, compared to 3 of 11 accessible areas).
- **Besieged communities were more likely to report communicable diseases, disabilities and injuries** as common.
- Besieged communities were less likely to report maternal health issues, pregnancy related disease, symptoms of psychological trauma and acute respiratory infections as their most common health problems, perhaps due to the prevalence of malnutrition.



# Most common child health problems

*What were the most common health problems reported for children (17 years old or younger) in your village during the previous month?*

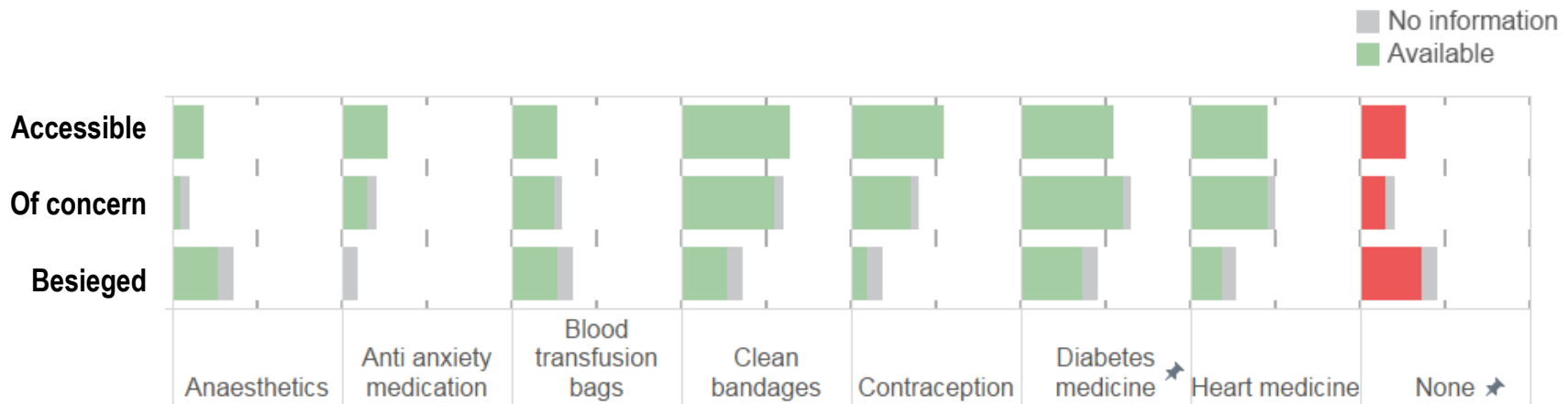


- **Across besieged communities, the most common problems reportedly faced by children are malnutrition, diarrhea, acute respiratory infections, fever, and injury**
- Malnutrition, injury & communicable disease were more commonly reported in besieged communities.
- **The prevalence of child malnutrition is markedly higher in besieged communities** (reported in 8 of 11 besieged areas), compared to 12 of 20 areas of concern, and in 0 of 11 accessible communities.



# Availability of medical items

Which of the following medical items were available in the community during the previous month?

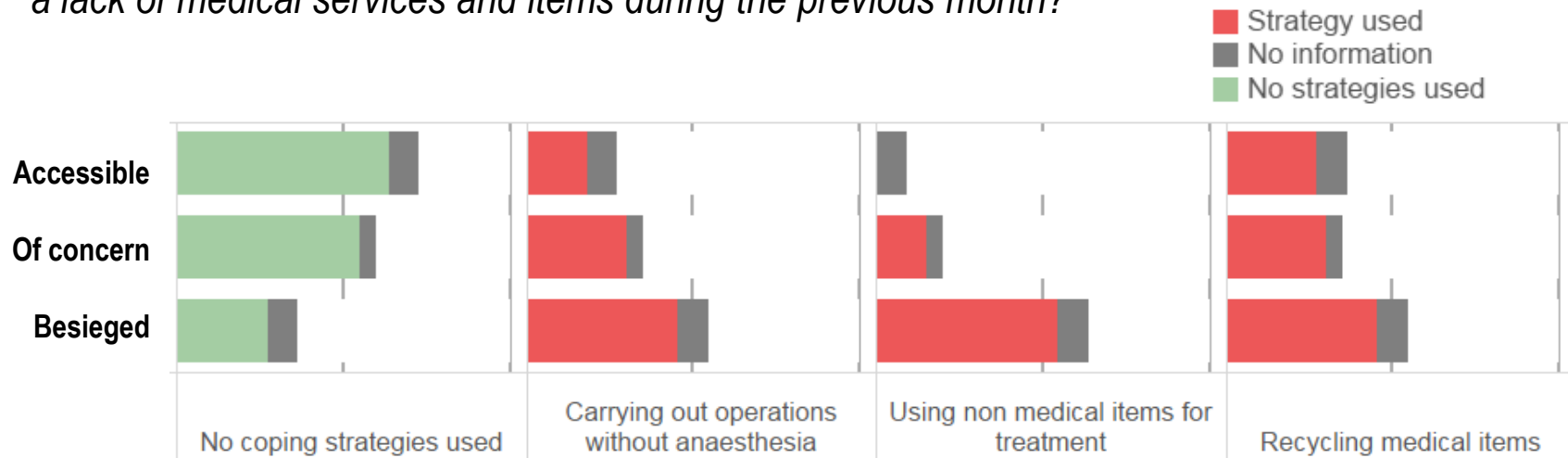


- **None of the assessed medical items were reportedly available in 4 of 11 besieged locations**, compared to 3 of 11 accessible locations and 3 of 20 communities of concern.
- **Anti-anxiety medication, clean bandages, contraception, diabetes medicine and heart medicine were less likely to be available in besieged communities than accessible communities or communities of concern.**
- However, **blood transfusion bags were equally likely to be available across all types of community, and anesthetics were more likely to be available in besieged communities** compared to accessible communities and communities of concern.

# Coping strategies used due to lack of medical items / services



*Which of the following coping strategies did people in your community use to cope with a lack of medical services and items during the previous month?*

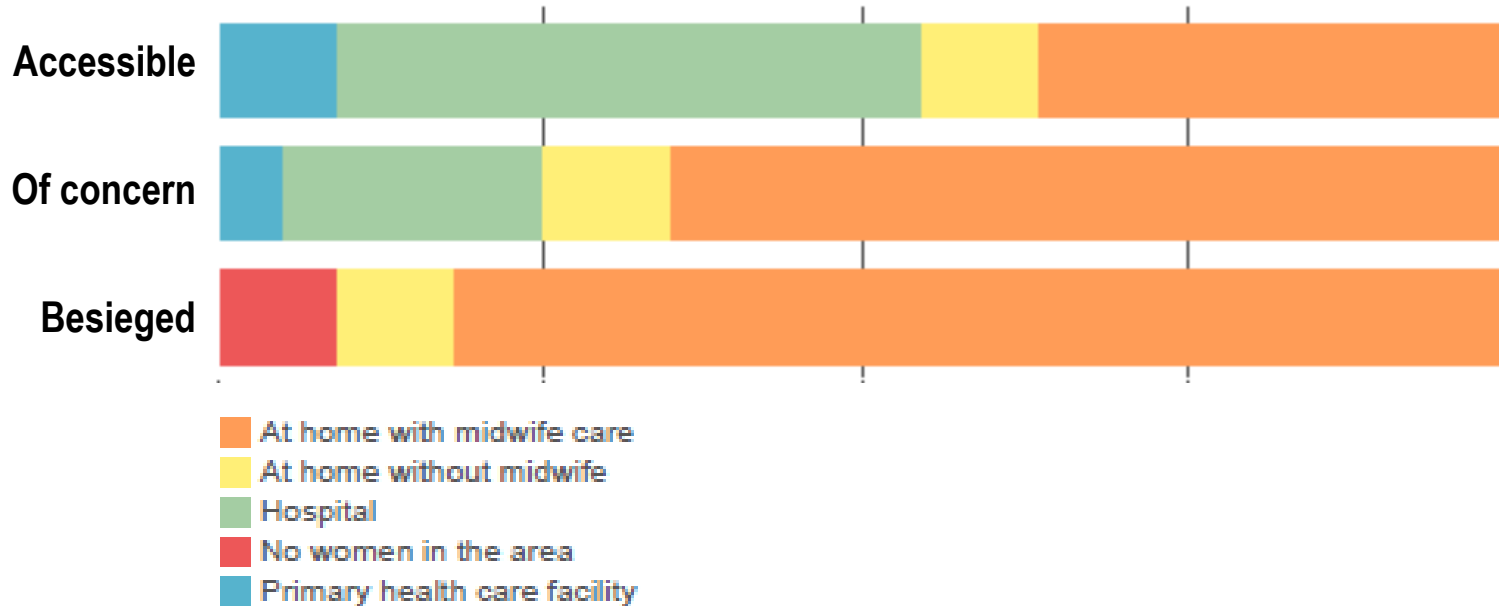


- **Besieged communities were overall more likely to report using coping strategies** to deal with a lack of medical items and services (7 of 11 communities, compared to 3 of 11 accessible communities and 8 of 20 communities of concern).
- **Almost half of besieged communities (5 of 11) reported operations being carried out without anaesthesia** and/or recycling medical items, compared to 2-3 of 11 accessible communities and 6 of 20 communities of concern.
- **Over half of besieged communities (6 of 11) reported using non-medical items for treatment**, compared to no accessible communities and 3 of 20 communities of concern.



# Most common place for women to give birth in the community

Where do the majority of women in your community deliver babies?



- In all besieged communities where women were present, births were most commonly at home, leading to higher risk of complication.
- No besieged community reported women giving birth in hospital, compared to 4 of 20 communities of concern and 5 of 11 accessible communities.

# Sectoral Analysis: Displacement / freedom of movement

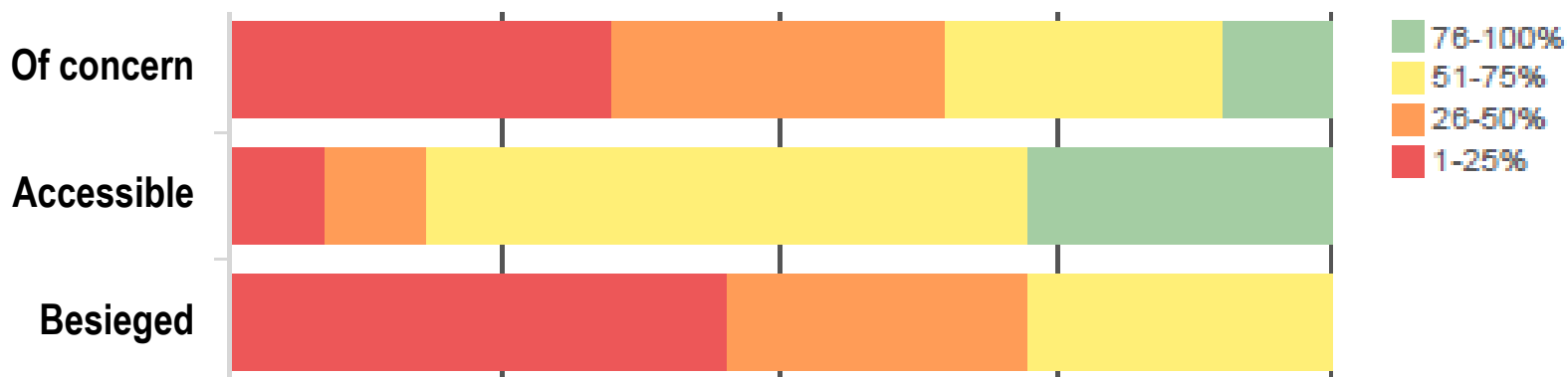
- Proportion of pre-conflict population remaining in community
- Members of population allowed to leave the community





# Proportion of pre-conflict population remaining in community

*What estimated % of your village Pre-conflict population remained on the last day of the previous month?*

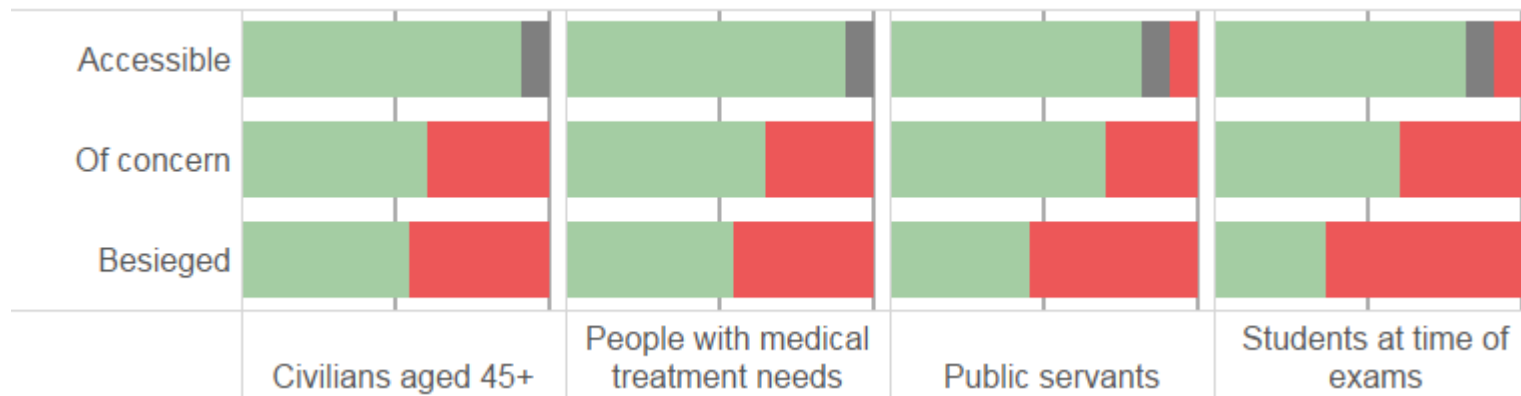


- **Overall, a much smaller proportion of the pre-conflict population remained in besieged and of concern communities.** 8 of 11 besieged communities reported that less than half of the population remained, compared to 12 of 20 communities of concern and just 2 of 11 accessible communities.
- **In all besieged communities assessed, under 75% of pre-conflict population remained.**



# Freedom of movement

*Which members of the community population were allowed to leave the community if they wished during the previous month?*



- **No one was reportedly allowed to leave the community in 5 of the 11 besieged locations.** This was also reported to be the case in 2 of 20 communities of concern, and only one accessible community
- All categories of people assessed were less likely to be allowed to leave besieged communities.

# Summary

## Besieged areas:

- Besieged areas have generally seen significant outward displacement, but **those people remaining represent a highly vulnerable group**
- People in besieged communities face severe challenges related to **restricted access for goods and people**
- In particular, lack of access to food and fuel is forcing people in besieged communities to resort to **increasingly severe coping strategies** that increase their vulnerability
- **Lack of access to food has led to multiple health concerns.** Reports of malnutrition are particularly high in besieged communities, especially among children. Communicable diseases are also more commonly reported in these areas, likely due to heightened vulnerability because of poor diet
- Lack of access to medical provision and drugs has led to an **increase in medical coping strategies, including operating without anaesthetic and recycling medication**

## Communities of concern:

- Communities of concern have also seen significant outward displacement, although in many cases, sizeable populations remain. Ongoing conflict hampers the delivery of goods and assistance to populations in communities of concern, **causing reduced access to basic goods and services, and increased prices**
- While access to food is generally better than in besieged areas, **high prices and lack of access to fuel and markets** are causing people to resort to **increasingly severe coping strategies to make ends meet**
- The types of coping strategies employed show that while people in communities of concern generally appear to have more resources than those in besieged communities, such **strategies are quickly becoming exhausted**. In communities of concern, barter was more commonly reported as a means of accessing food than in accessible or besieged communities. Higher proportions were also reported to be begging or selling assets.
- Reports of **malnutrition, psychological trauma and respiratory illness were particularly common** in communities of concern, as were medical-related coping strategies, leaving patients increasingly vulnerable

## Accessible communities:

- **Accessible communities have seen proportionally smaller outward displacement.** While their significant remaining populations enjoy higher levels of freedom of movement, they remain vulnerable following years of conflict
- Access to food was found to be better than in besieged areas or communities of concern. Despite this, the majority of accessible communities reported the use of coping strategies. Among them, **reports of high-risk work were particularly common** in accessible communities
- **No accessible communities reported malnutrition as a common health concern.** However, a significant proportions of these communities reported chronic disease and respiratory infection. **Diarrhoea, fever and injury were reportedly common among children**
- Accessible communities generally reported access to common medical items, with most reporting that **medical coping strategies were not used**

# Conclusion

- In many cases, **besieged communities and communities of concern exhibit similar characteristics**: populations in both these areas were found to have similar, acute vulnerabilities, although generally more severe in besieged areas
- While coping capacity remains low, conditions in accessible communities were found to be comparatively better across all assessed sectors
- **Besieged areas and communities of concern stand out particularly in relation to food insecurity, and fuel and medical shortages.**
- While both besieged and of concern communities recorded high rates of malnutrition among adults and children, **in besieged communities, food insecurity was more commonly related to a lack of availability** than a lack of access.
- **In areas of concern, a lack of access to available items was more commonly reported.** Barriers were more commonly related to high prices, limited resources and limited access to markets.
- At the time of assessment, people in communities of concern appeared to have comparatively more resources than those in besieged communities. However, **continued conflict is likely to exhaust their coping capacity, causing needs and conditions to increasingly resemble those in besieged areas.**