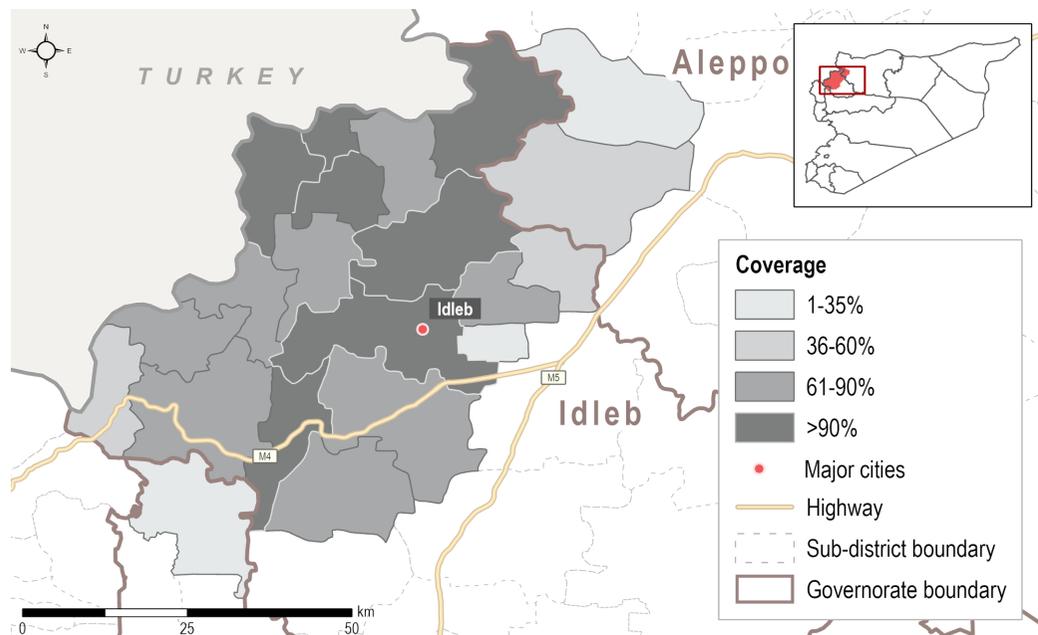


Introduction and Methodology

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, COVID-19 situation, and the security and protection situation in the Greater Idleb area in Northwest Syria (NWS). **Sector-specific indicator findings by location can be found on the [HSOS dashboard](#).**

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 (via phone). KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in **371 communities** across the greater Idleb area¹. **Data was collected between 1-21 December 2022 from 1,362 KIs** (11% female). 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 generalized across the population and region. Findings that are calculated based on a subset of the community are indicated by the following footnote ♦, with each subset specified in the endnotes.

The **complete monthly HSOS dataset** is available on the [REACH Resource Centre](#).



Key Highlights

Winterisation needs increased amid fuel shortages in Greater Idleb. In the meantime, the rising price of medicines may exacerbate health needs in the region. Reports of households relying on humanitarian assistance to meet their basic needs have increased compared to the same period last year.

- **Heating fuel among the top priority winterisation items for both internally displaced persons (IDPs) and host community households.** As the Greater Idleb region started to experience colder weather, winterisation became a top need for its inhabitants.^a Among winterisation items, heating fuel was the most commonly reported by KIs (in 92% of assessed communities), followed by winter clothes (74%). However, a series of confrontations that occurred between October and November in Afrin governorate disrupted fuel transportation and distribution in Greater Idleb, resulting in fuel shortages. The closure of Watad fuel-company in late October further limited fuel distribution.^b Fuel shortages are likely linked to households' growing difficulty in heating their homes. The lack of heating in shelters was more commonly reported compared to the same period last year (reported by KIs in 54% of assessed communities in December 2022, compared to 20% in December 2021).

- **Access to healthcare remained unaffordable for many.** KIs in 66% of assessed communities reported that households could not afford to pay for health services. In the same percentage of communities, the lack of medicines and medical equipment was also reported as a barrier to accessing healthcare. The affordability of healthcare, particularly the access to medicines, is set to increase following the Turkish decision to raise the euro-lira conversion rate for medications by 36.77%.^c Medicines were also the second most commonly reported priority healthcare needs in December. Price increases will likely further reduce access to medicines, therefore exacerbating health needs in the region.

- **Data indicated higher dependence on humanitarian aid in the Greater Idleb region compared with the same period last year.** The percentage of assessed communities in which KIs reported the presence of households relying on humanitarian assistance to meet their basic needs increased from 32% to 41% between December 2021 and 2022. Although indicative, data suggest that the increase was greater for host community households (from 16% of assessed communities to 25% between December 2021 and December 2022) than for IDP households, despite IDPs' reliance on humanitarian assistance being more commonly reported (35% of assessed communities in 2021 and 39% in 2022). Furthermore, the quantity of aid distributed was reportedly insufficient in the large majority of communities, as KIs noted that the assistance provided was insufficient to cover all people in need in 81% of them.

HSOS Dashboard

For a breakdown of sector-specific indicators by location, please see the [HSOS dashboard](#). The interactive HSOS dashboard provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level.



Priority Needs and Humanitarian Assistance



Most commonly reported **first, second, and third** and **overall** priority needs for residents (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL
1	Food	Winterisation	Winterisation	Winterisation 78%
2	Winterisation	Livelihoods	Livelihoods	Livelihoods 61%
3	Livelihoods	WASH [▲]	NFIs [▲]	Food 52%

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



Yes: **86%**
No: **14%**

% of assessed communities where KIs reported the presence of the following **types of assistance for residents** ⁴



Most commonly reported barriers that resident households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,▲}

In communities where access to humanitarian assistance was reported

In communities where no access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people in need **78%** **1**
- Quantity of assistance provided to households was insufficient **48%** **2**
- Some people did not comply with the eligibility criteria **43%** **3**

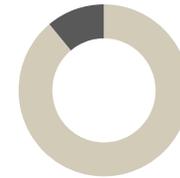
- 86%** No humanitarian assistance was available
- 14%** Distribution points were too far or the routes were inaccessible



Most commonly reported **first, second, and third** and **overall** priority needs for IDPs (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL
1	Food	Winterisation	Winterisation	Winterisation 84%
2	Shelter	Food	Livelihoods	Food 56%
3	Winterisation	WASH	NFIs	Shelter 41%

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



Yes: **89%**
No: **11%**

% of assessed communities where KIs reported the presence of the following **types of assistance for IDPs** ⁴



Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,▲}

In communities where access to humanitarian assistance was reported

In communities where no access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people in need **77%** **1**
- Quantity of assistance provided to households was insufficient **49%** **2**
- Some people did not comply with the eligibility criteria **47%** **3**

- 85%** No humanitarian assistance was available
- 15%** Distribution points were too far or the routes were inaccessible



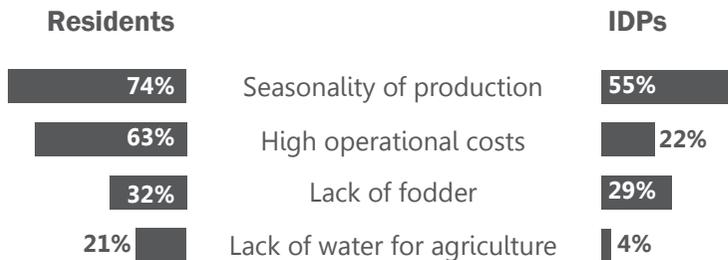
Economic Conditions

Region	Median estimated monthly household expense for water for a household of six ^{5,6}			Median estimated monthly rent price for a two bed-room apartment ^{5,6}			Median estimated daily wage for unskilled labour ^{5,7,8}		
	SYP			SYP			SYP		
Greater Idlib area	SYP			SYP			SYP		
% of assessed communities where indicator was reported in following currencies [*]	SYP	TRY [▲]	USD	SYP	TRY	USD	SYP	TRY	USD
	0%	100%	0%	0%	54%	46%	0%	100%	0%

% of assessed communities where KIs reported the presence of residents and IDP households relying on non-productive sources of livelihoods to meet their basic needs ⁴



Most commonly reported barriers to accessing livelihoods related to agriculture (by % of assessed communities) ⁴



90% and 96%

% of assessed communities where KIs reported daily waged labour as a common source of income for residents and IDPs

68 days

Number of days the average day labourer would need to work to earn the monthly cost of basic SMEB[▲] items ^{5,9}

94% and 56%

% of assessed communities where KIs reported the insufficient income of households and general lack of employment opportunities as barriers to meeting basic needs ⁸

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

- KIs in **69%** of assessed communities cited that **rent** was unaffordable for the majority of people
- KIs in **36%** of assessed communities cited the high cost of **fuel for generators** as a common challenge
- KIs in **82%** of assessed communities cited the high cost of **solar panels** as a common challenge
- KIs in **47%** 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 **food** as a common challenge ⁸
- KIs in **66%** of assessed communities cited the high cost of **health services** as a common challenge

% of assessed communities where common livelihood sources from agriculture were reported ⁴

Livelihood source	Residents	IDPs
Food crop production	48%	13%
Cash crop production	63%	10%
Livestock products	61%	52%
Sale of livestock	12%	14%



Living Conditions

In **93%** of assessed communities at least **80%** of the resident population reportedly owned their shelter

In **65%** of assessed communities reportedly none of the IDP households owned their shelter

In **33%** of assessed communities at least one fifth of the IDP population reportedly lived in unfinished or abandoned residential buildings

In **14%** of assessed communities at least one fifth of the IDP population reportedly lived in tents



A lack of toilets was reported as a shelter issue for IDPs in **3%** of assessed communities



A lack of bathing facilities was reported as a shelter issue for IDPs in **5%** of assessed communities

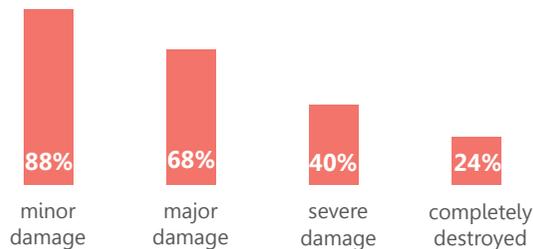


Problems with the drinking water were reported in **54%** of assessed communities



Water being calcareous was the most commonly reported problem with drinking water (reported by KIs in 54% of assessed communities)

Reported presence of occupied shelters with damage across communities where damages were reported (by % of assessed communities) ^{5,10}



Shelter and repair materials being too expensive was the most commonly reported challenge for households to repair their shelter (reported by KIs in 87% of assessed communities) ⁴

Reported sanitation issues affecting public space in the community (by % of assessed communities) ⁴

Rodents and/or pests are frequently visible

4%

Solid waste in the streets

19%

Sewage system pollutes public areas

8%

Stagnant water

3%

Flooding in the streets

2%



96%

% of assessed communities where KIs reported that **house-holds experienced barriers to accessing sufficient food** ⁸



In **20%** of these communities, KIs reported that the **unavailability of certain food items** was a challenge to accessing sufficient food ⁸

Most commonly reported coping strategies for a lack of food (by % of assessed communities) ⁴

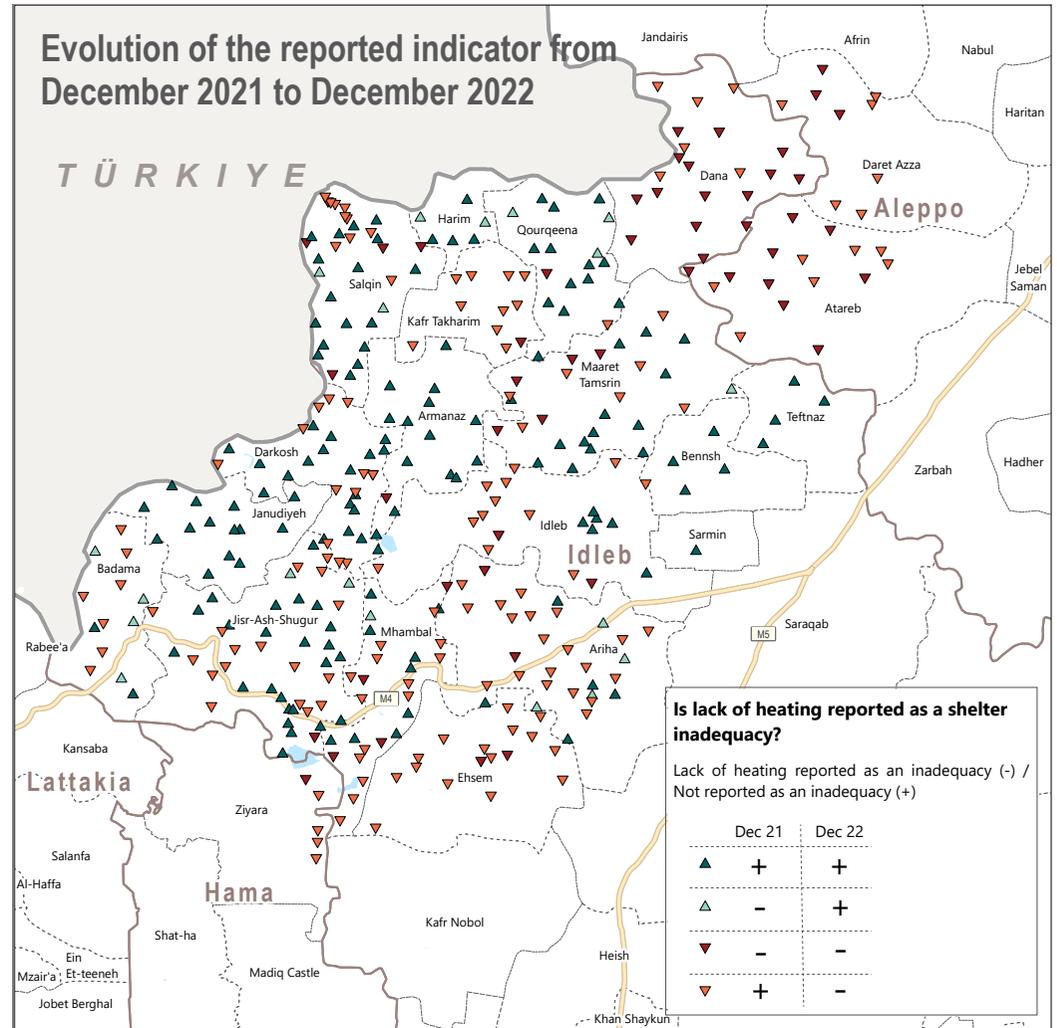
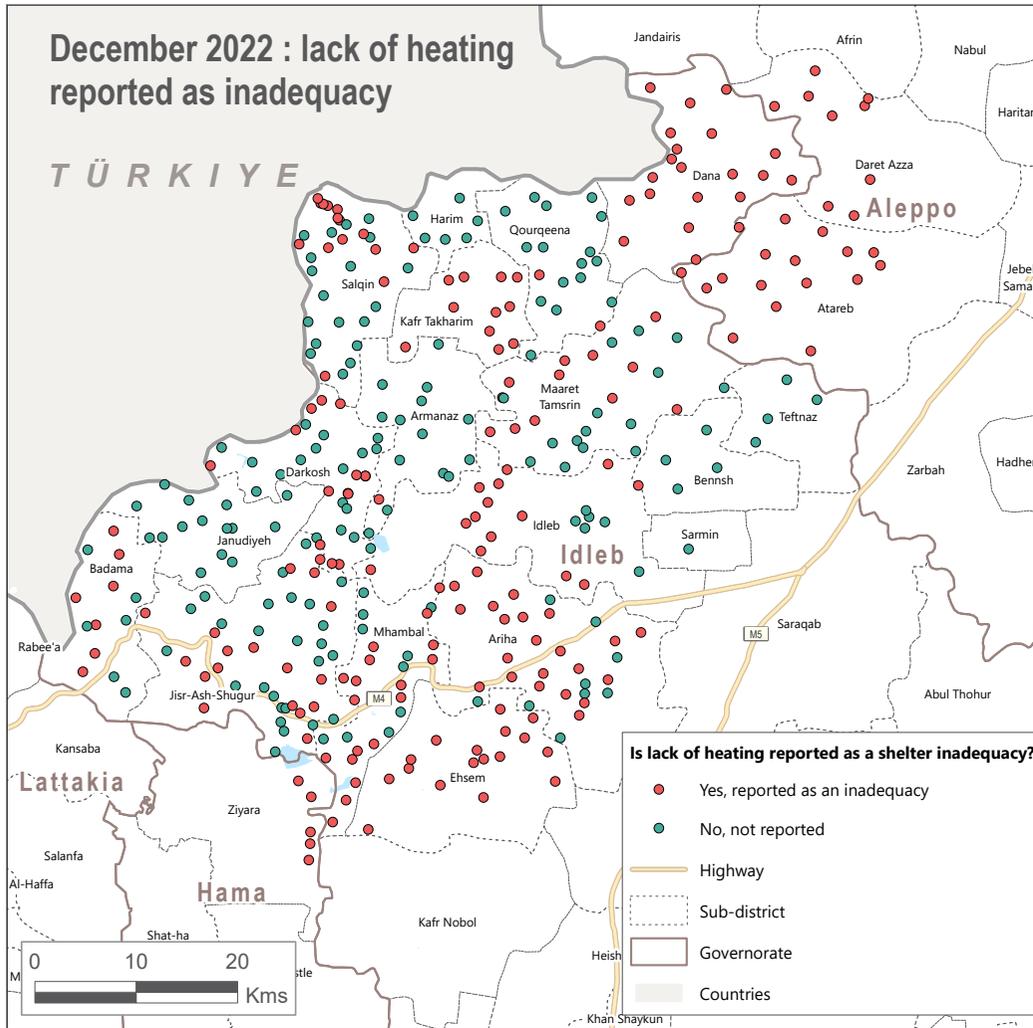
- 1 Borrowing money to buy food **84%**
- 2 Relying on less preferred food / lower food quality **81%**
- 3 Buying food with money usually used for other things **59%**



High price of suitable foods formula was the most commonly reported challenge to feeding young children (reported by KIs in 96% of assessed communities) ^{4,11}

Commonly reported **sources of food** for house-holds other than markets (by % of assessed communities) ⁴

- 1 Own production or farming **62%**
- 2 Relying on food stored previously **35%**
- 3 Assistance from local council or NGOs **22%**



Lack of heating in shelters

Note on the map

The map on the left displays in red the assessed communities in which the lack of heating was reported as a shelter inadequacy in the 30 days prior to data collection. The map on the right shows the evolution of this indicator in a-year-time, comparing December 2021 and December 2022. All assessed communities in Dana, Atareb, Daret Azza and Ehsen sub-districts reported lack of heating as a shelter inadequacy and recorded deterioration compared to the same period last year.



Access to Basic Services



Access to Electricity

7-8 hrs per day

was the most commonly reported range for hours of electricity accessible to households (reported by KIs in 29% of assessed communities)

Solar panels

was the most commonly reported main source of electricity (reported by KIs in 63% of assessed communities)

38%

% of assessed communities where KIs reported the main network is partially or completely not functioning as a barrier for electricity access ♦



Access to Water

52%

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



7 days	11%
5-6 days	11%
3-4 days	16%
1-2 days	12%
0 days	50%

Days per week where water from the network was available (by % of 335 communities connected to a water network) ♦

Private water trucking

was the most commonly reported source of drinking water (reported by KIs in 44% of assessed communities)

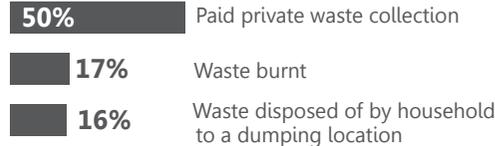


Access to Sanitation

43%

% 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)



46%

% of assessed communities where KIs reported waste removal services as a WASH priority need ⁸



Access to Markets

13%

% of assessed communities in which households reportedly were unable to access markets in the assessed location

Not enough consumers to support markets in the assessed location

was the most commonly reported reason for why markets were not functioning (reported by KIs in 88% of assessed communities where markets were not functioning)

78%

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

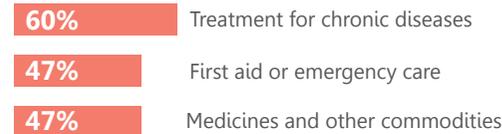


Access to Health Services

43%

% of assessed communities where KIs reported that the households did not have access to health services in the assessed location

Most commonly reported health priority needs (by % of assessed communities) ⁸



Going to the pharmacy instead of a clinic

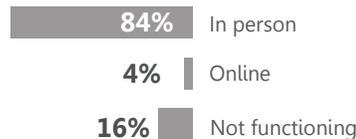
was the most commonly reported coping strategy for a lack of healthcare (reported by KIs in 84% of assessed communities)



Access to Education Services

19%
34%

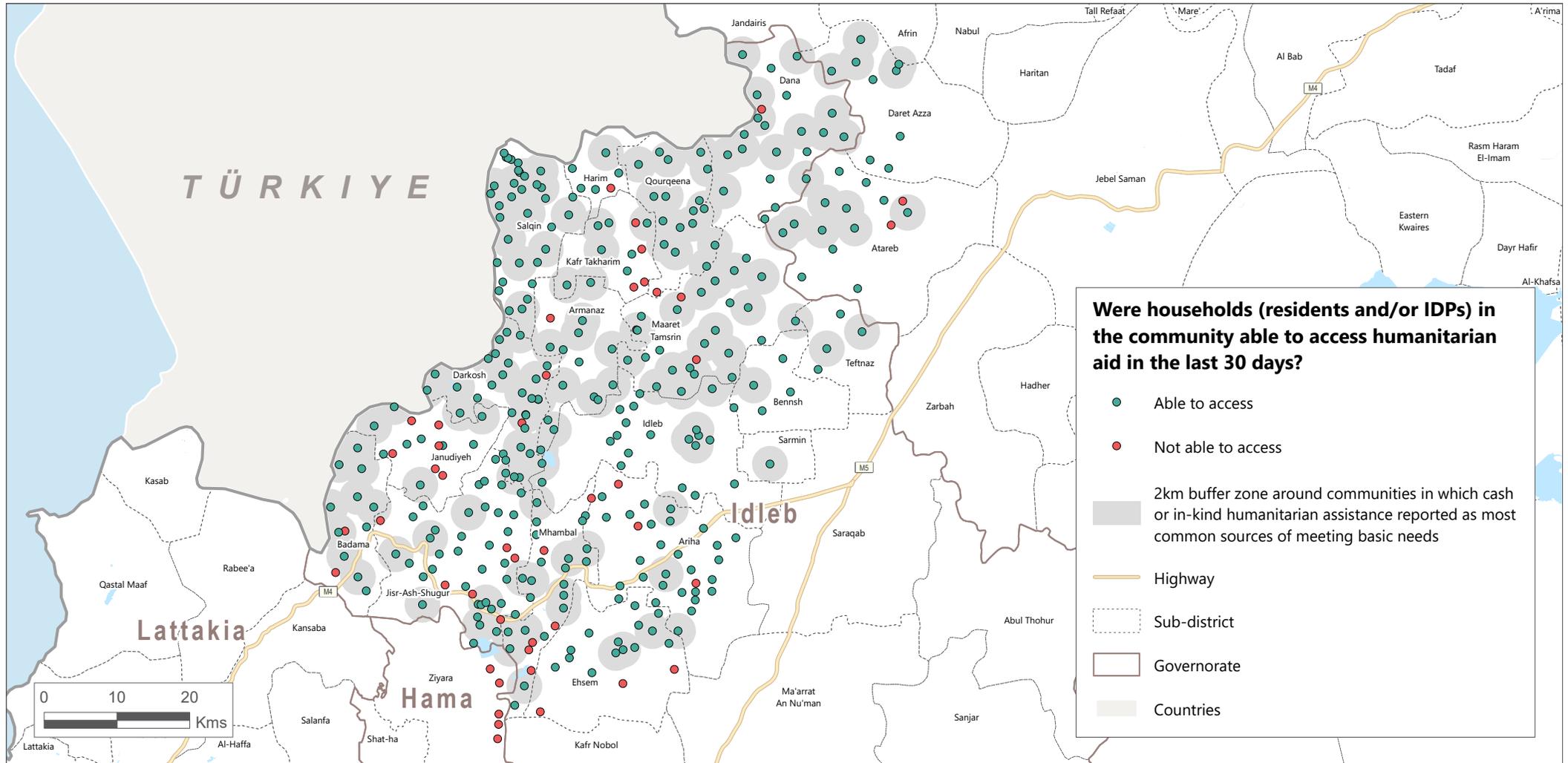
% of communities in which half or less of the school aged-children accessed school in the last 30 days for residents and IDPs



% of assessed communities where KIs reported on the functioning of education services in the assessed location ⁴

11%

% of communities where KIs reported that the lack of access to internet, electricity and/or equipment was a barrier to accessing (online) education services ⁸



Reported reliance on humanitarian assistance

Note on the map

This map shows in green the assessed communities in which KIs reported that some households could access humanitarian aid in the 30 days prior to data collection. A grey buffer zone surrounds the communities in which KIs reported that some households commonly relied on cash or in-kind humanitarian assistance to meet their basic needs. It is worth noting that the KI methodology may not reflect the reality of aid distribution as KIs might not be aware of all aspects of humanitarian activities in their community.



COVID-19

Effects of COVID-19 on livelihoods sectors in the community (by % of assessed communities)



None of the available livelihood sectors were affected **98%**
At least one of the available livelihood sectors was partially or totally affected **2%**

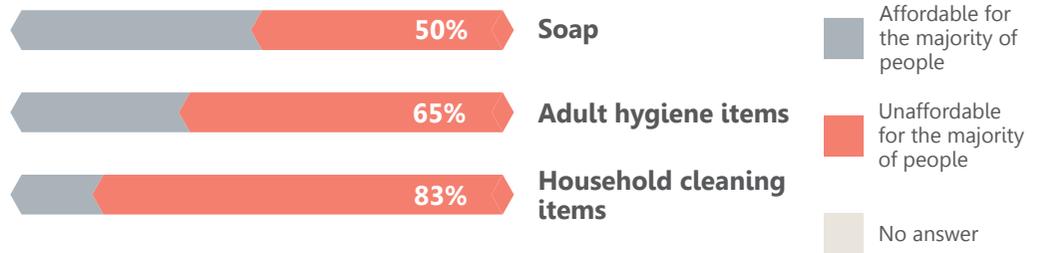
Most commonly reported sectors affected by COVID-19 (by % of assessed communities)

- 2% Trading
- 2% Agriculture
- 2% Home based enterprises

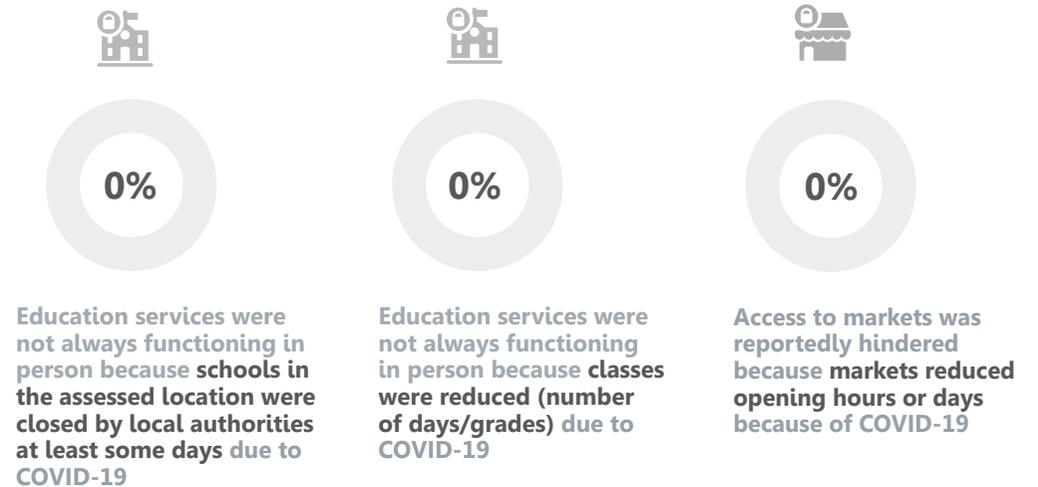
% of assessed communities where COVID-19 risk indicators were reported by KIs

- Overcrowding reported as a shelter inadequacy** **48%**
- Schools are overcrowded reported as a challenge for students who access education** **63%**
- Health facilities are overcrowded reported as a barrier to healthcare access** **58%**
- Lack of necessary protective equipment or supplies at health facilities reported as a barrier to healthcare access** **7%**
- Washing hands less frequently reported as a coping strategy for a lack of water** **6%**
- Shortage of health workers reported as a barrier to healthcare access** **9%**
- Lack of medicines or medical equipment at the health facility reported as a barrier to healthcare access** **66%**

Reported hygiene item availability and affordability (by % of assessed communities)¹²



% of assessed communities where COVID-19 related barriers to access services were reported





Security and Protection

Intersectoral findings on security



General safety and security concerns restricting movement to markets was a reported barrier to market access in **3%** of assessed communities

General safety and security concerns at markets was a reported barrier to market access in **3%** of assessed communities

Markets not opening because of security issues was a reported barrier to markets not functioning in **0%** of assessed communities



Threat from airstrikes was reported as a protection risk in **67** communities⁸

Threat from shelling, snipers or gunfire was reported as a protection risk in **71** communities⁸

Threat from improvised explosive devices (IEDs), mines or unexploded ordnances was reported as a protection risk in **0** communities⁸

Fear from imminent conflict was reported as a protection risk in **85** communities⁸



The inability to lock homes securely was reported as a shelter inadequacy in **37%** of assessed communities⁸

Lack of lighting around the shelter was reported as a shelter inadequacy in **91%** of assessed communities⁸

The security situation was reported as a barrier to shelter repairs in **13%** of assessed communities

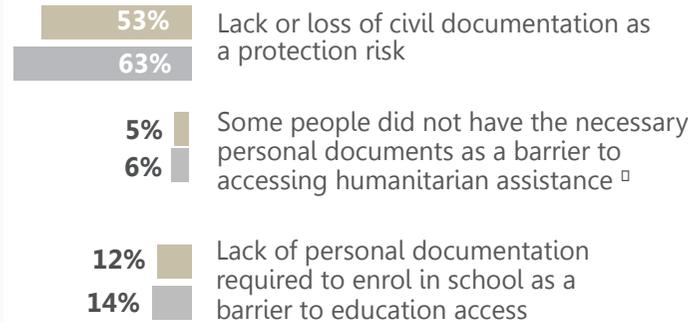


General safety and security concerns at the health facility was reported as a barrier to healthcare in **0%** of assessed communities

Most commonly reported protection priority needs (by % of assessed communities)^{3, 8}

- 1 **79%** Special assistance for vulnerable groups
- 2 **67%** Specialised child protection services
- 3 **40%** Psychosocial support

% of assessed communities where the lack of civil documentation for residents and IDPs was reported



% of assessed communities where extreme coping strategies used by residents and IDPs to meet basic needs were reported⁴

Residents

- 38%** Early marriage
- <1%** Forced marriage
- 4%** High risk work
- 1%** Sending family members to beg
- 79%** Sending children (15 or below) to work

IDPs

- 41%**
- 1%**
- 7%**
- 0%**
- 81%**

Age, Gender, and Diversity

KIs in **41%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to meeting basic needs⁸

KIs in **37%** of assessed communities reported a **lack of employment opportunities for persons with a disability** as a barrier to meeting basic needs⁸

KIs in **12%** of assessed communities reported a **lack of privacy for women and girls at health facilities** as a barrier to healthcare access

KIs in **43%** of assessed communities reported a **lack of market access for people with restricted mobility**

KIs in **8%** of assessed communities reported that **women and girls feel unsafe when traveling to markets**

Children below the age of 12 were reported as a group affected by child labour in **13%** of assessed communities⁸

Hazardous child labour was reported as a protection risk in **6%** of assessed communities⁸

Endnotes

1. The greater Idleb area includes Idlib governorate, parts of Aleppo western countryside, and parts of Hama northwestern countryside controlled by armed opposition groups (AOGs).
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 three answers, thus findings might exceed 100%.
4. KIs could select multiple answers, thus findings might exceed 100%.
5. KIs were asked about the situation at the time of data collection, instead of the last 30 days.
6. 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 Idleb Governorate Market Monitoring exchange rate was used to calculate the amount in SYP. According to the [Joint Market Monitoring Initiative \(JMMI\)](#) December 2022, 1 USD = 5,800 SYP; 1TRY= 312 SYP.
7. According to the Idleb Governorate JMMI December 2022, 1 USD = 5,800 SYP.
8. 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).
9. According to the Idleb Governorate JMMI December 2022, the Survival Minimum Expenditure Basket (SMEB) = 902,380 SYP.
10. 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).
11. KIs were asked about the situation in the last two months, instead of the last 30 days.
12. Adult hygiene items include: shampoo, toothbrush, and toothpaste. Household cleaning items include: washing powder, liquid, and dish detergent.

◆ By number of communities where KIs reported the relevant indicator for the relevant population group(s)

<i>Indicator</i>	<i>Subset</i>	<i>Indicator</i>	<i>Subset</i>
<i>N.o of communities reporting on:</i>		<i>N.o of communities reporting on:</i>	
Residents	365	Currency used for paying water	347
IDPs	357	Currency used for paying rent	270
Challenges to assistance access (resident)	308	Currency in which wages are paid (merge)	329
Barriers to assistance access (resident)	50	Barriers to accessing sufficient food (merge)	358
Challenges to assistance access (IDPs)	310	Days when water is available from network	335
Barriers to assistance access (IDPs)	41	Barriers to markets functioning	48

Sources

- a. United Nations Office for the Coordination of Humanitarian Affairs. (24 November 2022). Millions in Syria face freezing temperatures without critical assistance. Retrieved from <https://reliefweb.int>
- b. iMMAP. (1 December 2022). Northwestern Syria Context update November 2022. Retrieved from <https://immap.org/syria/>
- c. Reuters. (14 December 2022). Turkey raises euro rate for medicine prices by 36.77% - Official Gazette. Retrieved from <https://www.reuters.com>

About REACH

REACH 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). For more information please visit our website: www.reach-initiative.org. You can contact us directly at: geneva@reach-initiative.org.