

Aleppo Governorate, February 2018

Humanitarian Situation Overview in Syria (HSOS)

OVERALL FINDINGS¹

Aleppo governorate is located in northwest Syria and borders Turkey to the north. Following the cessation of hostilities in and around Aleppo city in December 2016, thousands spontaneously returned to their communities in 2017². Conflict in the governorate intensified again in early 2018 and returnee numbers in assessed communities dropped significantly in January and February. In February, Mare' was the only assessed community to witness IDP returns (approximately **325**). Additionally, KIs in **nine** of the assessed communities reported that members of the pre-conflict population left their communities in February, most commonly due to an escalation of conflict. Of these communities, **six** were located in Jebel Saman district.

An estimated **275,887 – 286,875** IDPs were reportedly residing in assessed communities, with an additional **4,710 – 5,175** new arrivals reported in February. Kafr Naha (**2,000 - 2,200**), Mare' (**2,000 - 2,100**) and Kafr Karmin (**400 – 500**) reportedly witnessed the largest numbers of new arrivals. In the majority of assessed communities, pre-conflict populations and IDPs reportedly lived in independent apartments or houses (**88%** and **86%** respectively). Of the communities assessed, **94%** reported that generators were their primary source of electricity. Of the **49** assessed communities, **26** reported a lack of fuel. Residents in the majority of these communities reportedly coped with the lack of fuel by burning plastic, productive assets or waste. A total of **22** reported that no health services were available in their community in February; the majority of these communities are located in A'zaz district. Moreover, of the **49** assessed communities, **35** reported that women primarily delivered babies in facilities in nearby communities, and only **18** of the assessed communities reported having functioning pre-conflict hospitals (**5**) or public healthcare facilities (**13**).

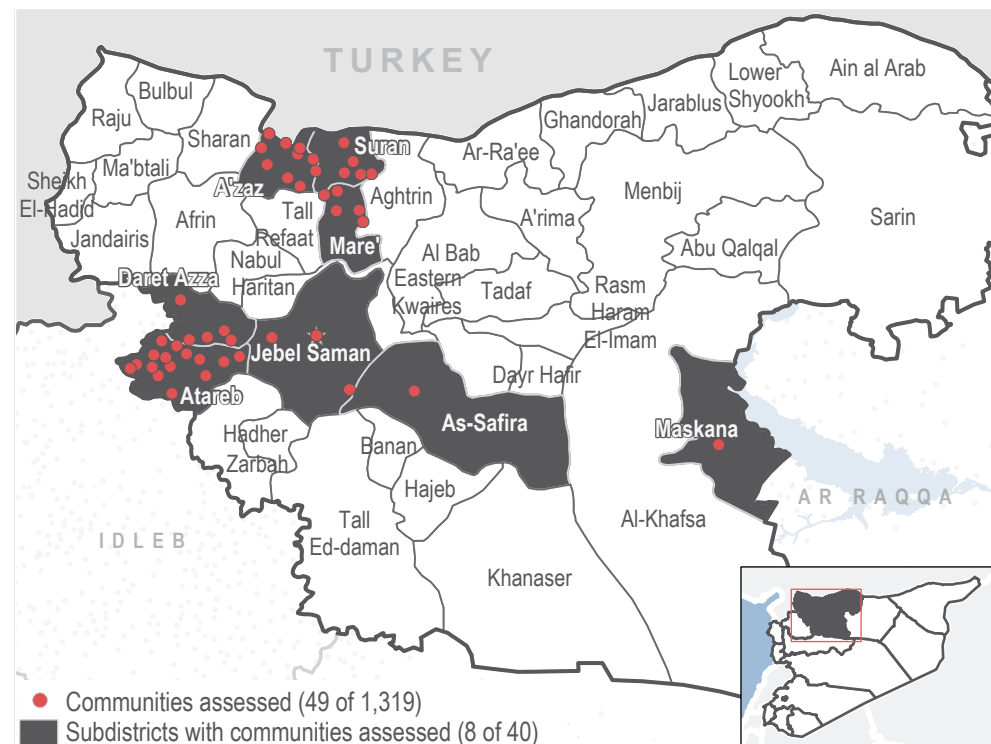
Water trucking and the water network were reportedly the primary sources of drinking water in assessed communities (**45%** and **43%** respectively) in Aleppo in February. The majority of assessed communities reported that water was fine to drink, with the exception of Sha'aar and As-Safira where KIs reported that water tasted and/or smelled bad. Both of these communities also reported that water from their primary source, water trucking, was insufficient to cover household needs. Residents in these communities reportedly coped with this lack of water by reducing their water consumption.

Of the 49 assessed communities, **45** reported that some residents were producing their own food. Furthermore, **40** of the assessed communities reported that farm ownership was one of the most common sources of income for residents. However, **28** of the assessed communities reported difficulties in accessing sufficient amounts of food, most commonly a lack of resources to buy available food, some food items being too expensive as well as a lack of access to available cooking fuel. This suggests that while residents in the majority of assessed communities utilize farming as a means of obtaining food and income, food and income generated by agricultural activities may not always suffice to cover essential needs. As a result, **48** of the assessed communities reported using coping strategies to deal with a lack of income and **31** of them reported that some children were being sent to work or beg³.

KEY EVENTS

Tensions continue to mount between Kurdish and Turkish forces in the Afrin area ⁴ .	Thousands displaced in the Afrin area due to an intensification in conflict ⁵ .	Operation "Olive Branch" commences in the Afrin area ⁶ .	Military activity in northern Aleppo prevents aid deliveries as Bab-Al-Hawa and Bab-Al-Salam border crossings close to U.N. staff ⁷ .	More than 50,000 students across 318 schools, 16 institutes and one university are unable to attend school in Afrin ⁸ .	212,724 individuals return to 287 communities in rural areas and 354,682 individuals return to Aleppo city ⁹ .
July 2017 onward	Mid-January 2018 onward	20 January 2018	20 January 2018	February 2018	February 2018

Coverage



Top 3 reported priority needs

1. Food security
2. Water security
3. Healthcare

Demographics*

3,570,540 people in need

1,756,706 1,813,834

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

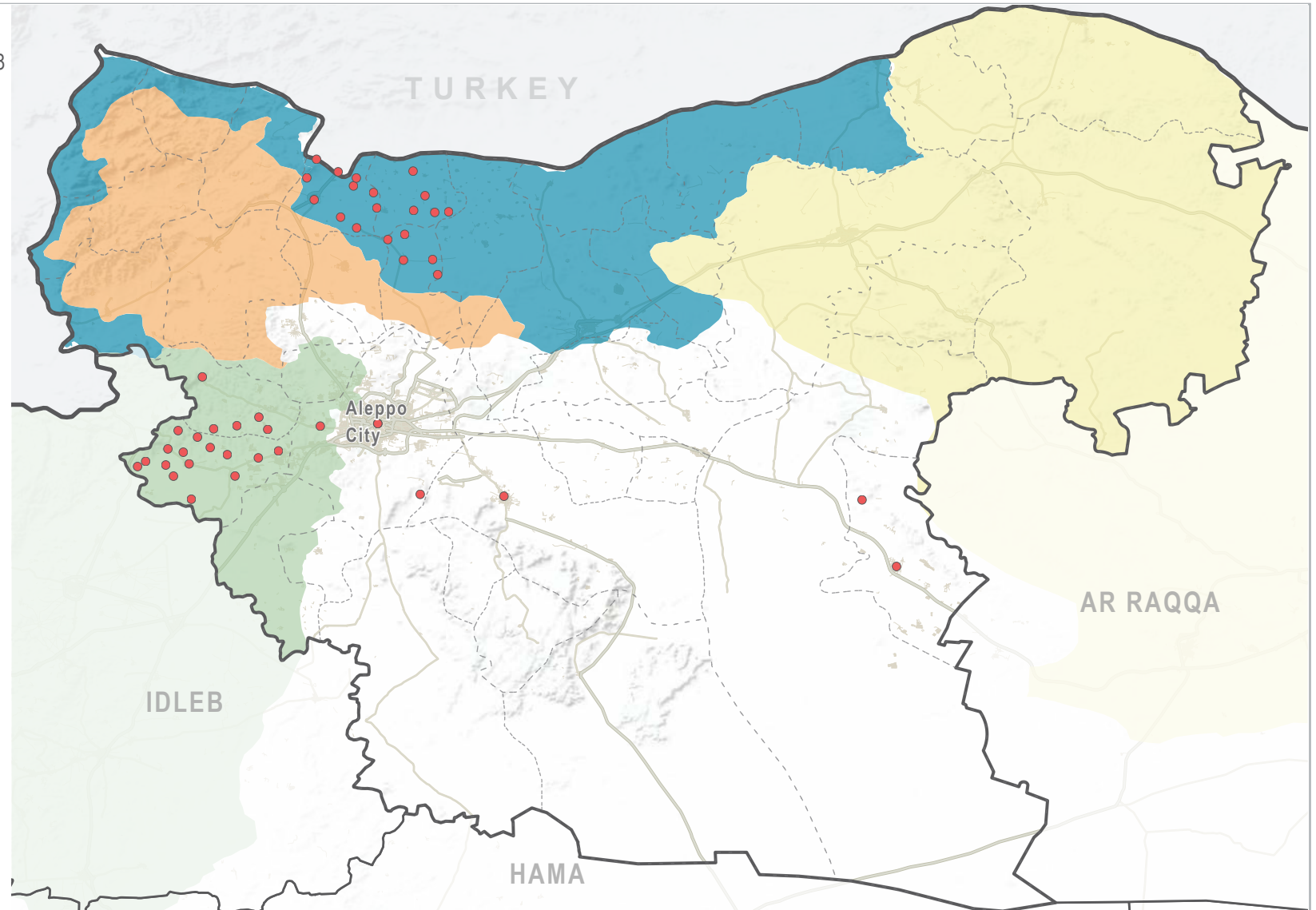
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Governorate areas of influence:

Area of influence

Sourced from Live UA Map, 28 February 2018

-  Opposition - Free Syrian Army (FSA)
-  Opposition - Free Syrian Army (Olive Branch/Idleb Shield)
-  Democratic Federation of Northern Syria - Syrian Democratic Forces (SDF-coalition)
-  Democratic Federation of Northern Syria - Syrian Democratic Forces (SDF)
-  ISIL-affiliated groups
-  Assessed Community



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DISPLACEMENT

4,710 - 5,175 Estimated number of IDP arrivals in assessed communities in February.

300 - 350 Estimated number of spontaneous returns in assessed communities in February².

Communities with the largest estimated number of IDP arrivals:

Kafr Naha	2,000 - 2,200
Mare'	2,000 - 2,100
Kafr Karmin	400 - 500

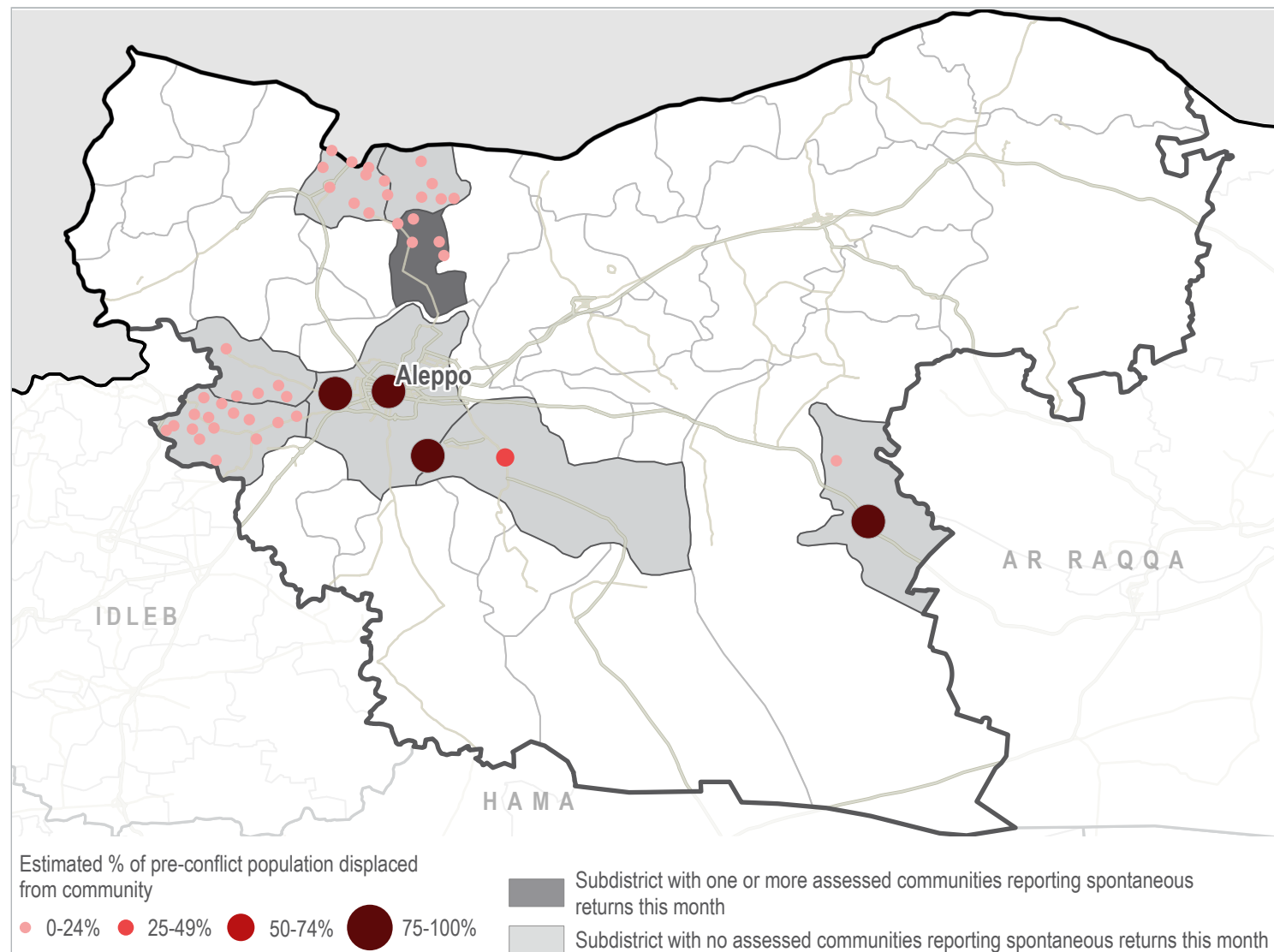
Top 3 subdistricts of origin of most IDPs arrivals^{3,4}:

Abul Thohur (Idleb)	33%
Ma'arrat An Nu'man (Idleb)	17%
Saraqab (Idleb)	17%

40 communities reported no PCP departures. Top 3 reasons for PCP displacement in the remaining 9 assessed communities^{3,4}:

Escalation of conflict	67%
Loss of income	56%
Loss of assets	33%

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



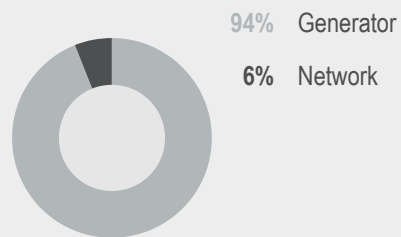
³ Multiple choices allowed.

⁴ By percent of communities reporting.

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SHELTER AND NFI

Primary source of electricity reported:⁴



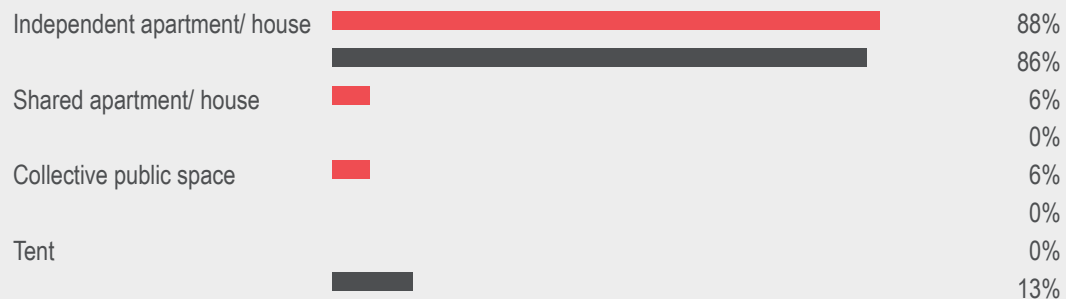
22 communities reported no lack of fuel. Most common strategies to cope with a lack of fuel in the remaining 26 assessed communities^{3,4}:



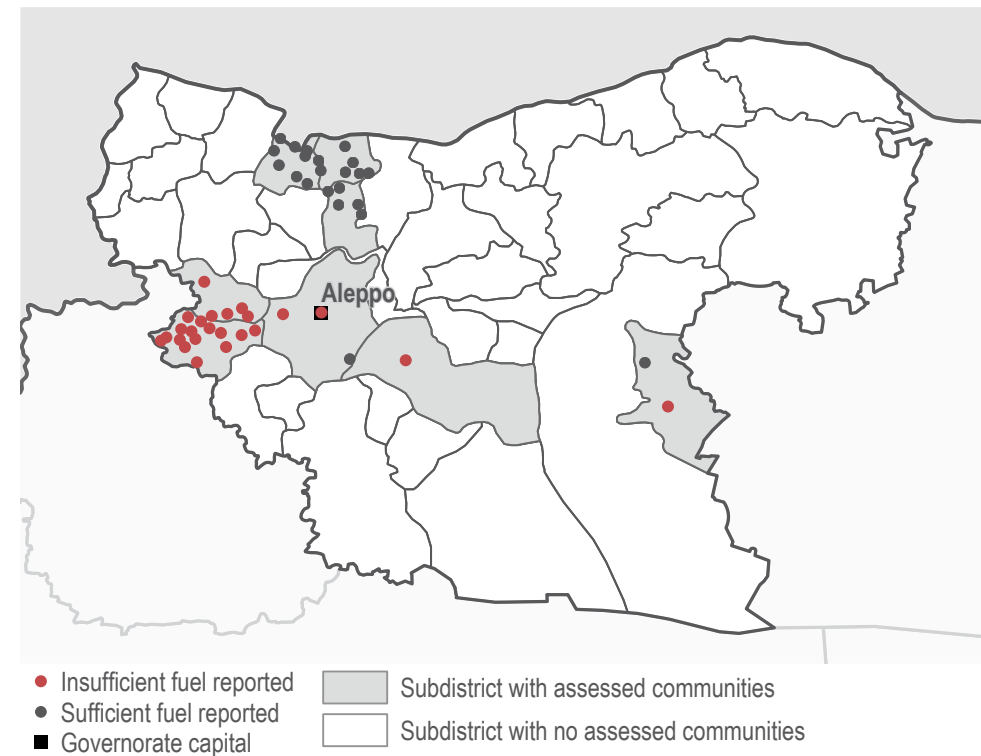
10,744 SYP Governorate average reported rent price in Syrian Pounds (SYP) across assessed communities.⁵

6,319 SYP Syrian average reported rent price in SYP across assessed communities.⁵

Most commonly reported shelter type for PCP (in red) and IDP (in grey) households⁴:



Fuel sufficiency:



Reported fuel prices (in SYP)⁵:

Fuel type:	Governorate average price in February:	Governorate average price in January:	Syrian average price in February:
Coal (1 kilogram)	70	69	345
Diesel (1 litre)	331	271	321
Butane (1 canister)	9,128	8,579	6,997
Firewood (1 tonne)	74,042	81,565	64,533

³ Multiple choices allowed.

⁴ By percent of communities reporting.

⁵ 1 USD = 434 SYP (UN operational rates of exchange as of 1 March 2018)

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HEALTH

- 11** Communities reported that no assessed medical items were available in their community.
- 3** Communities reported that the majority of women did not have access to formal health facilities to give birth.

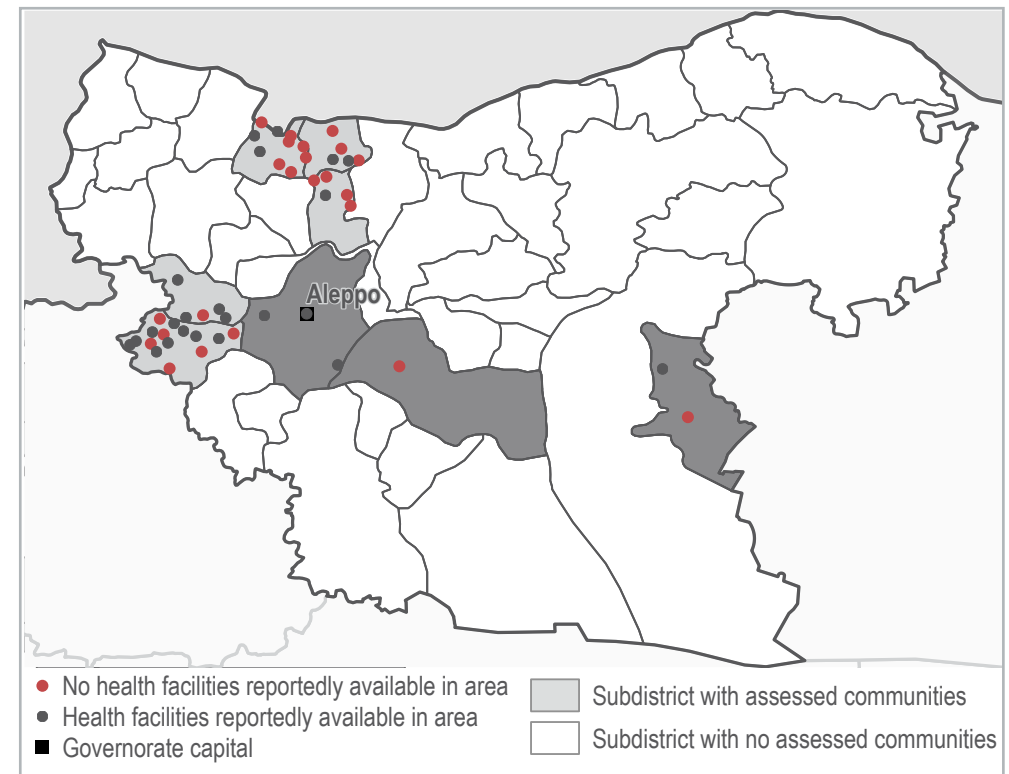
21 communities reported that residents experienced no barriers to accessing healthcare services. The barriers in the remaining **28** assessed communities were^{3,4}:

No health facilities available in the area	<div style="width: 86%; background-color: red; height: 10px;"></div>	86%
Security concerns when traveling to facilities	<div style="width: 14%; background-color: red; height: 10px;"></div>	14%
High cost of transportation to facilities	<div style="width: 11%; background-color: red; height: 10px;"></div>	11%
Lack of transportation to facilities	<div style="width: 4%; background-color: red; height: 10px;"></div>	4%
Family not permitting travel to health facilities	<div style="width: 4%; background-color: red; height: 10px;"></div>	4%

44 communities reported that residents were not using coping strategies to deal with a lack of medical supplies. The coping strategies used in the remaining **5** communities were^{3,4}:

Using non-medical items for treatment	<div style="width: 60%; background-color: red; height: 10px;"></div>	60%
Recycling medical items	<div style="width: 60%; background-color: red; height: 10px;"></div>	60%

Presence of health facilities in assessed communities:



Top 3 most needed healthcare services reported^{3,4}:

All health services	45%
Surgical care	41%
Orthopedic services	29%

Top 3 most common health problems reported^{3,4}:

Severe diseases affecting those younger than 5	82%
Chronic diseases	47%
Pregnancy related diseases	45%

³ Multiple choices allowed.

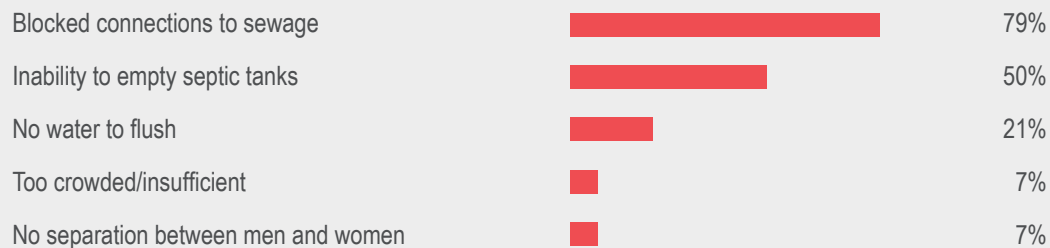
⁴ By percent of communities reporting.

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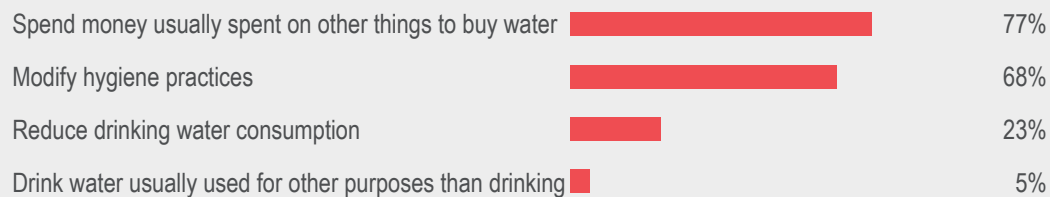


- 2** Communities reported that water from their primary source tasted and/or smelled bad.
- 0** Communities reported that drinking water from their primary source made people sick.

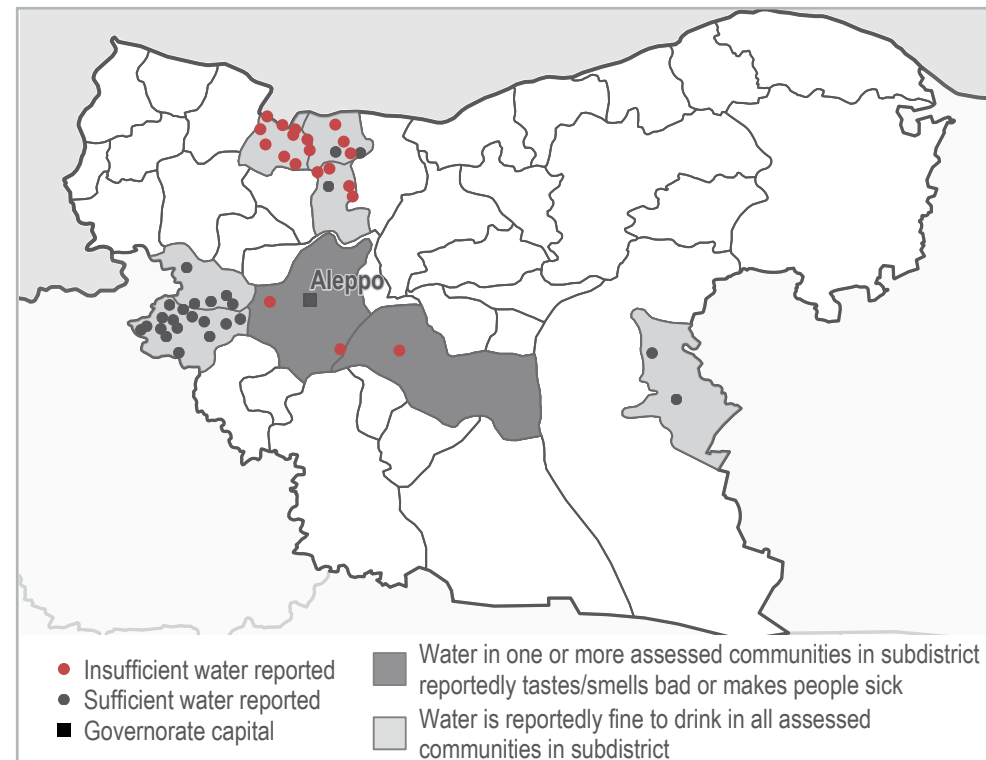
35 communities reported that residents had no problems with latrines. The most prevalent problems with latrines in the remaining 14 assessed communities were^{3,4}:



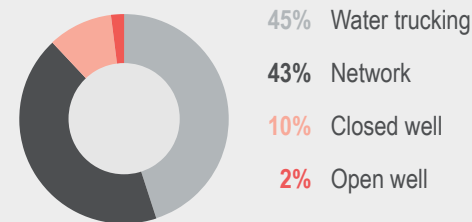
27 communities reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining 22 assessed communities were^{3,4}:



Water sufficiency for household needs:



Primary drinking water source reported⁴:



Top 3 reported methods of garbage disposal^{3,4}:

Private paid collection	59%
Public free collection	27%
Left in street/ public area	8%

³ Multiple choices allowed.

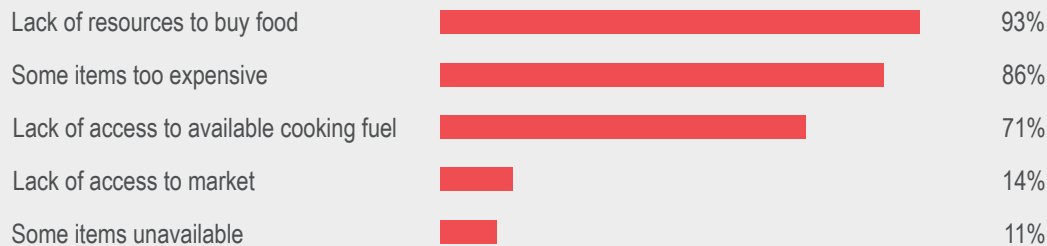
⁴ By percent of communities reporting.

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FOOD SECURITY

- 2** 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.

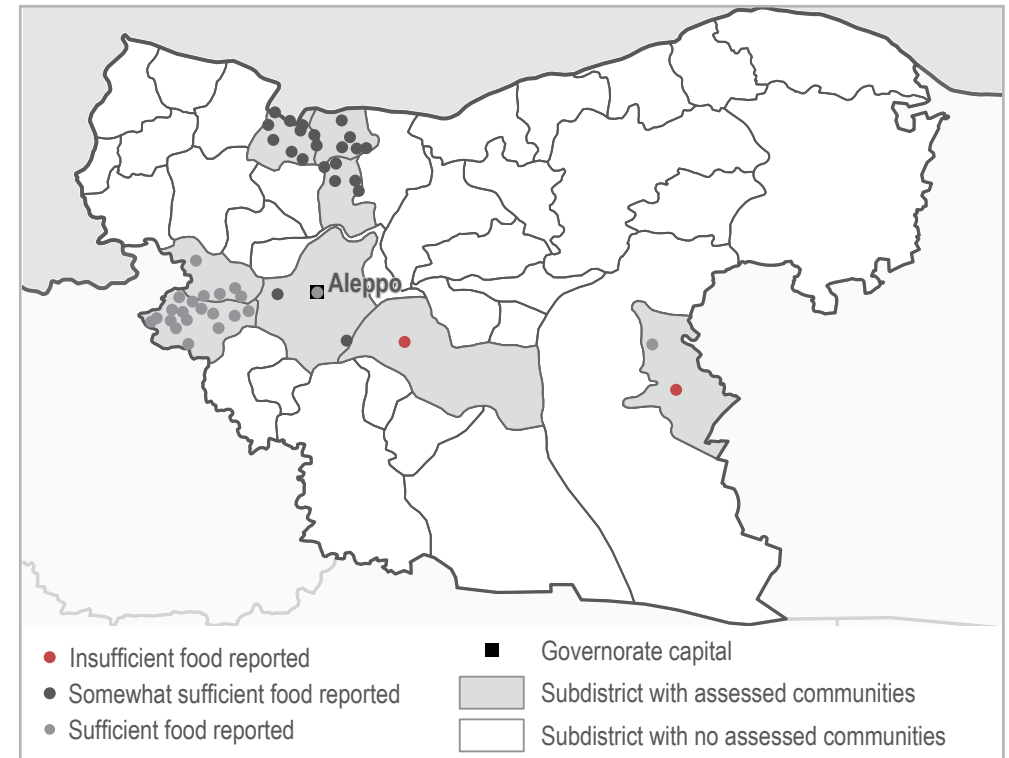
21 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining **28** assessed communities were^{3,4}:



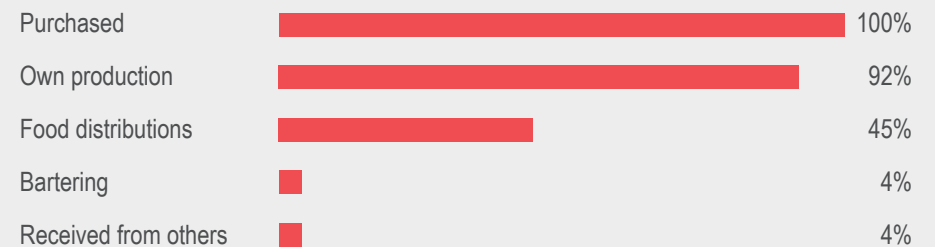
Core food item prices reported (in SYP)⁵:

Food item:	Governorate average price in February:	Governorate average price in January:	Syrian average price in February:
Bread public bakery (1 loaf)	115	107	117
Rice (1 kilogram)	469	488	466
Lentils (1 kilogram)	348	354	351
Sugar (1 kilogram)	356	362	315
Cooking oil (1 litre)	494	499	584

Food sufficiency:



Most common ways of obtaining food reported^{3,4}:



³ Multiple choices allowed.

⁴ By percent of communities reporting.

⁵ 1 USD = 434 SYP (UN operational rates of exchange as of 1 March 2018)

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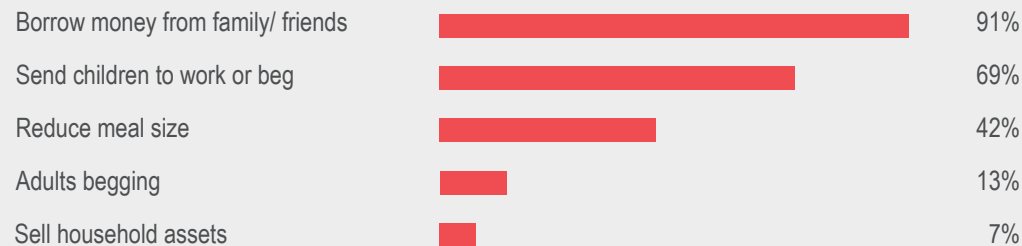
LIVELIHOODS

Less than 50,000 SYP Most commonly reported household income range⁵.

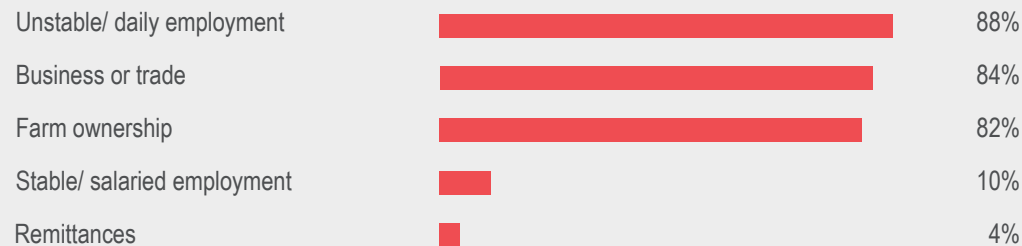
25,838 SYP Governorate average food basket price^{5,6}.

1 Community reported that residents used extreme food-based coping strategies to deal with insufficient income⁷.

3 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 **45** assessed communities were^{3,4}:



Most commonly reported main sources of income^{3,4}:



³ Multiple choices allowed.

⁴ By percent of communities reporting.

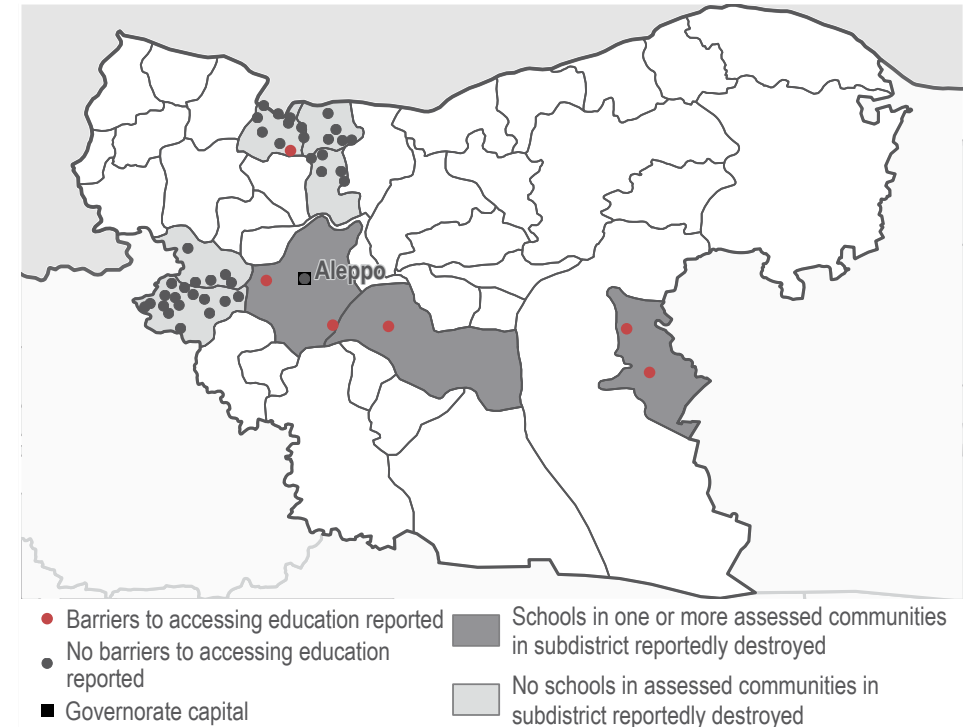
⁵ 1 USD = 434 SYP (UN operational rates of exchange as of 1 March 2018)

⁶ 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.

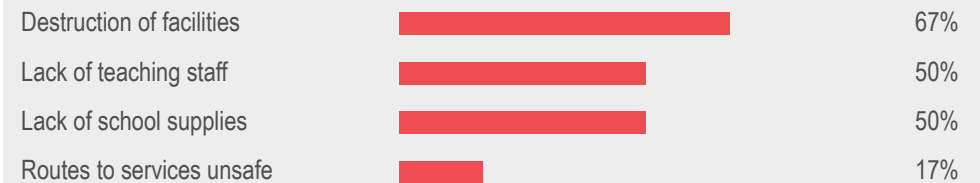
⁷ Extreme food-based strategies: Eating food waste; eating non-edible plants and spending days without eating.

EDUCATION

Barriers to accessing education services:



43 communities reported that most children were able to access education. The most commonly reported barriers to education in the remaining **6** assessed communities were^{3,4}:



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 49 communities in March 2018, referring to the situation in Aleppo Governorate in February 2018. It presents key indicators, rather than the entire range of indicators gathered in the HSOS questionnaire. For community-level data on assessed subdistricts in Al Hasakeh, Dar'a, Idleb, Rural Damascus and Quneitra, please refer to the monthly subdistrict factsheets, available on the [REACH Resource Centre](#). The complete HSOS dataset is disseminated monthly via the REACH Syria mailing list.

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

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

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

ENDNOTES

- ¹ 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.
- ² Returns are not necessarily voluntary, safe, or sustainable.
- ³ 'Children' includes all persons below the age of 18.
- ⁴ Ali and Clark (31 July 2017). Turkish-backed forces encroach on Kurdish-held northern Syria amid rising tensions. Syria Direct. Retrieved from <http://syriadirect.org>.
- ⁵ UNHCR (24 January 2018). Syria: Flash update on recent events - 24 January 2018. Retrieved from <https://reliefweb.int>.
- ⁶ Aljazeera (21 January 2018). Turkey's troops cross over into Syria's Afrin. Retrieved from <https://www.aljazeera.com>.
- ⁷ UNICEF (31 January 2018). UNICEF Syria Crisis Situation Report - January 2018 Humanitarian Results. Retrieved from <https://reliefweb.int>.
- ⁸ Ibrahim and Edelman (26 February 2018). Turkish-backed offensive on Afrin leaves 50,000 students out of school. Retrieved from <http://syriadirect.org>.
- ⁹ 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>.

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).