

Dar'a Governorate, December 2017

Humanitarian Situation Overview in Syria (HSOS)

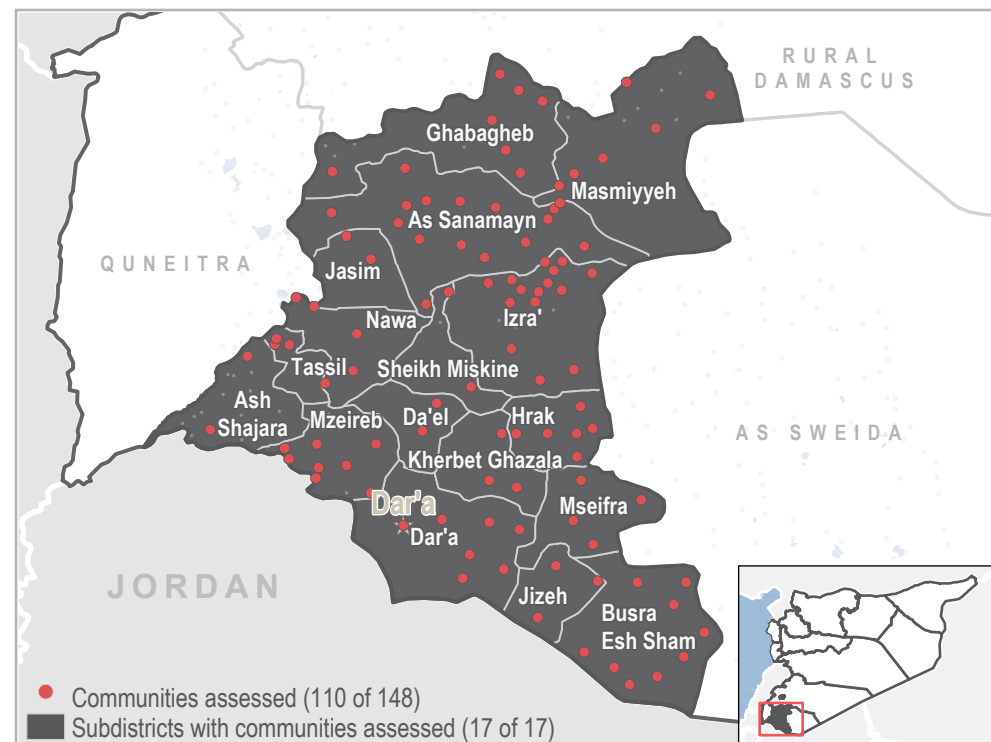
OVERALL FINDINGS¹

Predominantly agricultural Dar'a governorate is located in southern Syria. Following heavy clashes earlier in the year, hostilities in the governorate reduced significantly since a ceasefire agreement took effect in July between armed opposition groups (AOGs) and the government of Syria. Between **76-100%** of buildings reportedly remained damaged in **three** neighbourhoods in Dar'a City (Arbaine, Quneitra and Qadessiyeh) in December and, despite the ceasefire agreement still being in effect, the governorate continues to experience conflict. Out of the 110 communities assessed, **14** communities witnessed members of their pre-conflict population depart in December, **four** of which reported that members of the original population left due to an escalation of conflict: Sheikh Saed and Edwan (in Nawa subdistrict), Hit (in Ash-Shajara subdistrict) and Samlin (in As-Sanamayn subdistrict). Pre-conflict populations left **nine** communities due to reduced access to basic services, **four** of which are located in Izra' subdistrict. Conversely, **19** of the 110 communities assessed in Dar'a saw people spontaneously return in December, around **1,395 - 1,773** in total². Of the **11** communities that saw refugees return, the most commonly cited reasons for return were the protection of assets, family reunification and a perceived cessation of hostilities in their community of origin. **Nine** of these communities witnessed returns from Jordan, while **seven** saw people return from Lebanon. Of the **11** communities that witnessed spontaneous IDP returns, family reunification, followed by the need to protect assets in the community of origin were most commonly cited as reasons for return.

Of the communities assessed, **75%** reported an IDP presence. Of these communities, **8** reported the presence of over 10,000 IDPs. All **eight** communities reported having sufficient amounts of water, although **only half** of them reported having sufficient amounts of fuel. **Five** of these communities reported barriers to accessing sufficient amounts of food, the most common being a lack of resources, prohibitive prices (please refer to the Syria [market monitoring exercise](#) for additional information on food prices in Dar'a), and a decrease in local food production in predominantly agricultural Dar'a, although barriers did not differ between communities hosting large numbers of IDPs and those hosting fewer or none. **All but nine** communities reported that residents' incomes were insufficient to cover household needs.

Of the communities assessed, **57%** reported barriers to accessing healthcare and **24** reported that no assessed medical items were available in their community. **Four** communities reported the use of coping strategies to deal with a lack of medical supplies: Aqraba, Jisri, Matleh and Sokkariyeh. Communicable diseases were reported as a common health concern in **35** communities, a majority of which are located in Dar'a, As-Sanamayn and Busra Esh-Sham subdistricts. Out of the 110 assessed communities, **52%** reported that children were sent to work or beg to supplement household incomes³. Nonetheless, **all but eight** of these communities reported that most children were able to attend school.

Coverage



Top 3 reported priority needs

1. Food security
2. Healthcare
3. Water security

Demographics*

898,910 people in need

437,769 **461,141**

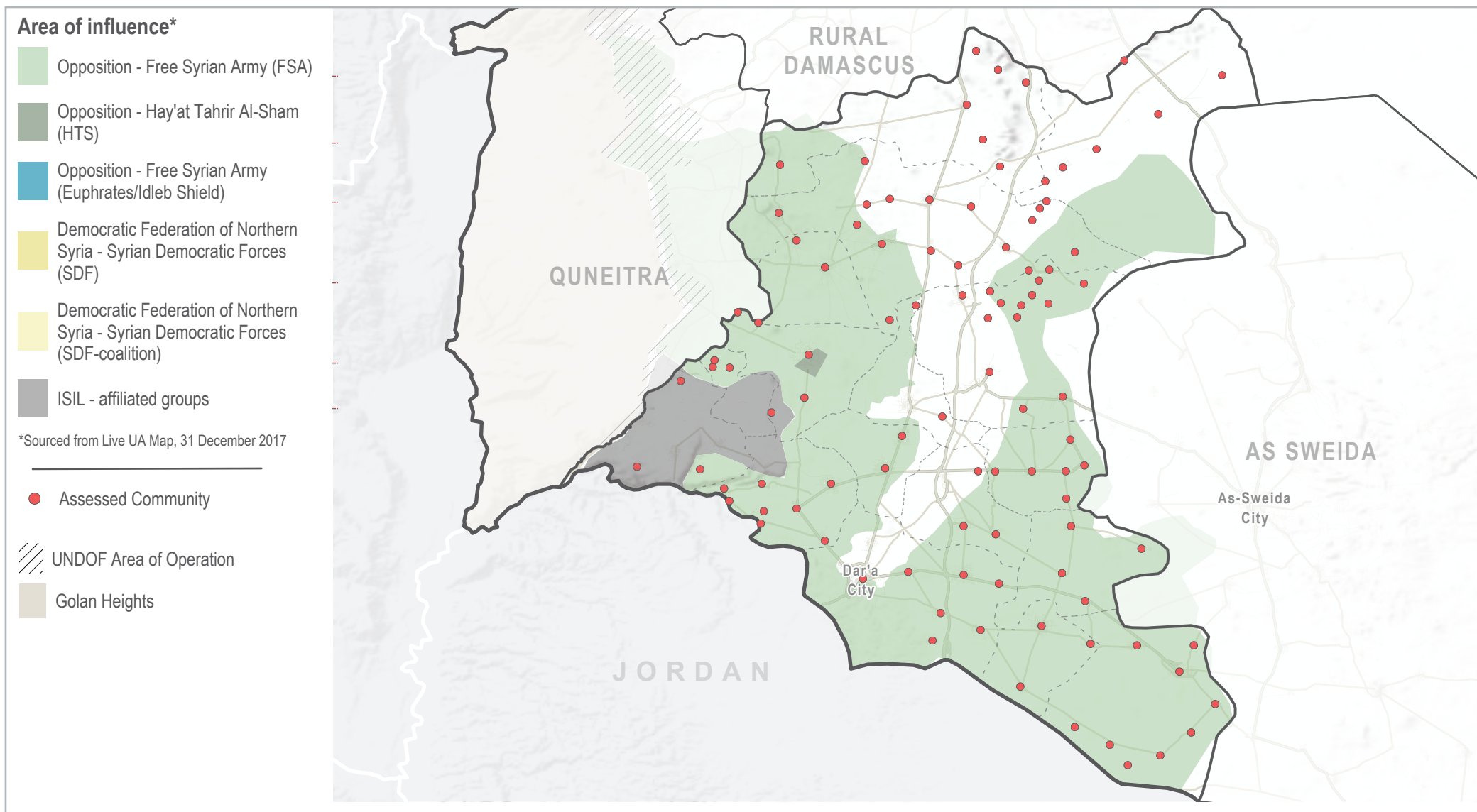
* Figures based on HNO 2018 population data for the entire governorate.

KEY EVENTS

Signing of a de-escalation agreement following talks in Astana ⁴ .	Dar'a City targeted by hundreds of air strikes in one of the heaviest clashes the city has seen ⁵ .	Internationally brokered ceasefire agreement takes effect across south-western Syria ⁶ .	70 families flee from eastern As-Sweida villages to Sahawa and Museifra in Dar'a.	Dar'a City lacking essential infrastructure despite return of thousands ⁷ .	Hundreds of spontaneous returnee arrivals reported, with particularly large numbers recorded in Dar'a district ² .
4 May	Early June	9 July	18 July	November	December

Dar'a Governorate, December 2017

Governorate areas of influence:



DISPLACEMENT

466 - 595 Estimated number of IDP arrivals in assessed communities in December.

1,395 - 1,773 Estimated number of spontaneous returns in assessed communities in December².

Communities with the largest estimated number of IDP arrivals:

Jizeh	150 - 180
Tabriyat	100 - 150
Ankhal	60 - 70

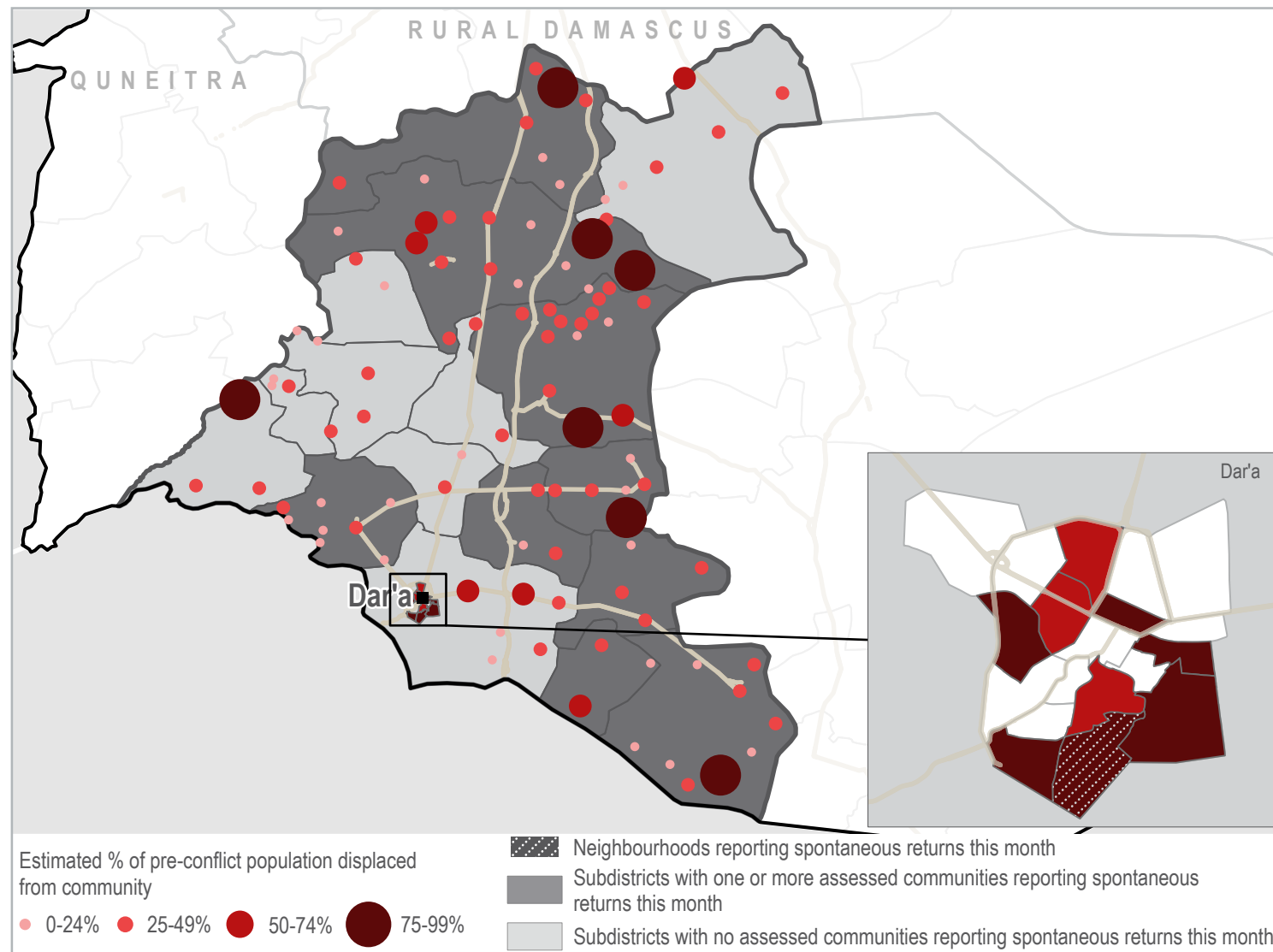
Top 3 sub-districts of origin of most IDPs arrivals^{3,4}:

Nashabiyeh (Rural Damascus)	14%
Bait Jan (Rural Damascus)	14%
Izra' (Dar'a)	14%

96 communities reported no PCP departures. Top 3 reasons for PCP displacement in the remaining **14 assessed communities^{3,4}:**

Reduced access to basic services	71%
Loss of income	64%
Escalation of conflict	29%

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

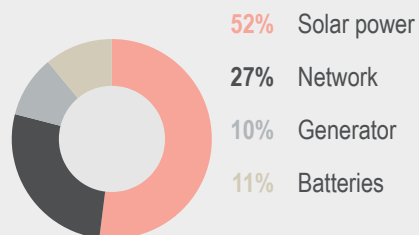


³ Multiple choices allowed.

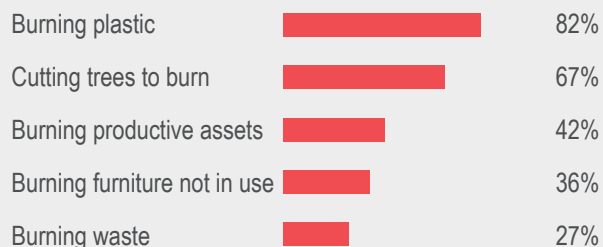
⁴ By percent of communities reporting.

SHELTER AND NFI

Primary source of electricity reported:⁴



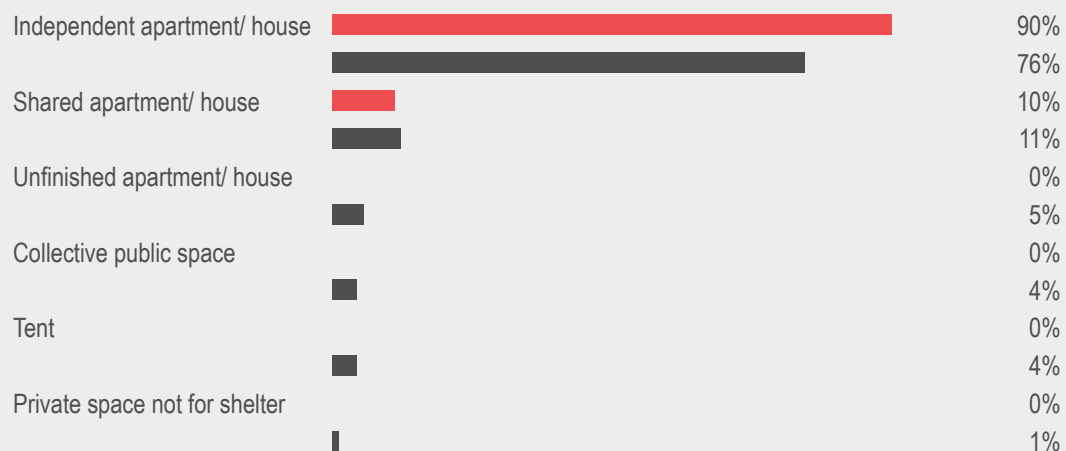
37 communities reported no lack of fuel. Most common strategies to cope with a lack of fuel in the remaining **73** assessed communities^{3,4}:



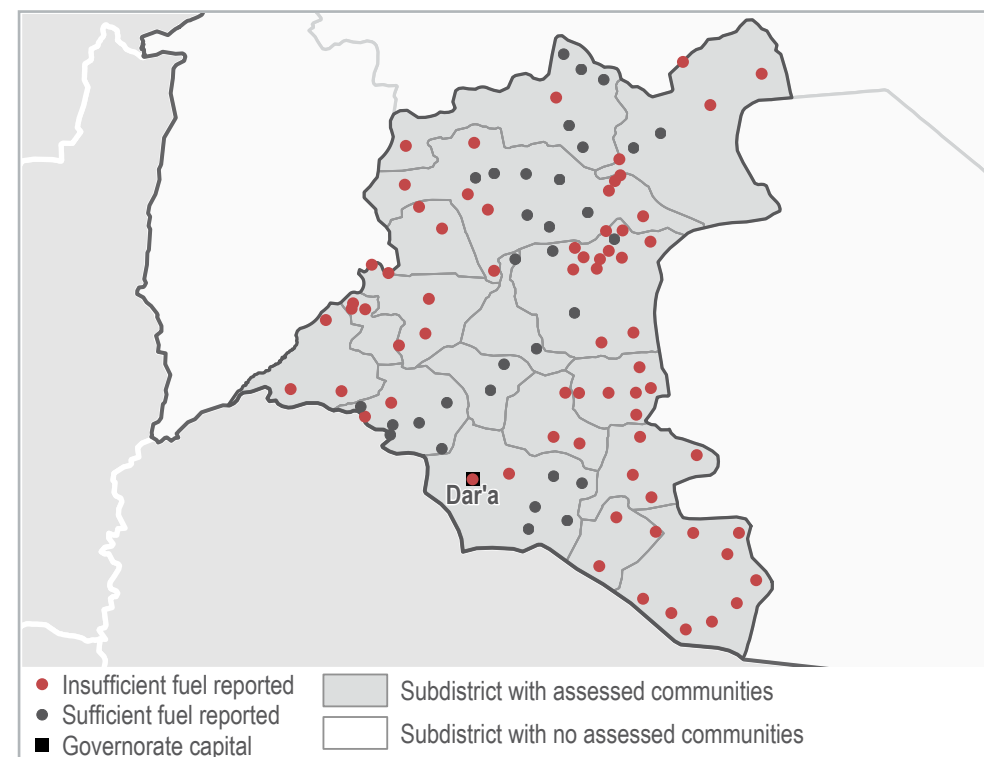
5,233 SYP Governorate average reported rent price in Syrian Pounds (SYP) across assessed communities.⁵

6,882 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 December:	Governorate average price in November:	Syrian average price in December:
Coal (1 kilogram)	407	411	337
Diesel (1 litre)	375	392	472
Butane (1 canister)	6,653	7,151	6,125
Firewood (1 tonne)	79,501	81,884	84,744

³ Multiple choices allowed.

⁴ By percent of communities reporting.

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

HEALTH

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

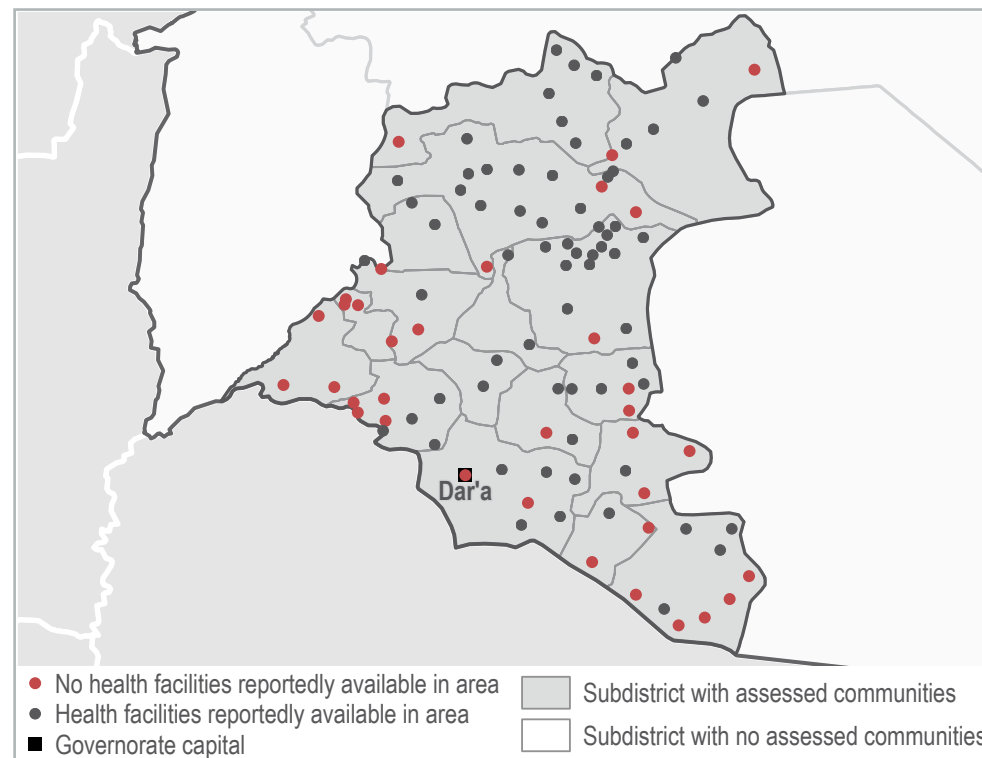
47 communities reported that residents experienced no barriers to accessing healthcare services. The barriers in the remaining 63 assessed communities were^{3,4}:

No health facilities available in the area	60%
High cost of transportation to facilities	43%
Lack of transportation to facilities	41%
Old age	35%
Disability/injuries/illness preventing travel	24%
Security concerns when traveling to facilities	16%
Security concerns to enter/remain in facilities	3%
Family not permitting travel to health facilities	2%

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

Using non-medical items for treatment	75%
Recycling medical items	25%

Presence of health facilities in assessed communities:



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

Chronic disease support	39%
Antenatal care	37%
Medicine	36%

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

Acute respiratory infections	64%
Chronic diseases	61%
Severe diseases affecting those younger than 5	45%

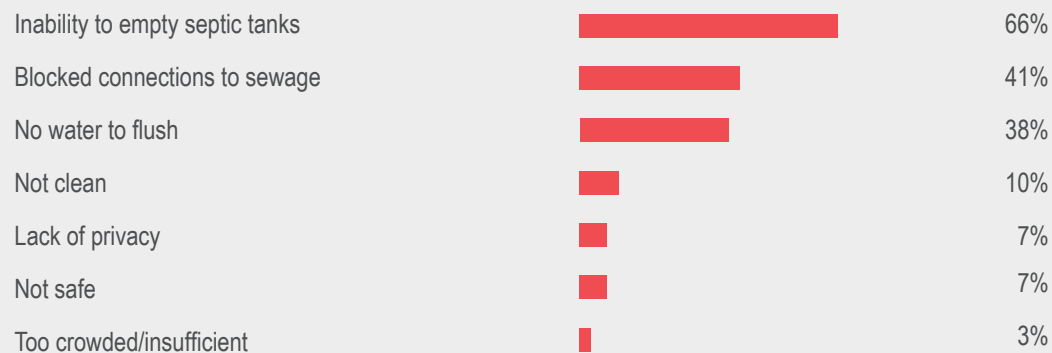
³ Multiple choices allowed.

⁴ By percent of communities reporting.

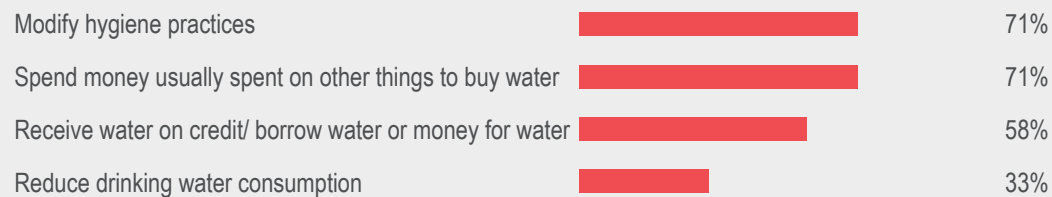


- 1 Community reported that water from its primary source tasted and/or smelled bad.
- 1 Community reported that drinking water from its primary source made people sick.

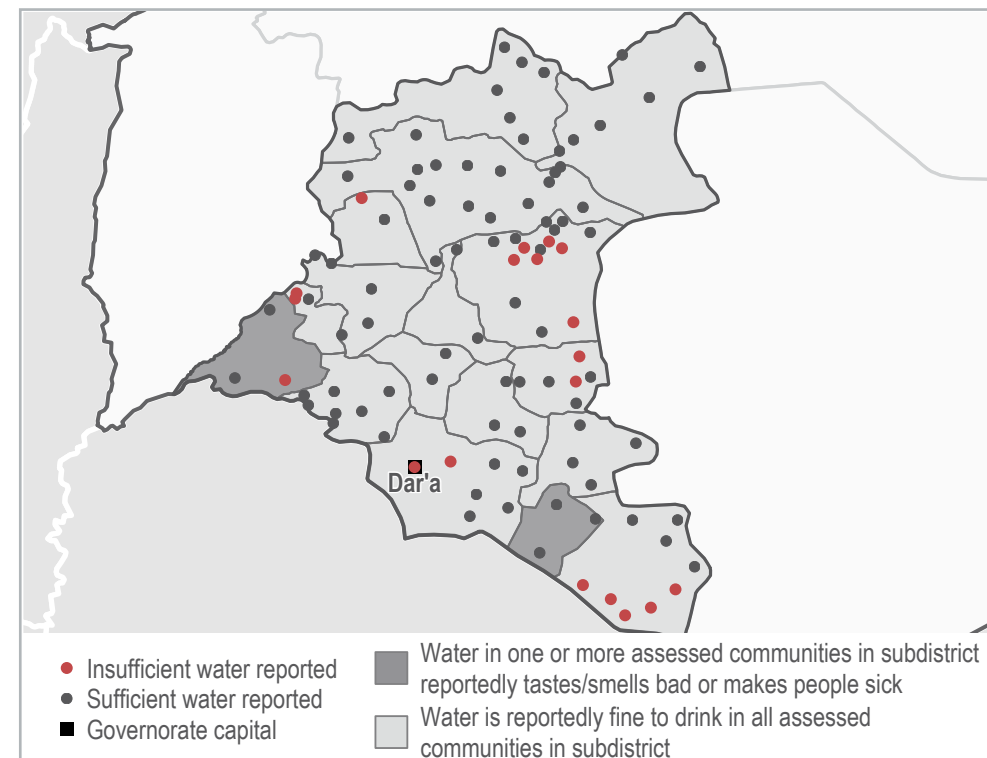
81 communities reported that residents had no problems with latrines. The most prevalent problems with latrines in the remaining 29 assessed communities were^{3,4}:



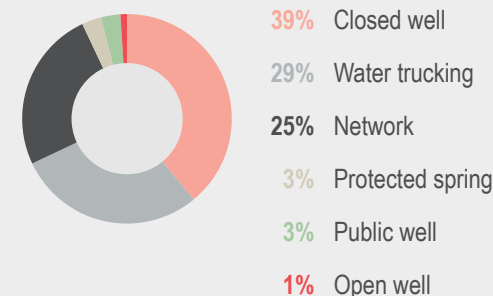
86 communities reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining 24 assessed communities were^{3,4}:



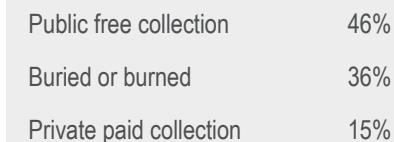
Water sufficiency for household needs:



Primary drinking water source reported⁴:



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



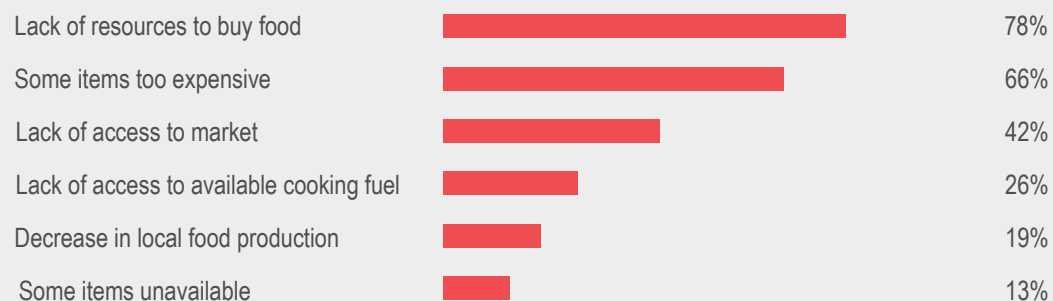
³ Multiple choices allowed.

⁴ By percent of communities reporting.

FOOD SECURITY

- 5** 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.

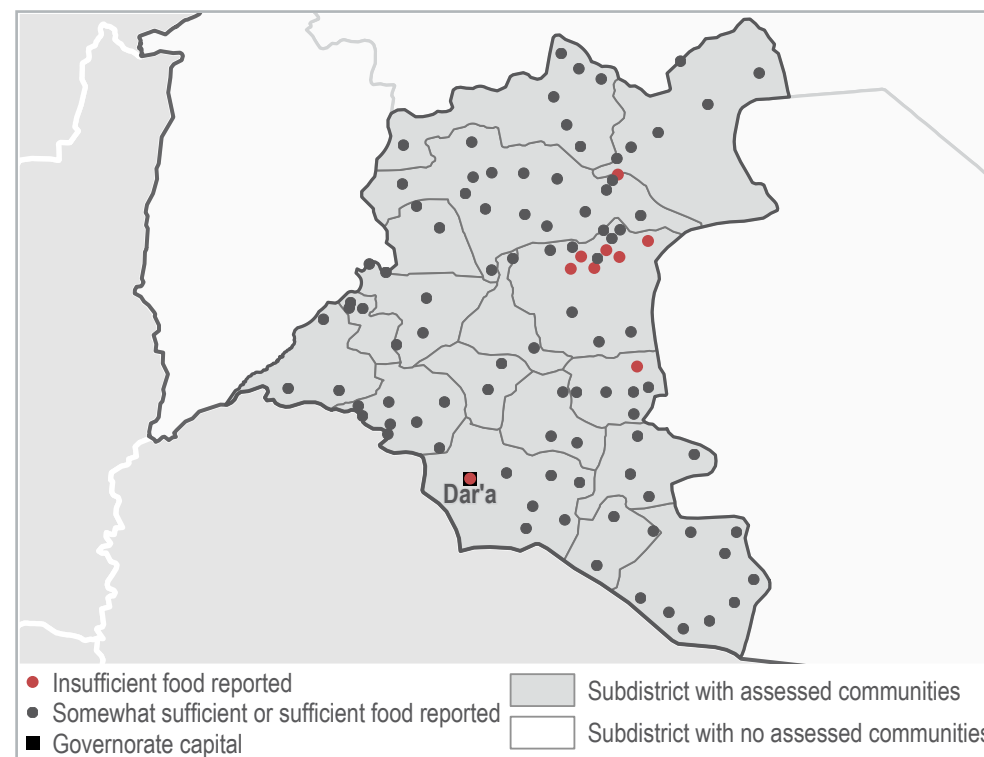
19 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining **91** assessed communities were^{3,4}:



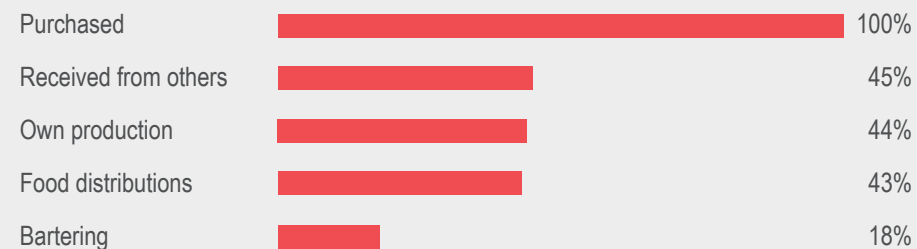
Core food item prices reported (in SYP)⁵:

Food item:	Governorate average price in December:	Governorate average price in November:	Syrian average price in December:
Bread public bakery (1 loaf)	85	94	114
Rice (1 kilogram)	590	590	565
Lentils (1 kilogram)	371	379	472
Sugar (1 kilogram)	284	299	410
Cooking oil (1 litre)	716	725	697

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 December 2017)

LIVELIHOODS

50,000 - 100,000 SYP Most commonly reported household income range⁵.

28,271 SYP Governorate average food basket price^{5,6}.

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

9 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 **101** assessed communities were^{3,4}:



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



³ Multiple choices allowed.

⁴ By percent of communities reporting.

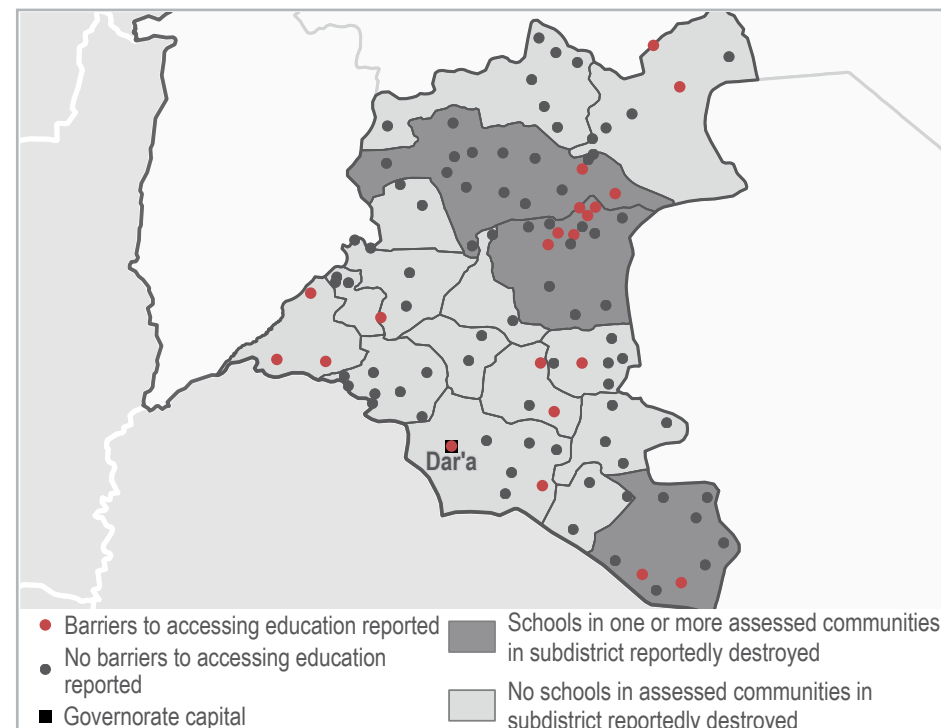
⁵ 1 USD = 434 SYP (UN operational rates of exchange as of 1 December 2017)

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.

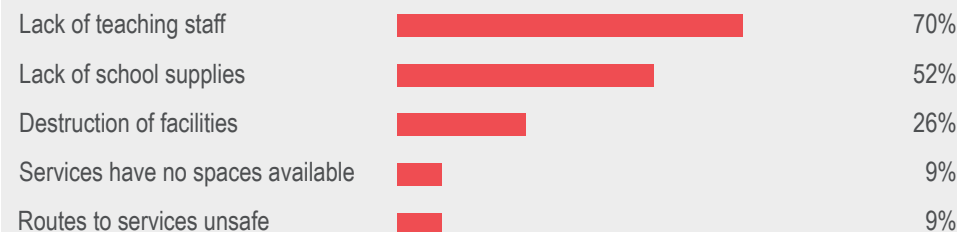
⁷ Extreme food-based strategies: Eating food waste; eating non-edible plants and spending days without eating.

EDUCATION

Barriers to accessing education services:



87 communities reported that most children were able to access education. The most commonly reported barriers to education in the remaining **23** 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 110 communities in January 2018, referring to the situation in Dar'a Governorate in December 2017. It presents key indicators, rather than the entire range of indicators gathered in the HSOS questionnaire. For community-level data on assessed subdistricts in Al Hasakeh, Dar'a, Idleb, Rural Damascus and Quneitra, please refer to the monthly subdistrict factsheets, available on the [REACH Resource Centre](#). The complete HSOS dataset is disseminated monthly via the REACH Syria mailing list.

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

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

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

ENDNOTES

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 UNHCR (10 May 2017). Syria: Flash update on recent events - 10 May 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

⁵ Al-Zarier and Edwards (8 June 2017). Thousands of civilians fleeing home, some for the 3rd time as Daraa city fighting spurs mass displacement. Syria Direct. Retrieved from <http://syriadirect.org>.

⁶ UNHCR (12 July 2017). Syria: Flash update on recent events - 12 July 2017. Reliefweb. Retrieved from <https://reliefweb.int>.

⁷ A-Noufal, Edelman, Zoubi and Al-Masalma (8 November 2017). Opposition officials have little assistance to offer as Daraa residents return to a provincial capital in ruins. Syria Direct. Retrieved from <http://syriadirect.org>.

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).