

HUMANITARIAN SITUATION OVERVIEW OF SYRIA (HSOS)

AL-HASAKEH CITY

Summer 2024 | Urban household assessment

INTRODUCTION

The HSOS¹ Urban Household Assessment is a quarterly review of the humanitarian situation inside cities in Northeast Syria (NES). The assessment collects multi-sectoral information from host community and internally displaced households in Al-Hasakeh city. This situation overview presents findings on the access to services, living conditions, economic conditions, and priority needs across accessible areas in the city.

With a large portion of the humanitarian response in NES focused on urban areas, specifically targeting out-of-camp and host communities,² the assessment addresses the need for comprehensive and regular information on the humanitarian conditions in cities where the impact of an increasingly complex crisis has hit hundreds of thousands.

Sustained economic deterioration and climate shocks resulting in unstable markets and worsening food and water access compound the pre-existing vulnerabilities of urban populations who face persistent insecurity, damaged infrastructure, and complex population dynamics.

The HSOS Urban Household Assessment is conducted in cooperation with the Northeast Syria (NES) NGO Forum. The complete multi-sectoral descriptive analysis can be accessed [online](#) or can be downloaded as an [excel file](#). All HSOS products remain accessible on the [REACH Resource Centre](#).

SYMBOLLOGY

- The indicator refers to the current situation at the time of data collection
- The indicator refers to the situation in the 3 months prior to data collection
- ▼ Findings are not representative
- ◆ The difference in findings for the host and IDP populations is statistically significant

- Host community households
 - IDP households
- If no icon is indicated, the data represents both host community and IDP households

KEY MESSAGES



A high percentage of households in Al-Hasakah city experienced shelter-related issues. The percentage of households reporting discomfort due to high temperatures inside their shelters noticeably increased during the summer months, alongside shortages of essential services like water and electricity. The high [summer temperatures worsened](#)³ an already poor water and electricity situation, leading to increased demand for both resources.



The water situation in Hasakah city remained challenging. A large portion of households relied on private water trucking as their main source of drinking water, and most of them reported concerns about the quality of the water from this source. Among drinking water problems, the calcareous water, in addition to households' perception that it causes illness, has been increasingly noted during the summer months. Water from this source often comes from [unclean and unreliable](#)⁴ supplies, posing health risks to residents; moreover, it is [costly](#)⁵.



Nearly all households faced issues in accessing sufficient quantities and quality of food. While the greater part of households relied on purchasing food from permanent markets as their primary source, the main barrier to accessing sufficient food was a lack of money to buy it. To cope, households reported using strategies such as consuming less preferred or lower-cost food and reducing the number of meals they had each day.

Other HSOS products

REACH also conducts a regular HSOS assessment using a Key Informant (KI) methodology in over 1,000 communities across NES and over 600 communities in Northwest Syria (NWS). The HSOS KI products are the following:

- HSOS KI [Situation Overviews and Datasets](#)
- HSOS KI [Sectoral dashboard](#)
- HSOS KI [Trends analysis dashboard](#)
- HSOS KI [NES Water and electricity dashboard](#)

HUMANITARIAN SITUATION OVERVIEW OF SYRIA (HSOS)

AL-HASAKEH CITY

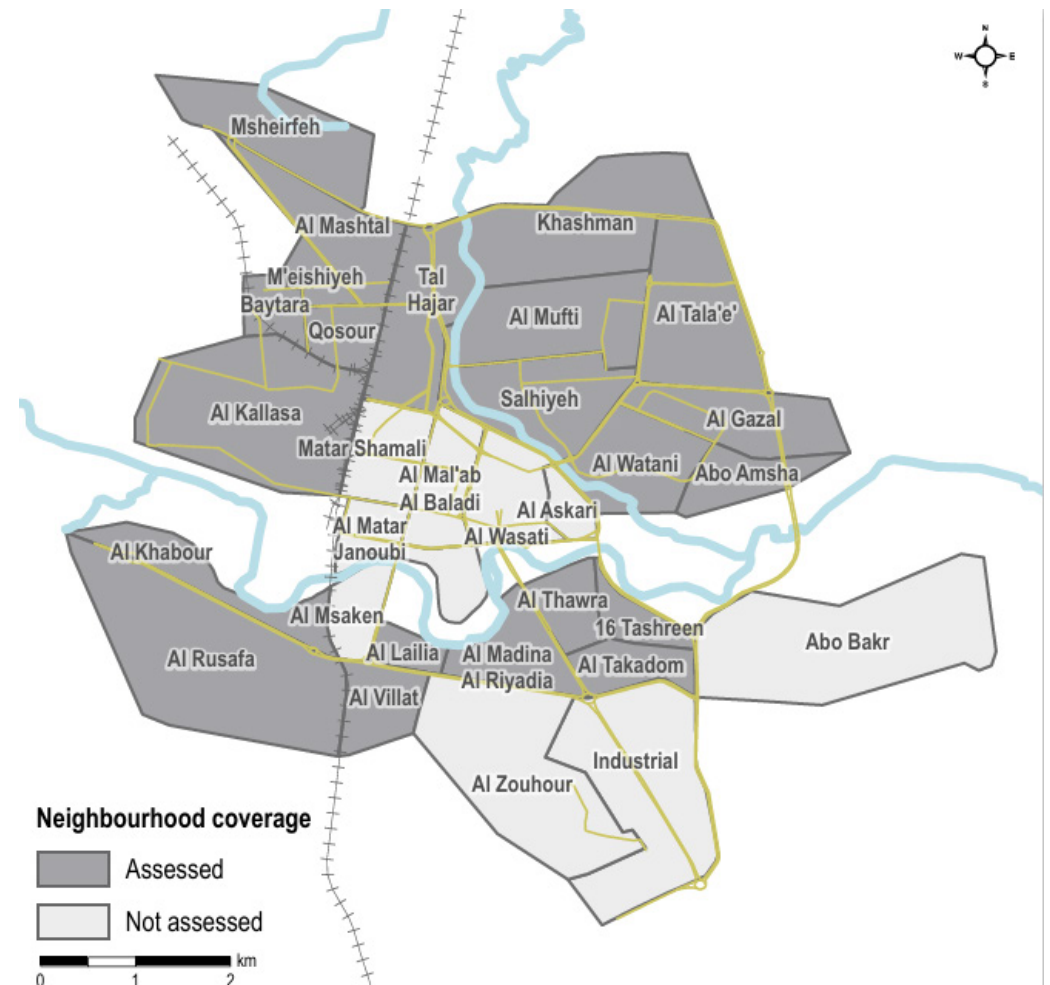
Summer 2024 | Urban household assessment

METHODOLOGY

- The HSOS urban household assessment is conducted using a **household methodology at city level**.
- Face-to-face data collection was carried out by REACH enumerators between **2 and 10 September 2024** covering 206 households (101 host community households and 105 IDP households) in Al-Hasakeh city.
- Findings can be generalised to **the Syrian host community⁶ and the IDP population⁷ at city level** for the neighbourhoods assessed, with a 95% confidence level and 10% margin of error. Representative samples of the host and IDP populations were calculated according to the population estimates collected by the Humanitarian Needs Assessment Programme (HNAP) in September 2022.
- Stratified simple random household selection** was conducted through random spatial sampling using geographic information systems. The selection considered population estimates by neighbourhood and distributed the random samples according to population density.
- The random spatial sampling was conducted across residential areas** of the city, as classified by OpenStreetMap. Areas under the control of the Government of Syria and areas in their proximity, and areas identified as security concerns, were not covered.⁸
- Due to data collection protocols, **the sample excludes households whose members are all below 18**.
- Due to logistical limitations, the sample is biased towards households where at least one adult member is at home during the time of data collection, and towards cooperative, readily available households.

COVERAGE

Hasakeh city neighbourhoods covered in the sample



PRIORITY NEEDS



Most commonly reported **overall** priority needs for host community households (by % of assessed households)⁹

1	Water	78%
2	Food	61%
3	Livelihoods	57%



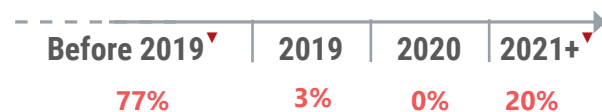
Most commonly reported **overall** priority needs for IDP households (by % of assessed households)⁹

1	Water	70%
2	Food	62%
3	Livelihoods	58%

RETURNNEES

Date of return

(by % of households that returned in each period)



77%

of host community households are returnees

2

average number of displacements for returnee households

IDPs

Date of arrival

(by % of households that arrived in each period)



2

average number of displacements for IDP households

Most common governorates of origin for IDP households

1	Deir-ez-Zor	45%
2	Al-Hasakeh	43%
3	Aleppo	5%

Most common sub-districts of origin for IDP households

1	Ras Al Ain	35%
2	Deir-ez-Zor	21%
3	Abu Kamal	8%

HOUSEHOLD COMPOSITION

Average	# of household members	# of children (0-5)	# of children (6-17)	# of adults (18+)	# of older people (60+)
	6.2	0.9	1.7	3.7	0.4
	6.1	1	2	3.2	0.3

21%

of households with newborns (0-1)

56%

of households with young children (0-5)

72%

of households with school-aged children (6-17)

87%

of households with children (0-17)

SAFETY AND PROTECTION



9%

of households with members who lacked civil documents and needed them

Most common civil documents that household members lacked and needed
(among the 19 households where at least one member lacked and needed a document)▼

1	Syrian identity card issued by the Government of Syria	8/19
2	Birth certificate issued by the Government of Syria	6/19
3	Marriage certificate issued by the Government of Syria	4/19

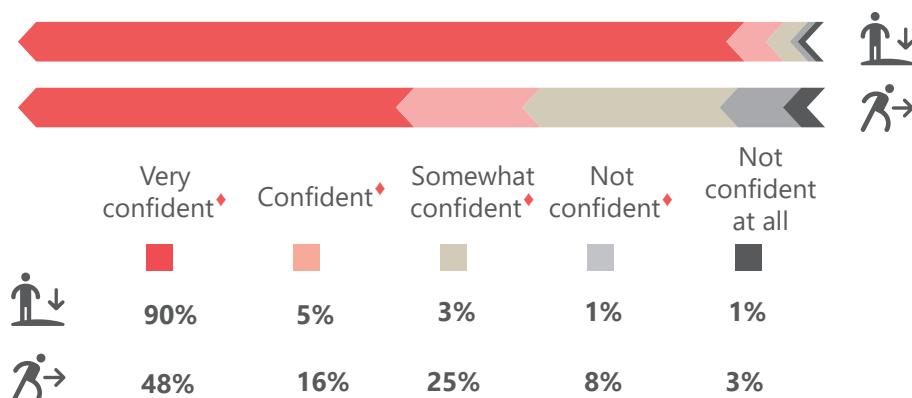


13% of host community households and 72% of IDP households reported housing, land and property concerns

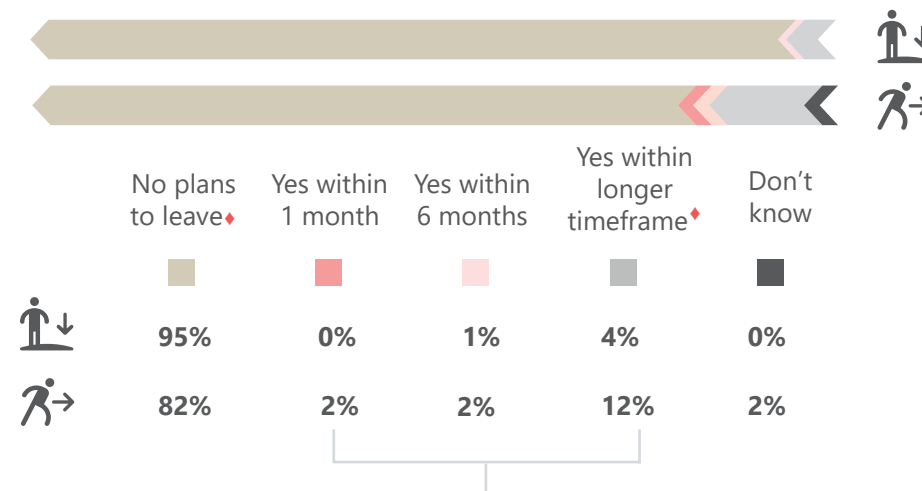
Top housing, land and property concerns for IDP households
(as % of IDP households with concerns)

Rental problems	95%
Threats of eviction due to inability to pay rent	11%

Confidence of being able to reside in the current place of residence for 3 more months, for host community and for IDP households



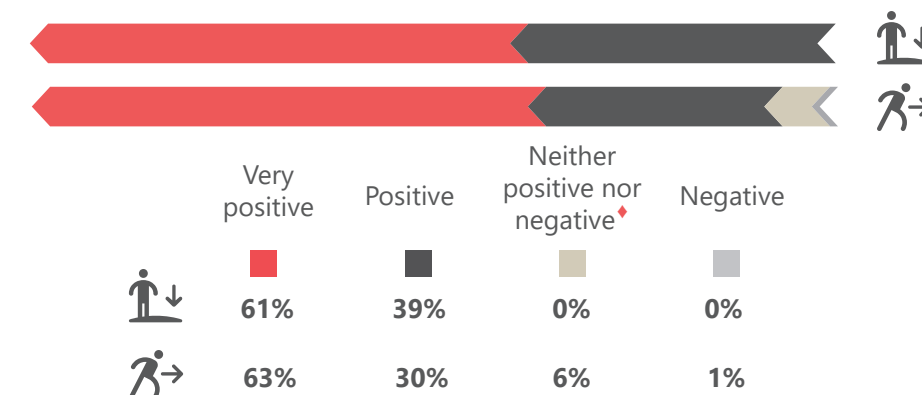
Movement intentions for host community and IDP households



Reasons for leaving
(by % of households who intend to leave)^{10, ▼}

Cost of living is too high	57%
The insufficient access to electricity	43%
The insufficient access to food	35%

Household's relationship with other community members for host community and IDP households



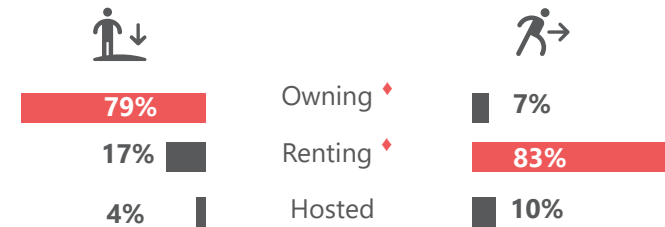
HOUSING SITUATION

Most common shelter types

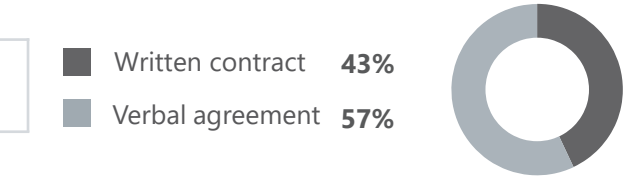
1	Solid/finished house	81%
2	Solid/finished apartment	15%
3	Damaged residential building	2%

Average % of monthly income spent on rent for IDP households
24%
Average expenditure on rent as a % of total IDP household expenditure ¹¹
18%

Most common occupancy arrangements

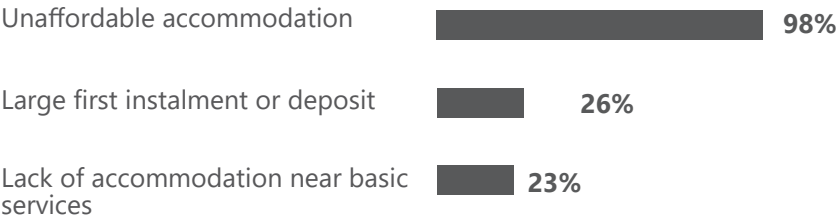


Rental contract type (by % of IDP households who are renting [83%])



81%
of households renting a property who faced difficulties in finding a place to rent

Most common difficulties in finding a place to rent for households (by % of households who faced difficulties [81%])



SHELTER CONDITIONS

86% of households whose shelter had inadequacies

Common shelter inadequacies (by % of households who experienced issues)

56%	Leakage from roof/ceiling during rain	51%
44%	High temperatures inside shelters	49%
51%	Lack of lighting around shelter	36%
40%	Windows/doors not sealed	41%
35%	Poor sanitation (toilet, hand basin, associated connections)	46%
23%	Unable to lock home securely	44%
28%	Lack of lighting inside shelter	35%
27%	Lack of space/overcrowding	33%
16%	Lack of ventilation: stuffy, bad smells	18%
7%	Lack of water (fixtures, associated connections)	21%
10%	Lack of electricity (fixtures, associated connections)	17%
10%	Lack of privacy (space/partitions, doors)	16%

ACCESS TO WATER

Primary source of drinking water



Primary source of non-drinking water



65% of households did not use a secondary source of drinking water

Among households who having a secondary source of drinking water, **Private water trucking** was the most commonly reported [34%]

63%

of households who experienced issues with drinking water

Most common problems with drinking water
(as % of households that had problems with drinking water)

1	Water tastes bad	66%
2	Water is calcareous	65%
3	Water was perceived to be making people sick	30%
4	Water has a bad colour	17%

68%

of households who did not use any methods to make drinking water safer

Most common methods to make water safer
(by % of households)

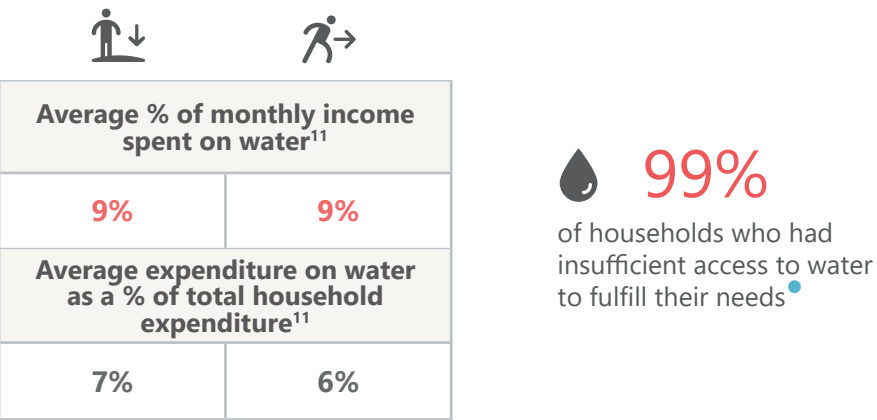
1	Storage and sedimentation	24%
2	Boiling	1%
3	Household filters	8%
4	Solar disinfection	6%

Most common water needs for which households had to reduce consumption because of not having access to sufficient water¹ (as % of households who reduced water consumption [99%])¹⁰

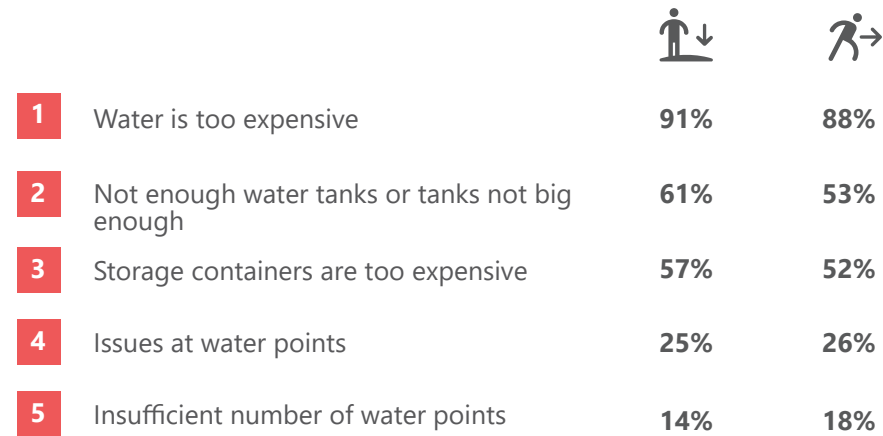
	Doing laundry	73%
	Cleaning (inside house)	72%
	Bathing	69%
	Cleaning (outside house)	61%
	Sanitation (toilet usage)	20%
	Handwashing	9%
	Gardening	8%

¹ Refers to the situation in the 3 months prior to data collection

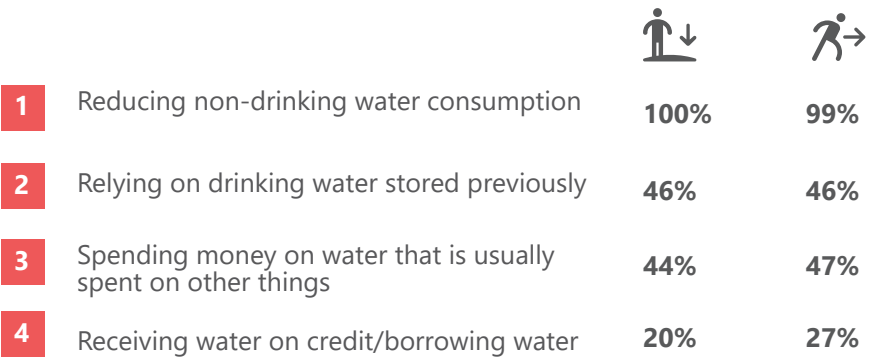
ACCESS TO WATER



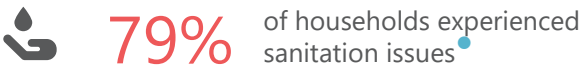
Common barriers to accessing water for households
(as % of households who had insufficient water access [99%])^{10,•}



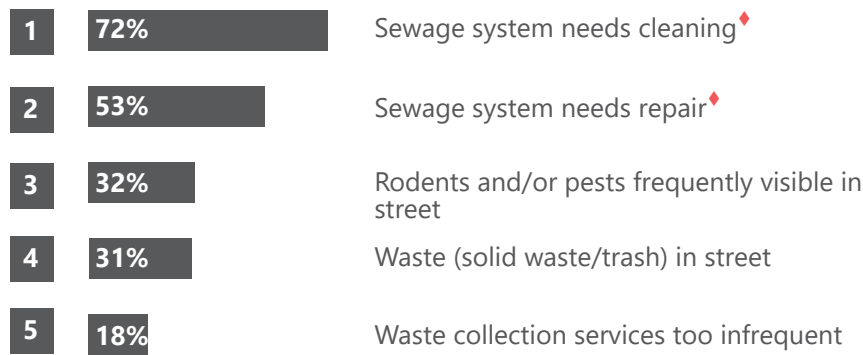
Most common strategies applied by households to avoid running out of water
(as % of households who applied some coping strategy [99%])^{10,•}



ACCESS TO SANITATION



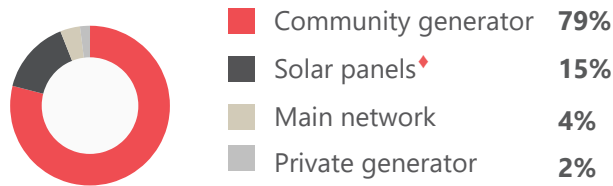
Common sanitation issues for households (as % of households who experienced sanitation issues [79%])^{10,•}



• Refers to the situation in the 3 months prior to data collection
♦ The difference in findings for the host and IDP populations is statistically significant

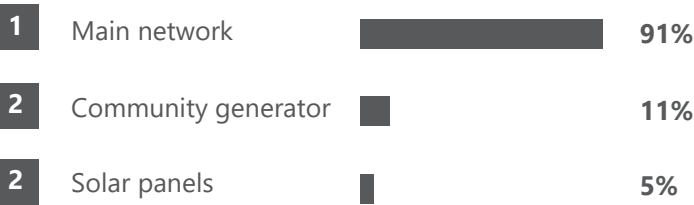
ACCESS TO ELECTRICITY

Primary source of electricity



7%
of households who did not have access to a secondary source of electricity

Secondary source of electricity (by % of households who had access to a secondary source [93%])



98%
of households who experienced issues with accessing electricity

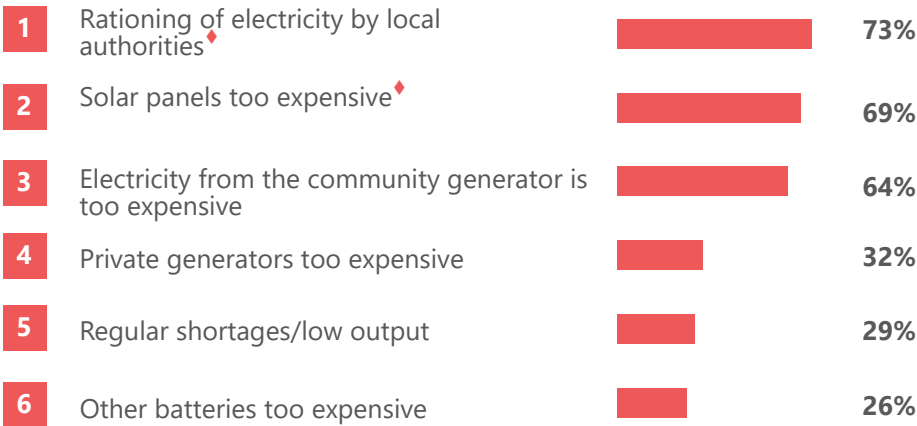
Average % of monthly income spent on electricity ¹¹	
3%	3%
Average expenditure on electricity as a % of total household expenditure ¹¹	
3%	2%

Average number of hours of electricity per day

8.9
Average hours of electricity per day available to households

13 or more	12-11	10-9	8-7	6-5	4-3	2-1	0
10%	7%	20%	53%	7%	1%	2%	0%

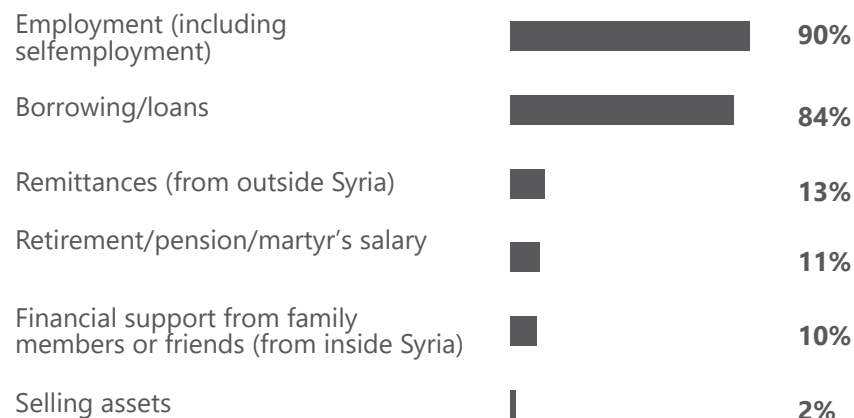
Most common challenges to accessing electricity



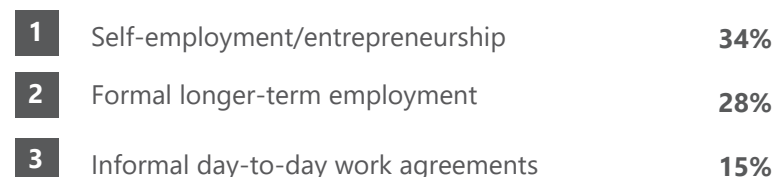
● Refers to the situation in the 3 months prior to data collection
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INCOME SOURCES AND EMPLOYMENT

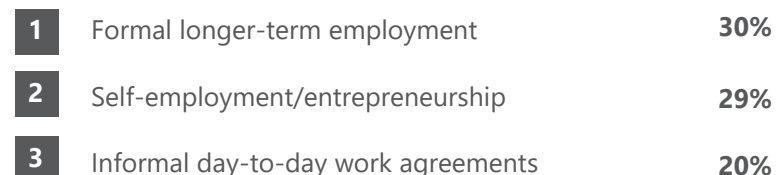
Sources of income in the month prior to data collection¹⁰



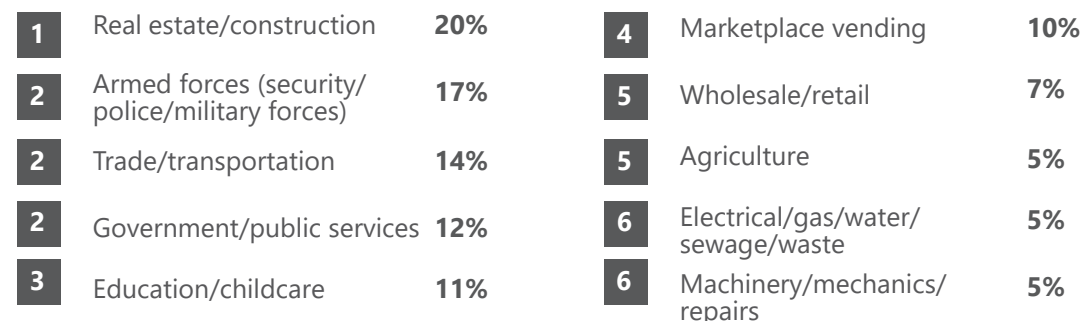
Most common types of employment for host community households¹² ■



Most common types of employment for IDP households ■



Most common employment sectors (by % of households where employment is a source of income [90%])¹⁰ ■



Average number of adults per households who are:		
Employed	1.4	1.3
Not in employment	2.4	1.9
Not employed and looking for a job (unemployed) ¹³	0.5	0.4

42%

of households who reported self-employment/entrepreneurship as a source of income ■

1%

of households where informal day-to-day work was the only employment type ■

INCOME AND EXPENSES

	Average monthly income for a family of 6 members ¹⁴	Average monthly expense for a family of 6 members ¹⁵	Average monthly deficit for a family of 6 members
	2,622,892 SYP	3,254,604 SYP	-631,712 SYP
	2,489,119 SYP	3,354,252 SYP	-865,133 SYP

INCOME AND EXPENSES

Average monthly expense for households who had expenses in the following categories

■ Share of host community households who spent money on the expense category

■ Share of IDP households who spent money on the expense category

🏠 Host community households

🏠 IDP households

→ Electricity

🏠 63,538 SYP

🏠 57,124 SYP

👤 90%

👤 85%

→ Clothes

🏠 35,7931 SYP

🏠 375,000 SYP

👤 29%

👤 11%

→ Tobacco

🏠 293,154 SYP

🏠 297,424 SYP

👤 64%

👤 63%

→ Debt repayment

🏠 241,429 SYP

🏠 381,000 SYP

👤 21%

👤 24%

→ Food

🏠 1,369,444 SYP

🏠 1,370,098 SYP

👤 98%

👤 97%

→ Transportation

🏠 148,652 SYP

🏠 139,043 SYP

👤 88%

👤 90%

→ Education

🏠 250,800 SYP

🏠 216,000 SYP

👤 25%

👤 14%

→ Asset maintenance

🏠 143,400 SYP

🏠 243,043 SYP

👤 25%

👤 22%

→ Communication

🏠 72,872 SYP

🏠 63,735 SYP

👤 93%

👤 93%

→ Healthcare

🏠 317,772 SYP

🏠 474,624 SYP

👤 91%

👤 89%

→ Rent

🏠 552,941 SYP

🏠 520,176 SYP

👤 17%

👤 81%

→ Family support

🏠 4,042,857 SYP

🏠 400,000 SYP

👤 7%

👤 3%

→ Water

🏠 200,290 SYP

🏠 186,054 SYP

👤 92%

👤 89%

→ Non Food Items (NFIs)

🏠 152,566 SYP

🏠 130,149 SYP

👤 98%

👤 96%

→ Social gifts

🏠 137,167 SYP

🏠 228,000 SYP

👤 30%

👤 10%

→ Productive assets

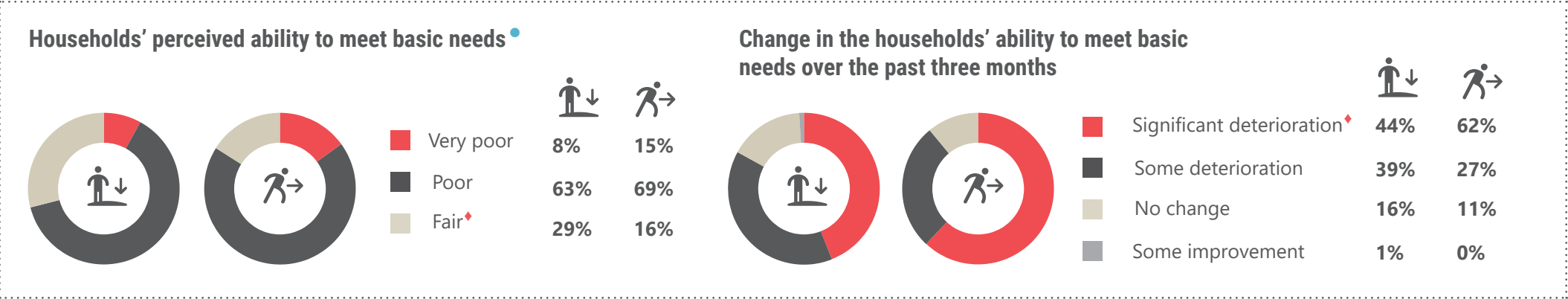
🏠 0 SYP

🏠 500,000 SYP

👤 0%












👤 1%

ABILITY TO MEET BASIC NEEDS

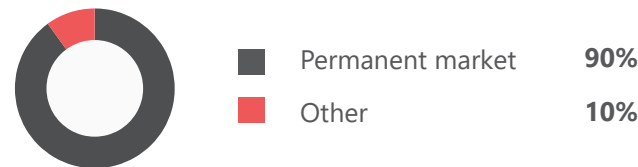


FOOD ACCESS AND CONSUMPTION

Average number of days food groups were consumed by households in the 7 days prior to data collection

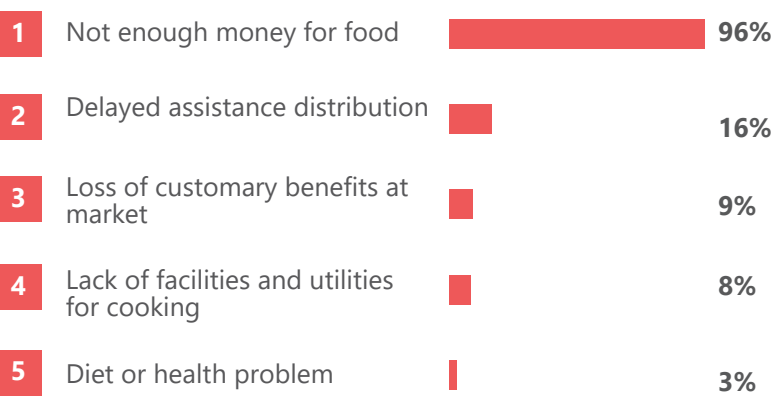
		
 Fish/Meat/Eggs	1.1	1
 Fruit	0.5	0.5
 Pulses, nuts, and seeds	0.8	0.9
 Tubers/roots	2.2	2.3
 Vegetables and leaves	5.1	4.7
 Milk, and dairy	4.6	4.2
 Bread and cereals	6.8	6.8
 Sweets	6.1	6.2
 Oils and fats	6.7	6.7

Most common source of food



96% of households who experienced issues with accessing sufficient quantities and quality of food

Barriers to accessing sufficient quantities and quality of food (as % of households who experienced barriers [96%])^{10, •}



15% of households reporting perceiving that at least one member had lost weight in the last 3 months due to insufficient food access



Average % of monthly income spent on food ¹¹	
65%	64%
Average expenditure on food as a % of total household expenditure ¹¹	
49%	45%
Average monthly food expenditure per person in a household	
242,547 SYP	237,099 SYP
% of households whose monthly food expenditure is more than 50% of their total expenditure	
55%	32%

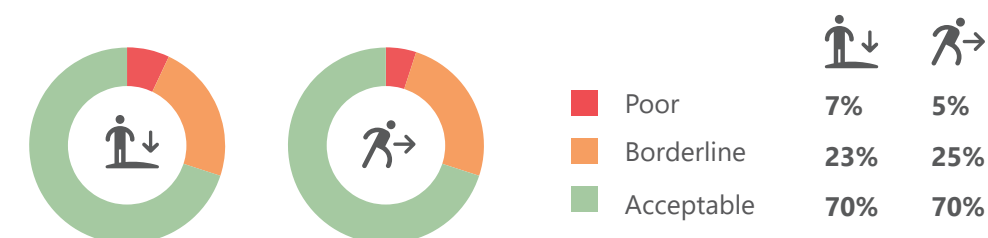
37% of households who did not consume any eggs, meat or fish in the 7 days prior to data collection

65% of households who did not consume any fruit in the 7 days prior to data collection

12
 ■ Refers to the current situation at the time of data collection
 ● Refers to the situation in the 3 months prior to data collection

FOOD CONSUMPTION SCORE (FCS)¹⁷

Food Consumption Score (by % of host community and IDP households)



 **29%** of host community households with children with **poor** or **borderline** food consumption

 **29%** of IDP households with children with **poor** or **borderline** food consumption

FCS Interpretation ¹⁷

Poor food consumption (score between 0-28): This category includes households that are not consuming staples and vegetables every day and never or very seldom consume protein-rich food such as meat and dairy.

Borderline food consumption (score between 28.5-42): This category includes households that are consuming staples and vegetables every day, accompanied by oils and pulses a few times a week.¹⁵

Acceptable food consumption (score >42): This category includes households that are consuming staples and vegetables every day, frequently accompanied by oils and pulses and occasionally meat, fish and dairy.

COPING STRATEGIES

11.7 Average reduced Coping Strategies Index (rCSI) in Hasakeh city

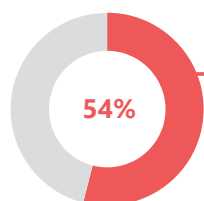
The rCSI is a relative score to measure the frequency and severity of food-related negative coping mechanisms adopted by households to cover their needs. A decrease in score suggests an amelioration in food security. Based on the Syria 2021 Inter-Sector Severity Model, the thresholds for the Reduced Coping Strategies Index are: (1) None/Minimal (rCSI= 0-2), (2) Stress (rCSI = 3-6), (3) Severe (rCSI = 7-11), (4) Extreme (rCSI = 12-19), (5) Catastrophic (rCSI>19). Thus, results indicate a extreme rCSI score in Al-Hasakeh city.

Coping strategies (CS) in the 7 days prior to data collection (for households who experienced barriers in accessing sufficient food [96%])

	Average #days per week CS was applied	% of households who applied CS
Relied on less preferred/less expensive food	4.7	97%
Reduced the number of meals eaten per day	1.8	55%
Reduced the portion size of meals at meal time	1.4	46%
Restricted the consumption by adults in order for young children to eat	1.4	36%
Borrowed food or relied on help from friends	0.7	32%
At least one member of the household spent a whole day without eating	0	2%

ACCESS TO HEALTHCARE

% of households with unmet health needs¹⁸



Most common inaccessible health treatments (by % of households with unmet health needs [54%])^{10,●}

1	Medicines or other commodities	49%
2	Treatment for chronic diseases	42%
3	Surgical services	21%
4	Paediatric consultations	17%
5	Dental services	13%

Most common inaccessible types of medicine (by % of households with unmet health needs related to medicines and other commodities [49%])^{10,▼,●}

1	Painkillers/analgesics	69%
2	Medications for hypertension	52%
3	Antibiotics♦	40%
4	Diabetes medicines	25%
5	Medication for mental health conditions and/or epilepsy♦	17%

89%

of households who experienced issues with accessing healthcare[●]



Average % of monthly income spent on healthcare¹¹

17%

21%

Average expenditure on health care as a % of total household expenditure¹¹

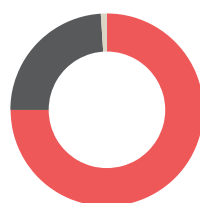
11%

10%

Most common challenges to accessing healthcare (by % of households)^{10,●}

1	Cannot afford price of medicines	78%
2	Cannot afford treatment costs	74%
3	Health facilities overcrowded	26%

Households with at least one member who showed signs of psychological distress[●]



Yes	75%
No	24%
Don't know	1%

Most common coping strategies applied by households who experienced barriers to accessing healthcare [87%]^{10,▼,●}



1	Going to a pharmacy instead of a clinic	81%
2	Foregoing essential treatment	31%
3	Foregoing non-essential treatment	25%

Most common coping strategies applied by households who experienced barriers to accessing healthcare [91%]^{10,▼,●}



1	Going to a pharmacy instead of a clinic	85%
2	Foregoing essential treatment	24%
3	Foregoing non-essential treatment	24%

● Refers to the situation in the 3 months prior to data collection

♦ The difference in findings for the host and IDP populations is statistically significant

▼ Findings are not representative

NOTES ON ANALYSIS

All indicators were analysed disaggregated by population group, as well as aggregated to the entire Syrian city population. Confidence intervals were calculated to assess whether the target margin of error was met, and thus findings were representative. For some indicators, a reduced sample of households answered the question as a result of a skip logic in the questionnaire. In some of these cases, the reduced sample of households also resulted in non-representative findings, which are indicated throughout the factsheet with the icon ▼.

In order to identify statistically significant differences between findings for host and IDP populations, a two-sided significance test was run for each indicator. When multiple hypotheses are simultaneously tested, an adjustment for the multiplicity of tests is necessary to control for the total number of false discoveries and address the problem of selective inference. The false discovery rate (FDR) method was preferred to Family Wise Error Rate (FWER) techniques as they were considered too conservative for this application. With FDR p-value adjustment method, the null-hypothesis (i.e., host and IDP populations have the same characteristics) was rejected in 26 instances at level 0.05, which are indicated throughout the factsheet with the icon ♦.

ENDNOTES

1. The Humanitarian Situation Overview Syria (HSOS) project comprises regular multi-sectoral assessments reviewing information on humanitarian needs and conditions across accessible areas in northern Syria. The HSOS monthly KI assessments can be found [here](#).

2. Findings from a 4W review in January 2022 indicated that roughly 60% of the out of camp response activities in NES are based in urban locations.

3. ARK NEWS, [Hasaka: High temperatures, water outages, and almost non-existent electricity increase the suffering of citizens](#), 21 June 2024.

4. Enab baladi, [Water crisis in al-Hasakah: Tanker water costing 50,000 Syrian pounds](#), 20 June 2024.

5. Enab baladi, [Al-Hasakah residents on a daily quest for water](#), 30 August 2024.

6. Host populations are defined as individuals or groups of people who currently reside in their community of origin, or community of permanent residence prior to 2011. This includes populations that were never displaced as well as previously displaced populations that have returned to their community of origin (defined as returnees).

7. IDPs are defined as individuals or groups of people who have left their homes or places of habitual residence and have settled in the assessed city after 2011, as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, or violations of human rights.

8. Out of the 31 neighbourhoods of Al-Hasakeh city, 30 are residential and 1 is industrial. Out of the 30 residential neighbourhoods, 4 were not assessed due to security concerns. Consequently, the remaining 26 neighbourhoods were assessed.

9. Households were asked to select three highest priority needs. The overall priority need refers to the frequency a need was selected in the question.

10. Respondents could select multiple answers, thus findings might exceed 100%.

11. Computed for households who had this particular expense in the 30 days prior to data collection.

12. Longer-term formal employment is defined as employment with a written agreement whose duration is more than 1 month. Short-term formal employment is defined as employment with a written agreement whose duration is less than 1 month.

13. Calculated for households where employment is a source of income.

14. Computed as the mean of (household income/number of household members)*6.

15. Computed as the mean of (household expense/number of household members)*6.

16. Computed by comparing (household income/number of household members) to (2,194,214 SYP/6), where 2,194,214 is the median value of the Survival Minimum Expenditure Basket (SMEB) for a family of 6 in Al-Hasakeh governorate, from the June 2024 Joint Market Monitoring Initiative (JMMI)

17. The FCS is a composite score based on dietary, diversity, food frequency, and relative nutritional importance of different food groups consumed by a household throughout 7 days. Refer to: The United Nations World Food Programme (WFP). (May 2014). WFP Food Consumption Score - Technical Guidance Sheet. Retrieved from: wfp.org

18. Unmet health needs refer to anyone in the household who needed or wanted to access health-care (including medicines) but could not access it

ABOUT REACH

REACH Initiative 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).