

Executive Summary

Between 26 November and 7 December 2016, REACH, in collaboration with SIRF, assessed the humanitarian situation in 43 communities in Syria currently facing restrictions in movement and access, 20 of which are classified by the UN as besieged and 23 as hard to reach¹. Data gathered refers to the humanitarian situation in November. Coverage for nine communities in Wadi Burda resumed in November, and five new communities in Rural Damascus (Bait Jan, Mazraet Bait Jan, Kafr Hoor, Beit Saber and Betima) were assessed for the first time. All profiled communities were located in Rural Damascus, Homs, Deir Ez Zor and Damascus governorates and information was gathered through a total of 154 community representatives (CRs). **Across assessed indicators, the overall humanitarian situation in the assessed communities remained poor, with several of the communities becoming increasingly vulnerable in comparison to the situation in October.**

In November:

- Escalations in conflict were reported in Khan Elshih, Al Waer, At Tall and in some communities of Eastern Ghouta (Duma, Harasta and Jisrein).
- A truce agreement was reached in Khan Elshih on 27 November, but the anticipated removal of access restrictions and entry of humanitarian aid was reportedly not immediately implemented. A truce agreement was also signed in At Tall on 2 December.
- The communities of Hajar Aswad, Khan Elshih, Jober, and Nashabiyeh (Eastern Ghouta), previously classified by the UN as hard to reach, were re-classified as besieged.
- The Wadi Burda community of Bseimeh, which had not previously been classified by the UN, was classified as hard to reach.

Where restrictions tightened, reductions in the quantities of food, fuel, NFIs and medical items permitted to enter were reported. In general, these communities also experienced

decreased amounts of goods available in markets and in the capacity of their health facilities to function, indicating the particular vulnerability of such populations.

Of the 43 communities assessed, only six reported receiving humanitarian assistance in November (Az Zabdani and Madaya, Deir Ez Zor City, Ar Rastan, and Hama and Qudsiya).

In Az Zabdani and Madaya, Khan Elshih, At Tall, Talbiseh and Taldu and the Deir ez Zor neighbourhoods of Joura and Qosour, populations experienced critical levels of food insecurity and were forced to resort to negative coping strategies such as skipping meals, not eating for days or eating non-food plants. In Madaya, Joura and Qosour illnesses and deaths attributable to a lack of food were reported, whereas in Az Zabdani no core food items have been available in markets since October. In Khan Elshih, bread became unavailable in November.

Across assessed communities, health services were affected by escalations in conflict and continued access restrictions, resulting in inadequate supplies of medication and medical services. In **Madaya** additional cases of meningitis and kidney failure – some fatal – were reported; in **Az Zabdani** an outbreak of diarrhea was reported for the first time since the community was first assessed in June 2016. **In Khan Elshih emergency care points and primary healthcare facilities closed down due to a lack of medical supplies and the remaining mobile clinic became inoperable after a fire – no medical facilities remain in the community.** Similarly, in **Homs (Al Waer)** medical services available decreased as some facilities were damaged following an intensification in hostilities. In addition, access restrictions prevented medical items from entering the community.

Based on data referring to the humanitarian situation in November in the communities of Khan Elshih, Madaya, Az Zabdani, and Joura and Qosour, populations indicate critical levels of vulnerability and are in need of emergency humanitarian assistance.

Assessed communities in November 2016 by classification¹

Besieged	Az Zabdani, Madaya, Bqine ² , Deir Ez Zor City (Joura, Qosour), Damascus (Jober), Madamiyet Elsham, Hajar Aswad, Yarmouk, Khan Elshih, Homs (Al Waer), Eastern Ghouta region (Duma, Arbin, Saqba, Harasta, Hammura, Kafr Batna, Jisrein, Ein Terma, Zamalka, Nashabiyeh)
Hard to reach	Ash Shajara, Ar Rastan, Talbiseh, Taldu, At Tall, Hama, Qudsiya, Damascus (Burza and Tadamon), Bait Jan region (Bait Jan, Beit Saber, Beitema, Kafr Hoor, Mazraet Beit Jin), Wadi Burda region (Barhaliya, Hseiniyeh, Kafir Elzeit, Deir Maqran, Ein Elfijeh, Suq Wadi Burda, Deir Qanun, Bseimeh, Kafr Elawamid)

Overview

In order to inform a more evidence-based response to addressing the needs of vulnerable communities across Syria, REACH, in coordination with the Syria INGO Regional Forum (SIRF), regularly monitors the humanitarian situation within communities facing restrictions on civilian movement and humanitarian access. The Syria Community Profiles, which commenced in June 2016, intend to provide operational and strategic actors with an understanding of the humanitarian situation within these communities by assessing availability and access to food, healthcare, water, education and humanitarian assistance, price data, as well as the specific conditions associated with limited freedom of movement. The list of assessed communities is not intended to be exhaustive of the total areas in Syria facing limited freedom of movement and access. With greater partner inputs and collaboration, the list of profiled locations will be expanded. This overview presents a summary of the overarching observations identified across communities assessed.

Methodology and Limitations

Data presented in the Community Profiles is collected through contact with community representatives (CRs) residing within assessed locations, who are responsible for gathering sector-specific data from their areas of expertise (i.e. health, education). Data for this round was gathered during the end of November and early December, referring to the situation in November 2016. Each community has a minimum of three CRs, with up to six depending on the location. The network continues to expand with ongoing collaboration with SIRF and other partners.

During analysis, data is triangulated through secondary information including humanitarian reports, news and social media monitoring, and partner verification. Comparisons are made to findings from previous assessments (if any) and follow up is conducted with CRs to build a thorough understanding of situational developments within locations. In the case of some profiles, multiple communities are presented together; decisions to do so are based on their geographical proximity to one another or similarities in the access restrictions faced by populations.

Due to the challenges of data collection inside Syria, representative sampling, entailing larger-scale data collection, remains a barrier. Consequently, information is to be considered indicative rather than generalisable across the population of each assessed community. Further, an improvement or deterioration in circumstances between months may not necessarily indicate a trend, but rather a distinct development specific to the month assessed. The exclusion or inclusion of assessed communities is influenced by the availability of CRs within locations and therefore should not be considered representative of all areas within Syria facing acute vulnerability. Finally, the level of information presented in each profile varies due to difficulties in obtaining data from certain locations.

Recent Developments

Based on information collected, the following communities experienced notable developments during November 2016.

Khan Elshih: On 27 November, parties to the conflict reached a truce agreement in Khan Elshih, and 3,000 fighters and their families were reportedly evacuated to Idlib governorate. Despite the agreement, access restrictions remained in place at the time of writing, with aid unable to enter the community and civilians unable to leave. Local supplies of many foods along with hygiene and sanitation items ran out due to these continuing restrictions, and residents began to skip meals to cope. Since the truce was reached, all health facilities in the community have been non-operational due to damage or lack of supplies. Fuel shortages have made it difficult to operate generators, which in turn has led to reduced access to electricity and water.

At Tall: Parties to the conflict reached a truce agreement in At Tall on 2 December, with 2,300 fighters and their families relocated to Idlib governorate. In November, prior to the truce, the overall humanitarian situation in At Tall deteriorated sharply due to increased hostilities. More severe access restrictions were imposed on civilians trying to leave or enter the community, and fewer commercial vehicles were permitted entry, both of which led to a reduction in the amount of food and non-food items, fuel and medicine reaching the community. In November, residents began to resort to negative food-related coping strategies such as skipping meals, reported for the first time since the community was first assessed in June 2016.

Homs (Al Waer): A significant escalation in conflict in November led to a marked deterioration of the humanitarian situation in Al Waer. For the first time since the community was first assessed in June 2016, no humanitarian vehicles were permitted to enter, while no commercial vehicles were permitted for the first time since September. This led to shortages and price increases for nearly all assessed commodities. Access to food, fuel, NFIs and medical items decreased in November, while destruction to health facilities, as a result of clashes, led to reduced access to health services. Access to education also decreased due to the greater security risks.

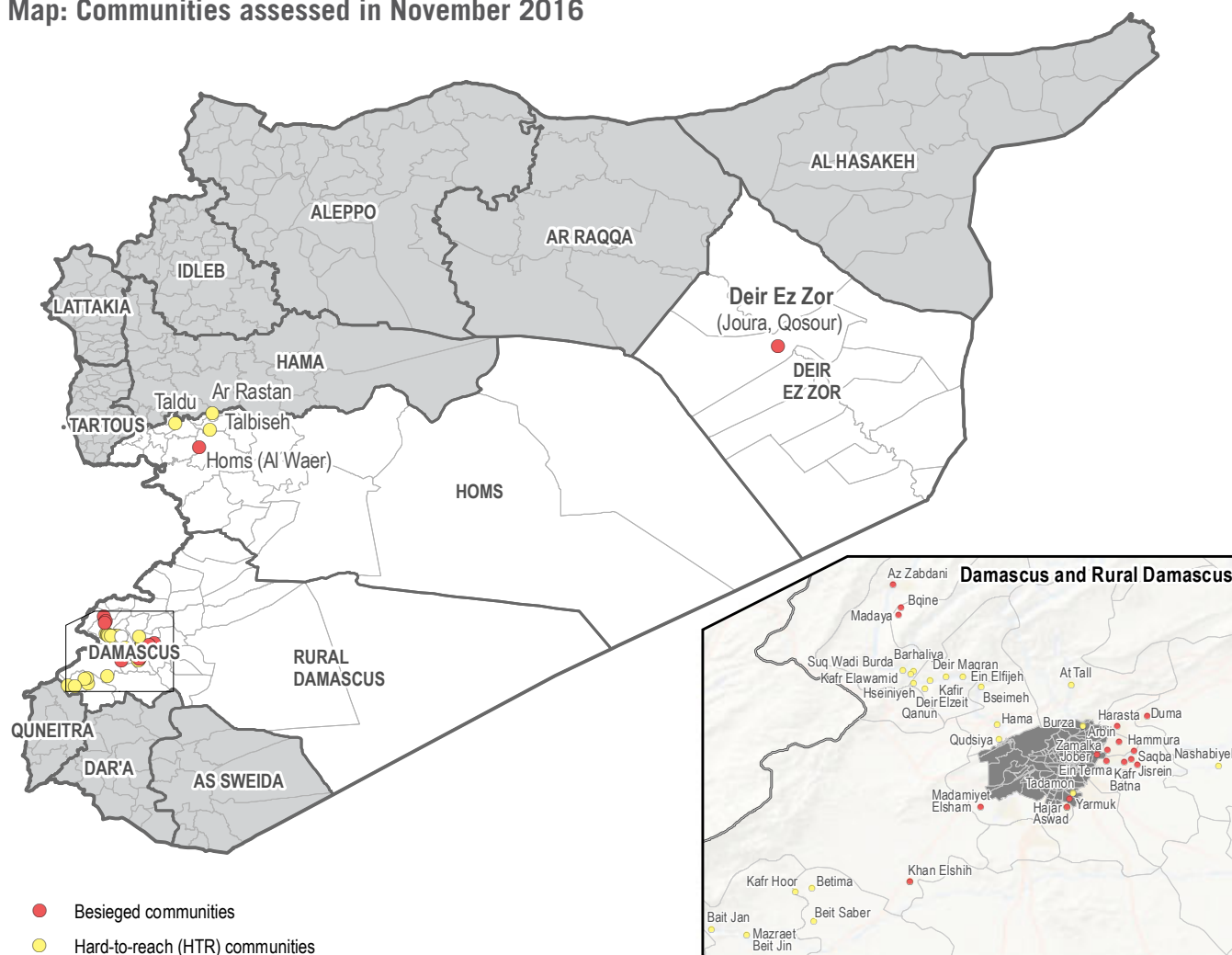
Az Zabdani, Madaya and Bqine: Food security continued to deteriorate, with CRs reporting decreased access to bread due to depleted flour stocks. In Madaya, the availability of all core food items decreased further, with some neonatal deaths attributed to a lack of food. Continued depletion of medical stocks led to a deteriorating health situation, with additional cases of meningitis and kidney failure reported, some fatal. Access to electricity decreased as generators began to run out of fuel. In Az Zabdani, lack of electricity led to reports of insufficient water availability as pumping stations became inoperable, a problem not reported in previous assessment. On 28 November, an interagency convoy entered Madaya for the first time since September; the impact of this convoy on the overall humanitarian situation will be assessed in December.

Eastern Ghouta: Hostilities continued to escalate throughout November in Eastern Ghouta, affecting access to basic services. The region's last operational water network, in Jisrein, was rendered non-functional in November following a round of shelling. Schools across Eastern Ghouta were temporarily closed for one week in late November due to elevated levels of violence.

Ar Rastan, Talbiseh and Taldu: On 22 November, Ar Rastan received its first delivery of humanitarian aid since August, containing food, NFIs, medicine and medical equipment. This delivery relieved some of the strain on health services, improved access to food within the community and was reflected in decreased prices of some food items. By contrast, Talbiseh and Taldu received no aid this month; aid last reached the communities in October. The depletion of flour stocks in Talbiseh forced a halt to distributions by local councils, which caused bread to become more expensive and harder to access. In both Talbiseh and Taldu, residents began skipping meals in November to cope with a lack of food.

Wadi Burda: The Wadi Burda communities continued to be affected by restrictions imposed in October on the number of traders and amount of goods permitted to enter the region. While nearly all core goods remain available, the average cost of a standard food basket has increased by 19% since September. In addition, the implementation of electricity rationing by authorities has reduced access to the network from 4-8 hours to 2-4 hours per day, which has in turn made it more difficult to access the water network.

Map: Communities assessed in November 2016



Key Findings

Movement of Civilians

Communities where no civilians could enter or leave:

- **Khan Elshih:** Since October, formal entry points have been closed and informal entry points have been too dangerous to use. This remained the case at the time of writing (mid December,) even after a truce agreement came into force on 27 November. However, as part of the truce agreement, 3,000 fighters and their families were evacuated to Idlib governorate.
- **Deir ez Zor city (Joura and Qosour):** Nobody has reportedly been able to enter or leave the besieged neighbourhoods of Joura and Qosour in Deir ez Zor city since they were first assessed in June 2016.
- **Az Zabdani:** Nobody has reportedly been able to leave Az Zabdani since June.
- **Madaya:** Nobody has reportedly been able to leave Madaya since September, when a limited number of medical evacuations were permitted.

Increased access restrictions:

- **At Tall:** Due to increased hostilities and increased access restrictions in November, fewer people were able to leave or enter At Tall than in October. Women, children, employees and students could leave on weekdays, upon presentation of identification.

Overall, the risks faced by populations attempting to enter or leave communities during November included: gunfire, shelling, detention, conscription, confiscation of documents and verbal, sexual and physical harassment.

In addition to commercial and humanitarian vehicles bringing goods into locations, many communities relied on the capacity of populations to travel, either through formal or informal routes, out of the community and return with food. Thus, the quantity of food, fuel, medical, and sanitation and hygiene items able to enter communities with severe access restrictions was highly limited, and shortages often corresponded to increased restrictions on movement. In **At Tall** and **Khan Elshih** for instance, availability of many goods decreased due to high restrictions on civilian movement in November.

Movement of Commercial Vehicles

Communities into which commercial vehicles could enter:

- **Bait Jan:** More commercial vehicles could enter in November than in October. However, vehicles faced restrictions including only being allowed entry on certain days, payment of fees, vehicles searches before entry, and presentation and handing over of documents.
- **Eastern Ghouta:** As was the case in October, some commercial vehicles were able to enter one day per week through one entry point, but vehicles faced restrictions on quantities and contents.
- **Wadi Burda:** Commercial vehicles continued to face restrictions and were limited to carrying only 300 kg loads with less than \$100 worth of medical items every ten days, as had been the case in October.
- **At Tall:** The number of commercial vehicles able to enter decreased compared to October. Vehicles faced restrictions including only being allowed to enter on certain days, loads being searched with some items confiscated before entry and traders being required to present documentation and pay fees.

Commercial vehicles were not permitted to enter all other communities assessed in November. In **Al Waer**, commercial vehicles were not permitted to enter the community in November for the first time since September.

Humanitarian Assistance*

- **Madaya and Az Zabdani, Deir Ez Zor City (Joura and Qosour), Ar Rastan, and Hama and Qudsiya** received humanitarian deliveries in November.
- For the first time since August, no aid entered **Al Waer, Talbiseh and Taldu** in November.
- Since August 2016, no humanitarian deliveries have reportedly entered the communities of **Yarmouk, Hajar Aswad, At Tall, Jober, Tadamon, Khan Elshih, the Bait Jan communities, the Wadi Burda region, or Arbin, Saqba, Hammura, Kafr Batna, Jisrein, Ein Terma, Zamalka and Nashabiyeh in Eastern Ghouta.**

	August	September	October	November
Az Zabdani	✗	✓	✗	✓
Madaya/Bqine	✗	✓	✗	✓
Madamiyet Elsham	✗	✓	✓	✗
Yarmouk	✗	✗	✗	✗
Homs (Al Waer)	✓	✓	✓	✗
Eastern Ghouta**	✗	✗	✓	✗
Deir Ez Zor City (Joura, Qosour)***	✓	✓	✓	✓
Talbiseh	✓	✓	✓	✗
Ar Rastan	✓	✗	✗	✓
Taldu	✓	✓	✓	✗
Hajar Aswad	✗	✗	✗	✗
At Tall	✗	✗	✗	✗
Hama	✗	✗	✓	✓
Qudsiya	✗	✗	✓	✓
Jober	✗	✗	✗	✗
Burza	✗	✗	✓	✗
Tadamon	✗	✗	✗	✗
Khan Elshih	✗	✗	✗	✗
Wadi Burda	✗	✗	✗	✗
Ash Shajara	✗	✗	✓	✗
Bait Jan****	No data	No data	✗	✗

*The reported delivery of humanitarian assistance does not necessarily imply that such assistance was sufficient, adequate, or that all portions of the affected population were able to access it.

**The humanitarian delivery to Eastern Ghouta in October reportedly only reached the communities of Duma and Harasta.

***Reported humanitarian deliveries to the besieged areas of Joura and Qosour in Deir Ez Zor City have occurred via airdrops; no humanitarian vehicles have entered the communities since assessments began.

****While no data was collected for August and September, no humanitarian deliveries have entered Bait Jan in the past according to community representatives.

Health Systems

Communities that experienced an improved health situation:

- **Ar Rastan:** Following a humanitarian delivery in the community in November, previously unavailable child immunization services became available, and residents reportedly no longer carried out surgery without anaesthesia as a coping strategy.

Communities experiencing especially severe and/or deteriorating health situations:

- **Az Zabdani:** Additional medical items, including blood transfusion bags and clean bandages, became unavailable in November compared to October due to the continuing tight access restrictions. A diarrhea outbreak was reported in November for the first time since the community was first assessed in June 2016.
- **Madaya:** Additional cases of meningitis and kidney failure were reported in November. These were first reported in September and October respectively; one known case of death attributed to kidney failure was reported. Neonatal deaths attributed to a lack of food were also reported.
- **Khan Elshih:** By the end of November, there were reportedly no functioning medical facilities, and therefore, no medical services were available. Some facilities closed down due to lack of medical items caused by depletion of stocks, and the last facility available in the community became inoperable due to a fire at the end of the month. Some medical personnel in the community were reportedly killed as a result of shelling.
- **Al Waer:** A number of previously available medical services became unavailable or sometimes available due to the lack of medical items as a result of increased access restrictions on commercial vehicles. The number of medical facilities available in the community decreased following damage caused by shelling. High numbers of civilian casualties were reported as a result of intensified clashes.
- **Deir ez Zor city (Joura and Qosour):** As was the case in October, health facilities were inaccessible to the majority of the population in the community, and no doctors or nurses were available. Residents reportedly continued resorting to treating themselves at home without medicine or basic medical supplies. As in previous months, deaths attributable to a lack of food were reported.

Food Security

The communities facing the tightest restrictions on civilian movement and commercial vehicles entering are generally the most food insecure.

Communities experiencing deteriorating food security:

- **Az Zabdani and Madaya:** Both communities faced critical levels of food insecurity in November. In Madaya, deaths and illnesses attributed to a lack of food were reported in November, as food stocks depleted due to continued access restrictions. In Az Zabdani, all core food items remained unavailable for purchase, as was first reported in October. Populations in both communities resorted to skipping meals and reducing meal size to cope with the lack of food.
- **Deir ez Zor:** Populations continued to rely on extreme coping strategies, such as going days without eating and eating non-food plants, as many core food items remained unavailable or generally unavailable. The amount of food items received via airdrops was reportedly lower than in October, and the communities continued to experience deaths attributed to a lack of food.
- **Khan Elshih:** Bread became unavailable in the community in November as local councils' remaining stocks fully depleted. Most remaining core food items also became unavailable in markets, with certain grains remaining available for less than six days during the month; populations reported skipping meals and reducing meal sizes to cope.

Unusual outbreaks of disease:

- **Madaya:** Additional cases of meningitis and kidney failure, first reported in September and October, respectively, were reported in November with associated deaths reported.
- **Wadi Burda:** The communities of Bseimeh, Souq Wadi Burda and Deir Qanun experienced an outbreak of Guillain-Barre syndrome in September, reportedly resulting in one death and five cases of paralysis that month. While there were no known new cases of the disease in November, the existing cases remained untreated as medicine and personnel intended to treat the outbreak were unable to enter Wadi Burda.
- **Deir ez Zor city (Joura and Qosour):** A skin disease was reported in November, thought to be a result of using contaminated water. However, this could not be verified with water testing or medical reports.

Other communities/developments:

- **At Tall:** Fewer medical items entered the community in November due to increased access restrictions. However, local NGOs were able to provide child immunization services, which had previously been unavailable in the community.
- **Jober:** Medical personnel who had entered Jober in October, to help the community cope with escalating clashes, left the community in November once the conflict in the area had subsided.

Medical items commonly listed as unavailable across communities: Blood transfusion bags, clean bandages, antibiotics, anaesthetics.

Medical items commonly listed as most needed across communities: Antibiotics, clean bandages, blood transfusion bags, heart and diabetes medicine.

Commonly used strategies to cope with a lack of medical items: Using expired medicine, recycling medical items.

- **At Tall:** For the first time since August, populations reported skipping meals and reducing meal size as quantities of food available in the community decreased following increased hostilities and tighter access restrictions in November.
- **Talbiseh and Taldu:** Both communities reported challenges in obtaining bread for the first time since August, as availability of flour decreased due to access restrictions. For the first time since September, both communities also reported skipping meals as a coping strategy related to the lack of food, in addition to reducing meals.

Prices and availability of core food items

In many communities, **core food items remained available in markets but prices have inflated to levels considered prohibitively expensive for populations to access**, while other communities witnessed a substantial drop in availability.

- **Az Zabdani:** All core food items remained unavailable in November, after stocks were exhausted in October.
- **Madaya and Bqine:** An average food basket was **665% more expensive** than in nearby communities not classified as besieged or hard to reach, and **a majority of items remained unavailable**. Those food items that were available from traders were on average **1,628% more expensive**.
- **Homs (Al Waer):** Most core items aside from bread remained available in markets, but **the price of an average food basket increased by 40%** from October to November.
- **Eastern Ghouta:** Prices were on average **80% higher** than those in nearby non-besieged or hard to reach communities.
- **Khan Elshih:** **Only four food items remained available in markets in November** (rice, bulgur, lentils and salt), all of which were reported available for fewer than six days per month. Their prices were on average **72% higher** than in nearby non-besieged or hard to reach communities.
- **Yarmouk:** Though the availability of food items remained unchanged, the prices of these items rose by 14% on average from October to November, **with chicken prices rising by 56% and tomato prices by 67%**.

Communities that signed truce agreements

Since September 2016, **five communities in Rural Damascus have signed truce agreements: Hama, Qudsiya, Madamiyet Elsham, At Tall and Khan Elshih**. The outcomes of these agreements have varied, with some communities seeing overall improvements in their humanitarian situation and others experiencing further problems.

Improved humanitarian situation: Hama, Qudsiya, Madamiyet Elsham

- Significant improvements in the humanitarian situation have been reported since truce agreements were signed in early September in Madamiyet Elsham and early October in Hama and Qudsiya.
- In Hama and Qudsiya, movement restrictions were removed, with all people and vehicles free to move in and out of the communities without risk; communities reportedly experienced higher availability of fuel due to a continuing influx of NFIs in November.
- Conversely, no changes were reported in the health situation or in access to services in Madamiyet Elsham in November relative to October. The community continued to experience comparatively more challenges than Hama and Qudsiya, including insufficient access to water, less access to electricity, and significant barriers to accessing education.
- As no humanitarian aid was delivered to Madamiyet Elsham in November, fewer food and non-food items entered compared to October; market availability of these items decreased, and residents continued to rely on negative coping strategies due to shortages of food and fuel.

Worsening humanitarian situation: At Tall, Khan Elshih

- Following the signing of truce agreements in Khan Elshih on 27 November and in At Tall on 2 December, several local NGOs left these communities or ceased operation. However, INGOs remained unable to access both communities, leaving a vacuum in aid provision.
- Cases of infighting between opposing factions were reported in Khan Elshih, including the burning of farmlands and destruction of buildings.
- In At Tall, individuals who had dropped out of the army were reportedly at risk of detention following the truce.

Conclusion

- In November 2016, limitations on civilian and vehicle movement continued to negatively affect populations across assessed communities. Civilians have reportedly been unable to leave Khan Elshih since October, Madaya since September, Az Zabdani since June, and the neighbourhoods of Joura and Qosour in Deir ez Zor city since they were first assessed in June. In many of the communities facing tight access restrictions, shortages of core food, fuel, medical, sanitation and hygiene items were reported.
- Hama and Qudsiya and Madamiyet Elsham, which had seen truce agreements in September or October, experienced relative improvements in the humanitarian situation. In the meantime, Khan Elshih and At Tall, where truce agreements were signed in November, did not report that access restrictions had been lifted, nor that aid deliveries had reached the communities.
- Access restrictions and escalations in conflict had a direct link to the deterioration of health services. In the communities of Khan Elshih, Az Zabdani, Madaya, and Al Waer, the health situation deteriorated significantly from October to November. Health facilities remained inaccessible in the neighbourhoods of Joura and Qosour in Deir ez Zor city, and became unavailable in Khan Elshih.
- The functionality of available facilities and services was often affected by the quantity of fuel available to operate equipment, such as generators and water pumps, and in many cases populations faced reduced access to services in November. In Khan Elshih, Az Zabdani, Madaya, Jisrein, Ar Rastan, and the Wadi Burda area, populations reported a reduction in their access to water and/or electricity, mostly due to a decline in the quantity of fuel available.
- In general, the prices of food and non-food items were higher and market availability lower in communities facing access restrictions in comparison to communities not considered besieged or hard to reach. In some communities, including Khan Elshih and Az Zabdani, assessed core food items were largely unavailable, while in others inflated prices were prohibitively high. Use of extreme coping strategies was reported in Az Zabdani, Madaya, and the Deir Ez Zor neighbourhoods of Joura and Qosour.
- **Based on information collected referring to the humanitarian situation in November within the communities of Khan Elshih, Madaya, Az Zabdani, and Joura and Qosour, populations indicated critical levels of vulnerability and are in need of emergency humanitarian assistance.**
- **Information collected from Hajar Aswad, At Tall, Al Waer, Talbiseh, Yamouk, and the Eastern Ghouta and Wadi Burda areas indicate that while the communities have not reached the same levels of urgency, they are experiencing an ongoing deterioration in the humanitarian situation.**

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. All REACH activities are conducted through inter-agency aid coordination mechanisms. For more information, you can write to our global office: geneva@reach-initiative.org.

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