

Ar-Raqqa governorate, Syria October 2019



Summary

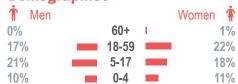
This profile provides an overview of conditions in Twahina settlement. Primary data was collected through household surveys between 24 and 25 September, prior to military escalation in northeast Syria starting on 9 October. Households were randomly sampled to a 95% confidence level and 10% margin of error, based on population figures provided by camp management. In some cases, further additional information from camp managers has been used to support findings.

Twahina is an informal settlement where conditions are poor and sanitation facilities scarce. At the time of data collection, relocation of residents to nearby Mahmoudliy settlement was underway, leading to a reduction in population and some service provision. At the time of data collection, the camp was managed by an INGO, and administered by local authorities.

Camp Overview Number of individuals:

 1.491^{1} Number of households: 2741 Number of shelters: 350^{1} May 2017 First arrivals: Camp area: 0.38 km²

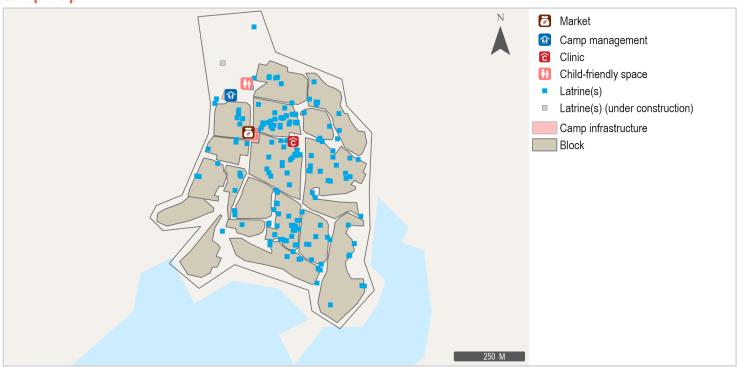
Demographics



Location Map



Camp Map



Sectoral Minimum Standards		Current round		Previous round (July 2019)		
Joutoral	Milliani Standards	Target	Result	Achievement	Result	Change
Shelter	Average number of individuals per shelter Average covered area per person Average camp area per person	max 4.6 min 3.5m ² min 35m ²	4.3 5.4m² 255m²	•	5 1.8m ² 46m ²	*
Health	% of 0 - 5 year olds who have received polio vaccinations Presence of health services within the camp	100% Yes	49% Yes²	•	78% Yes	V
Protection	% of households reporting safety/security issues in past two weeks	0%	89%	•	82%	\blacksquare
Food	% of households receiving assistance in 30 days prior to data collection $%$ of households with acceptable food consumption score (FCS)²	100% 100%	88% 31%	•	100% 85%	V
Education	% of children aged 6-11 accessing education services % of children aged 12-17 accessing education services	100% 100%	2% 0%	•	1% 0%	A
WASH	Persons per latrine Persons per shower Frequency of solid waste disposal	max. 20 max. 20 min. twice weekly	21 no showers Daily	•	99 8,158 Daily	V

Targets based on Sphere and humanitarian minimum standards specific to northeast Syria. Minimum standard reached More than 50% minimum standard reached Less than 50% of minimum standard reached

1. Number of individuals, households, and shelters reported by camp management.

^{2.} FCS measures households' current status of food consumption based on the number of days per week a household is able to eat items from nine standard food groups, weighted for their nutritional value.





⅓→ MOVEMENT

Top three household origins (out of all camp residents):

	Country	Governorate	Sub-district	
	Syria	Hama	Oqeirbat	37%
V	Syria	Homs	Tadmor	27%
	Syria	Homs	Jeb Ej-Jarrah	16%

Movements in the 30 days prior to data collection:

no data³ New arrivals Departures

Households planning to leave the camp:



Within 1 week Within 1 month 0% Within 6 months 0% After 6+ months 0% Not planning to leave 100%



On average, households in the camp had been displaced 3 times before arriving to this camp and 74% of households in the camp had been displaced longer than one year.

100% of households were planning to stay in the camp.

It was unknown whether households received any information on returning to their area of origin from the camp management / administration.

PROTECTION

Protection issues



76% of households in the camp reported being aware of safety and security issues in the camp, during the two weeks prior to data collection.

The most commonly reported issues were:

- Disputes between residents (89%)
- Theft (33%)

5% of households reported at least one member suffering from psychosocial distress.4 13% of households with children aged 3-17 reported that at least one child had exhibited changes in behaviour⁵ in the two weeks prior to data collection.

Freedom of movement



45% of households who needed to leave the camp temporarily for medical emergencies in the two weeks prior to data collection reported that they had been able to do so.

Households reporting that they were able to leave for nonemergency purposes in the two weeks prior to data collection:



59% Yes 41%

Most commonly reported barriers:

- Insufficient transport (69%)
- Transport available but too expensive (50%)

Gender-based violence

Households reporting the presence of gender-based protection issues within the camp (in the two weeks prior to data collection):



Yes 46% 54%

Most commonly reported issues:

- Early marriage (women below 16 years old) (87%)
- Restrictions on women and girls accessing services (11%)

Child protection

Households reporting the presence of child protection issues within the camp (in the two weeks prior to data collection):



Yes

Most commonly reported issues:

- Child labour (68%)
- Early marriage (below 16 years old) (66%)

Documentation



49% of households reported that all married individuals in the household are in possession of their marriage certificate. The main reason why married individuals were not in possession of their marriage certificate was certificate services were

29% of children under five years old reportedly have birth registration documentation.

Vulnerable groups

Proportion of total assessed population in vulnerable groups:6

1.9% People with psychosocial needs 0.9% Children at risk⁷ Elderly at risk⁷ 0.00% Single parents/caregivers 2.1% Persons with disabilities 1.2% Pregnant/lactating women⁷ 18.1% In female-headed households 16.3% Chronically ill persons 2.8%

^{3.} Due to the change in the security situation immediately following data collection, it was not possible to consolidate key informant data for the camp.

4. As reported by households themselves. Assessed symptoms included: persistent headaches, sleeplessness, and more aggressive behaviour than normal towards children or other household members.

5. As reported by households themselves. Changes in sleeping patterns, interactions with peers, attentiveness, or interest in other daily activities.

6. Self-reported by households and not verified through medical records. Children at risk are persons under 18 who are parents, separated from their immediate family, or not attending school, and persons under 16

who are married or working. Elderly people at risk are persons over the age of 65 who cannot take care of themselves or who are solely responsible for children under 18 or others who cannot take care of themselves. 7. Percentage is the proportion of the population subset who are reported as vulnerable.





EDUCATION



At the time of data collection, there was **no** educational facility in the camp.

NΑ Age groups: Service providers: NA Curricula on offer: NA Certification available: NA

Available WASH facilities

Gender-segregated latrines: Handwashing facilities: NA Safe drinking water: NΑ

Attendance

The proportion of children aged 6-11 reported as attending school increased from 1% in May 2019 to 2% at the time of data collection. As there is no formal education provision at Twahina, this could represent informal schooling or education outside the camp.

Barriers to education: of the 97% of households with children aged 3-17 who reported that none of them went to school, 100% reported that they faced barriers to education. The most commonly reported barriers were:

- No education available/lack of learning space (87%)
- Parents feel children are only doing recreational activities at learning centre (6%)

WATER, SANITATION AND HYGIENE (WASH)

Water



Public tap/standpipe was the primary source of water in the camp at the time of data collection. However, no data was available on the drinking water supplier or whether water was treated prior to distribution.

0% of households reported they spent at least two consecutive days without access to drinking water in the two weeks prior to data collection.

100% of households reported using a public tap/standpipe to access drinking water.

Drinking water issues in the two weeks prior to data collection, by % of households reporting:



No issues Water tasted/smelled/looked bad 13% People got sick after drinking 10% Not sure

6% of households reported that they treated their drinking water.

Households using negative strategies to cope with a lack of water in the two weeks prior to data collection:



Most commonly reported strategies:

- Modify hygiene practices (bathe less, etc.) (60%)
- Rely on drinking water stored previously (53%)

35% of individuals reported having suffered from diarrhoea in the two weeks prior to data collection, with 14% suffering from respiratory illnesses and 26% from skin diseases.8

Waste disposal



Primary waste disposal system: Communal garbage bin Disposal location: Official landfill, 20km from site Sewage system: Septic tank, emptied every 6 weeks

92% of households reported that solid waste was collected more than once per week.

Sanitation



Number of latrines in camp: 71 (May 2019: 173)

Communal¹⁰ Household¹⁰

Households using latrines:

74%

1%

48%

2%

2%

14% of households reported practicing open defecation as main practice.

6% of households reported that some members could not access latrines, with boys (0-17) being most frequent (4% of households).

Communal latrine characteristics, by % of households reporting:11

Segregated by gender Lockable from inside 48% 5% 5% Functioning lighting 93% Privacy wall 98% 0% None Some

Communal latrine cleanliness, by % of households reporting:11



Verv clean Mostly clean Somewhat unclean Very unclean 74%





Number of showers in camp: 0 (May 2019: 1)

Communal¹⁰ Household¹⁰

Households using showers8

0%

Households without access to showers predominantly reported bathing inside their shelters (100%).

Households that were able to access all assessed hygiene items:9



Yes **75**% No **25%**

commonly inaccessible items included washing powder and disposable diapers. Hygiene items were most commonly inaccessible because households could not afford to buy them.

8. In the two weeks prior to data collection, self-verified by household and not verified through medical records.
9. The assessed hygiene items included: soap, sanitary pads, disposable diapers, washing powder, jerry cans/buckets, toothbrushes (for adults and children), toothpaste (for adults and children), shampoo (for adults and babies), cleaning liquid (for house), detergent for dishes, plastic garbage bags, washing lines, nail clippers, combs, and towels.
10. Communal latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household. Household latrines and showers are shared by more than one household.

11 Excluding households who selected not sure





ਝ HEALTH



Number of healthcare facilities: 1 Service providers: UN agencies Types of facilities: NGO clinic

Households with members in the following categories:6

Person with serious injury Person with chronic illness Pregnant or lactating woman

Access to treatment for one or more household members in the 30 days prior to data collection:

3%

3%

24%

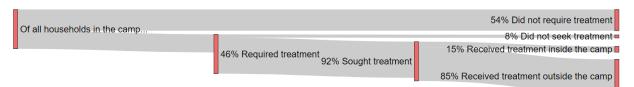
Of the households who required treatment in the 30 days prior to data collection, 84% reported that they had faced barriers accessing medical care. The most commonly reported barriers were cost of care/medicine being too high (87%) and high transport costs (58%).

Households reporting that a member had given birth since living in the camp:



Yes 25% No 75% Where women delivered:

- At a health facility (95%)
- At home with non-professional assistance (5%)



FOOD SECURITY

Consumption

Percentage of households at each food consumption score level:2



Acceptable 31% Borderline 68% Poor



The percentage of households with an acceptable food consumption score has increased from 85% in May 2019 to 31% in September 2019.

99% of households reported using food-related coping strategies in the week before data collection.

Top three reported food-related coping strategies:12



Borrowing food Men eating less 13% Sending household members to 13% eat elsewhere

Most commonly reported main sources of food:13



Markets in the camp Food distributions 75% Markets outside the camp 53%

Distributions

Type of food assistance received¹⁵, by % of households reporting:



Bread 100% Food basket(s) 56% Cash/vouchers for food 3% I

35% of the 33% households who had not received a food basket, cash, or vouchers in the 30 days prior to data collection, had received at least one of these distributions in the preceding three months.

Top three food items households would like to receive more of:16



Sugar 69% Ghee/vegetable oil Bread

Market access

88% of households reported that they were able to access markets inside the camp to buy food. However, 95% of these households reportedly did not have enough funds to buy all the items they needed.

EXECUTE LIVELIHOODS

Livelihood Sources

46% of households reported having at least one financial livelihood source in the month prior to data collection.

49,823 SYP (77 USD)14 Average monthly household income: Households with members earning an income: 97%

Top three reported primary income sources in the 30 days prior to data collection:16



Employment inside the camp Personal savings 8% Employment outside the camp

Coping strategies

Top three reported livelihoods-related coping strategies:16



Borrowed money 74% Sold assistance items received Support from friends and relatives

69% of households reported that they had bought goods on credit in the 30 days prior to data collection; on average these households owed 30,915 SYP (48 USD)14

- 12. Households were asked to report the number of days they employed each coping strategy, graph only shows the overall frequency with which a coping strategy was reported.
- 13. Households could select as many options as applied.

 14. The effective exchange rate for Northeast Stria was reported to be 650 Syrian Pounds to the dollar in September 2019 (REACH Initiative, Market Monitoring Exercise Snapshot 21 October 2019).
- 15. In the 30 days before data collection.
- 16. Households could select up to three options





★ SHELTER AND NON-FOOD ITEMS (NFIs)

Shelter

93% of inhabited shelters were makeshift or improvised.

Average number of people per shelter: 4.3

Average number of shelters per household: 1.3

† † †

Average household size: 5.5 individuals

Tent status¹⁷

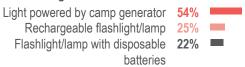


0%	Tent is new
0%	Minor wear and tear
80%	Tent is in poor condition
20%	Tent is worn/torn

Sources of light

Top three sources of light inside shelters: 13





NFI needs

Top three anticipated NFI needs for the next three months: 16



Winter blankets	49%	
Mattresses/sleeping mats	44%	
Plastic sheeting	39%	

Shelter adequacy

100% of households reported that they faced shelter adequacy issues.

Top three most commonly reported shelter adequacy issues:16



Lack of privacy	78%	
Safety (structural damage, etc.)		
, ,		
No electricity	45%	

Top three most commonly reported shelter item needs:16



New/additional tents	76 %	
Tarpaulins	10%	
Plastic sheeting	10%	

0% of respondents reported they had access to a kitchen space.

Fire safety

Households reporting the presence of fire fighting systems that could be used to protect them:



Yes - fire extinguishers Yes - other		
Not sure	19%	
No	42%	

23% of respondents with access to a fire fighting system reported being familiar with how to use it. Camp management reported that actors in the camp have provided residents with information on fire safety in the past three months.

® INFORMATION AND ACCOUNTABILITY

Camp management and committees

23% of households reported that they did not know the camp management, with 25% saying that they were not sure.

Committees reported by households to be present in camp:

88% Camp management

5% Youth committee

4% Women's committee

45% Maintenance committee

20% WASH committee

45% Distribution committee

Information Needs

Top three reported sources of information about distributions:13



Community leaders	91%	
Word of mouth	40%	
Community mobilisers	6%	

Top three reported information needs:16



How to find job opportunities
How to access assistance
Sponsorship programmes
45%
26%

Complaints

0% of households who had made a complaint in the three months prior to data collection reported that action was taken as a result:

Of all households in the camp...

77% Knew where to make a complaint

80% Did not have a complaint
85% Did not make a complaint

23% Did not know where to complain =

20% Had a complaint

0% action was taken

15% Made a complaint

100% No action was taken

About REACH Initiative

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).

17. Enumerators were asked to observe the state of the tent and select one of the options