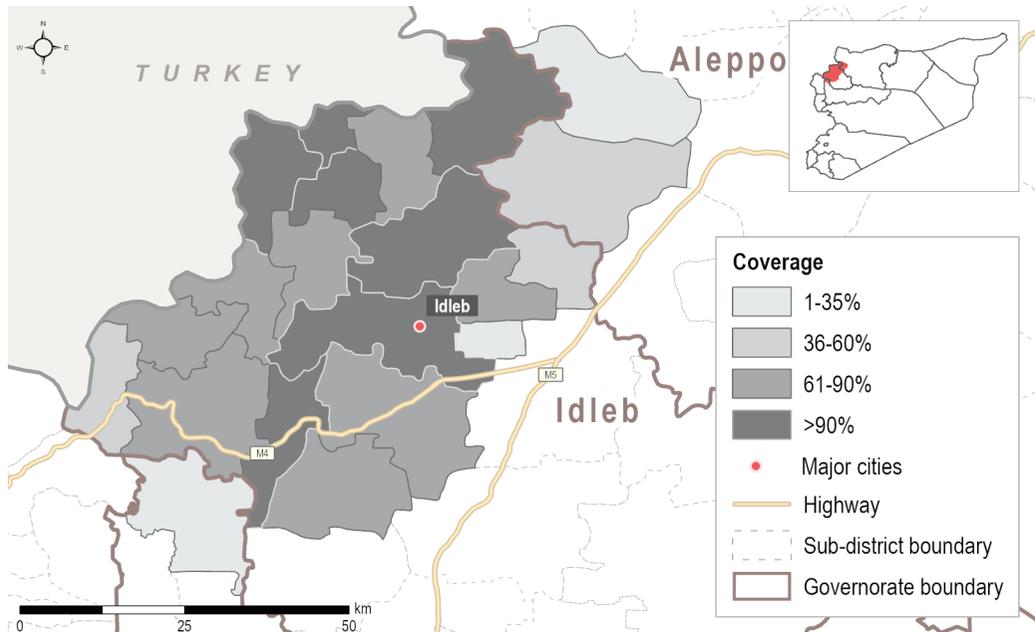


Introduction and Methodology

HSOS is a monthly assessment that provides comprehensive, multi-sectoral information about the humanitarian conditions and priority needs inside Syria. This factsheet presents a thematic review based on the HSOS assessment of the priority needs and humanitarian assistance, economic conditions, living conditions, access to basic services, COVID-19 situation, and the security and protection situation in the Greater Idlib area in Northwest Syria (NWS). **Sector-specific indicator findings by location can be found on the [HSOS dashboard](#).**

The assessment is conducted using a key informant (KI) methodology at the community level. REACH enumerators are based inside Syria and interview three to six KIs per assessed location, either directly or remotely (via phone). KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in **371 communities** across the greater Idlib area.¹ **Data was collected between 11-20 September 2022 from 1,262 KIs** (8% female). Unless specified by an endnote, all indicators refer to the situation in the 30 days prior to data collection. Findings are indicative rather than representative, and should not be generalized across the population and region. Findings that are calculated based on a subset of the community are indicated by the following footnote ♦, with each subset specified in the endnotes.

The **complete monthly HSOS dataset** is available on the [REACH Resource Centre](#).



Key Highlights

High transportation costs limited households' access to food markets and healthcare. The cholera outbreak, currently centered around the Euphrates River, risks spreading more widely across Greater Idlib as communities heavily relied on potentially unsafe water trucked by private vendors. Non-food item (NFI) needs became relatively more prevalent in September, with cooking fuel, batteries, and solar panels having been particularly widely needed.

- The lack and high cost of transportation prevented households from accessing food and markets.** In September, KIs in 78% of assessed communities reported that the lack of transportation was a barrier to accessing food markets, up from 63% in September 2021, making it the most frequently reported barrier. Furthermore, the high cost of transportation was also reported by KIs in 72% of communities, up from 54% in September 2021. The situation was similar for households seeking to access healthcare, with KIs in 75% of assessed communities having reported the lack of transportation to health facilities (up from 59%). The high cost of transportation was consistently high at 76% in September, with a peak of 85% in March, making it the most frequently reported barrier to healthcare access in Greater Idlib. This comes as the healthcare system in Northwest Syria remains underfunded,^a and people living in underserved, especially remote rural areas, particularly struggle to access healthcare facilities amidst high cost, security concerns, and a lack of ambulance services.^b Additionally, the cost of transport fuel has continued to rise, with the price of fuels having increased between 58% and 95% year-on-year.^c

- The cholera outbreak in Syria is raising concerns about a spread in Greater Idlib, where households remain vulnerable amidst a high reliance on private water trucking and low access to sanitation systems.** In early September, a cholera outbreak was announced in Syria.^d During the month of September, 20 cases were then confirmed in northwest Syria, mainly concentrated in Jarablus district (west of the Euphrates River) and Harim district (the north of Idlib governorate),^e raising concerns over the possibility of a spread across Greater Idlib.^f REACH data showed that KIs in 43% of assessed communities reported water trucked through private vendors as the main source of drinking water in assessed communities. The source of this water and the quality thereof may not be monitored, increasing the risk of spreading waterborne disease. This is particularly concerning as KIs in more than half of assessed communities reported that households did not commonly take precautions to make water safer to drink (e.g. using chlorine, boiling the water). Furthermore, KIs in 38% of assessed communities reported that the community was not connected to the sewage network, increasing the risk of households coming in contact with potentially infected sewage. However, problems with drinking water have so far been limited with no KI having reported that water was perceived to be making people sick in September.

- Increased need for NFIs in September.** In September, KIs in 53% of communities reported NFIs as one of the top three priority needs for residents and 44% for internally displaced persons (IDPs), up from 49% and 39% respectively in August. The most reported priority NFI needs were cooking fuel (reported by KIs in 82% of assessed communities for residents and 83% for IDPs), batteries (68% for residents and IDPs), and solar panels (65% for residents, 57% for IDPs). Notable increases for residents were in water containers (from 17% in July, to 22% in August, and to 26% in September) and for IDPs in clothing (from 3% in July, to 6% in August, and to 11% in September).

HSOS Dashboard

For a breakdown of sector-specific indicators by location, please see the [HSOS dashboard](#). The interactive HSOS dashboard provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level.



Priority Needs and Humanitarian Assistance



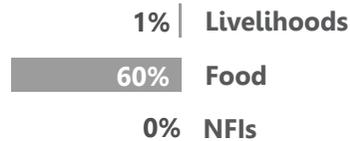
Most commonly reported **first, second, and third** and **overall** priority needs for residents (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL
1	Food	Livelihoods	NFIs	Livelihoods 72%
2	Livelihoods	NFIs	Livelihoods	Food 62%
3	WASH [▲]	Food	Infrastructure	NFIs [▶] 53%

% of assessed communities where some of the resident households were able to access humanitarian assistance



% of assessed communities where KIs reported the presence of the following **types of assistance for residents** ⁴



Most commonly reported barriers that resident households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,♦}

In communities where access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people **67%** **1**
- Assistance provided was not relevant to all needs **55%** **2**
- Quantity of assistance provided to households was insufficient **46%** **3**

In communities where no access to humanitarian assistance was reported

- No humanitarian assistance was available **94%**
- Distribution points were too far or the routes were inaccessible **6%**



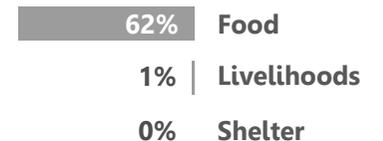
Most commonly reported **first, second, and third** and **overall** priority needs for IDPs (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL
1	Shelter	WASH	Livelihoods	Food 63%
2	Food	Livelihoods	NFIs	Livelihoods 58%
3	Livelihoods	Food	Summer items [▼]	Shelter 53%

% of assessed communities where some of the IDP households were able to access humanitarian assistance



% of assessed communities where KIs reported the presence of the following **types of assistance for IDPs** ⁴



Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,♦}

In communities where access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people **67%** **1**
- Assistance provided was not relevant to all needs **51%** **2**
- Quantity of assistance provided to households was insufficient **45%** **3**

In communities where no access to humanitarian assistance was reported

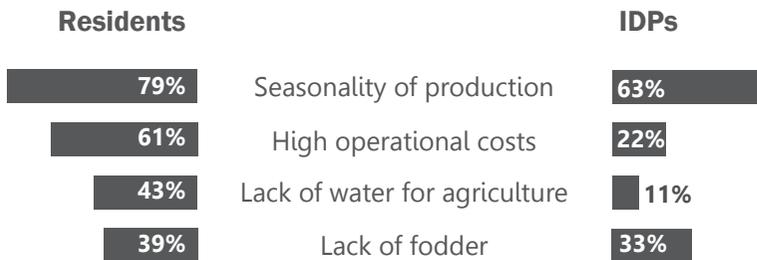
- No humanitarian assistance was available **97%**
- Distribution points were too far or the routes were inaccessible **3%**



Economic Conditions

Region	Median estimated monthly household expense for water for a household of six ^{5,6}			Median estimated monthly rent price for a two bed-room apartment ^{5,6}			Median estimated daily wage for unskilled labour ^{5,7,8}		
	90 TRY			400 TRY			35 TRY		
% of assessed communities where indicator was reported in following currencies [*]	SYP	TRY [▲]	USD	SYP	TRY	USD	SYP	TRY	USD
		0%	100%	0%	0%	61%	39%	0%	100%

Most commonly reported barriers to accessing livelihoods related to agriculture (by % of assessed communities) ⁴



87% and 89%

% of assessed communities where KIs reported daily waged labour as a common source of income for **residents** and IDPs

77 days

Number of days the average day labourer would need to work to earn the monthly cost of basic SMEB[▲] items ^{5,9}

93% and 52%

% of assessed communities where KIs reported the **insufficient income of households** and general lack of employment opportunities as barriers to meeting basic needs ⁸

% of assessed communities where KIs reported the presence of **residents** and IDP households relying on non-productive sources of livelihoods to meet their basic needs ⁴



Intersectoral findings on **unaffordability** hindering access to goods and services

- KIs in **71%** of assessed communities cited that **rent** was unaffordable for the majority of people
- KIs in **43%** of assessed communities cited the high cost of **fuel for generators** as a common challenge
- KIs in **83%** of assessed communities cited the high cost of **solar panels** as a common challenge
- KIs in **49%** of assessed communities cited the high cost of **water trucking** as a common challenge
- KIs in **88%** of assessed communities cited the high cost of **food** as a common challenge ⁸
- KIs in **69%** of assessed communities cited the high cost of **health services** as a common challenge

% of assessed communities where common livelihood sources from agriculture were reported ⁴

Livelihood source	Residents	IDPs
Food crop production	63%	18%
Cash crop production	58%	7%
Livestock products	64%	57%
Sale of livestock	15%	20%



Living Conditions

In **96%** of assessed communities at least **80%** of the resident population reportedly **owned their shelter**

In **63%** of assessed communities reportedly **none** of the IDP households owned their shelter

In **24%** of assessed communities at least one fifth of the IDP population reportedly lived in unfinished or abandoned residential buildings

In **20%** of assessed communities at least one fifth of the IDP population reportedly lived in tents



A lack of toilets was reported as a shelter issue for IDPs in **1%** of assessed communities



A lack of bathing facilities was reported as a shelter issue for IDPs in **6%** of assessed communities

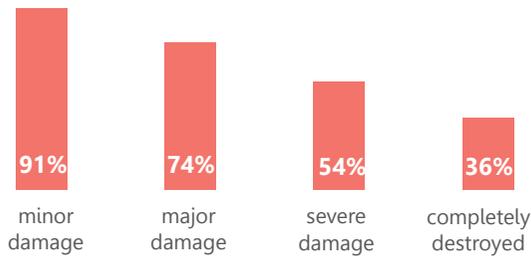


Problems with the drinking water were reported in **45%** of assessed communities



Water being calcareous was the most commonly reported problem with drinking water (reported by KIs in 45% of assessed communities)

Reported presence of occupied shelters with damage across communities where damages were reported (by % of assessed communities) ^{5,10}



Shelter and repair materials being too expensive was the most commonly reported challenge for households to repair their shelter (reported by KIs in 88% of assessed communities)⁴

Reported sanitation issues affecting public space in the community (by % of assessed communities) ⁴

Rodents and/or pests are frequently visible

8%

Solid waste in the streets

19%

Sewage system pollutes public areas

5%

Stagnant water

6%

Flooding in the streets

1%



98%

% of assessed communities where KIs reported that **house-holds experienced barriers to accessing sufficient food** ⁸



In **21%** of these communities, KIs reported that the **unavailability of certain food items** was a challenge to accessing sufficient food ⁸

Most commonly reported coping strategies for a lack of food (by % of assessed communities) ⁴

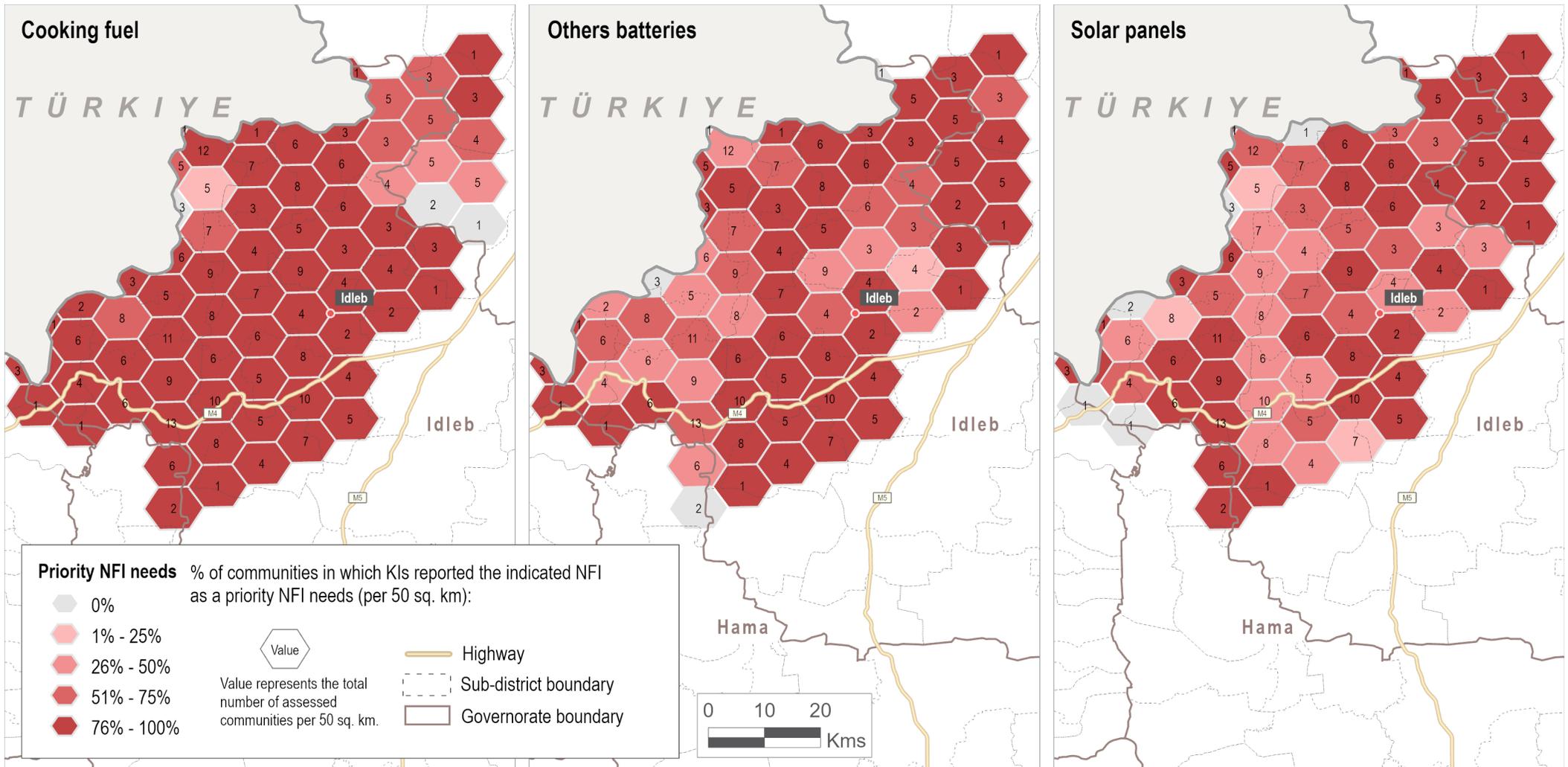
- 1 Borrowing money to buy food **85%**
- 2 Relying on less preferred food / lower food quality **84%**
- 3 Buying food with money usually used for other things **68%**



High price of suitable foods formula was the most commonly reported challenge to feeding young children (reported by KIs in 98% of assessed communities) ^{4,11}

Commonly reported **sources of food for households other than markets** (by % of assessed communities) ⁴

- 1 Own production or farming **73%**
- 2 Relying on food stored previously **18%**
- 3 Assistance from local council or NGOs **17%**



Priority NFI needs

Note on the map

This map shows the percentage of communities in which KIs reported cooking fuel, other batteries, and solar panels as priority NFI needs.



Access to Basic Services



Access to Electricity

7-8 hrs per day

was the most commonly reported range for hours of electricity accessible to households (reported by KIs in 31% of assessed communities)

Solar panels

was the most commonly reported main source of electricity (reported by KIs in 66% of assessed communities)

47%

% of assessed communities where KIs reported the main network is partially or completely not functioning as a barrier for electricity access ♦



Access to Water

54%

% of assessed communities where KIs reported that not all households had access to sufficient water



7 days	10%
5-6 days	11%
3-4 days	21%
1-2 days	8%
0 days	50%

Days per week where water from the network was available (by % of 328 communities connected to a water network) ♦

Private water trucking

was the most commonly reported source of drinking water (reported by KIs in 43% of assessed communities)



Access to Sanitation

38%

% of assessed communities where KIs reported that no sewage system was present

Most commonly reported ways people disposed of solid waste (by % of assessed communities)



39%

% of assessed communities where KIs reported waste removal services as a WASH priority need ⁸



Access to Markets

8%

% of assessed communities in which households reportedly were unable to access markets in the assessed location

Not enough consumers to support markets in the assessed location

was the most commonly reported reason for why markets were not functioning (reported by KIs in 86% of assessed communities where markets were not functioning)

78%

% of assessed communities where KIs reported that the lack of transportation to markets was a barrier to physically accessing food markets

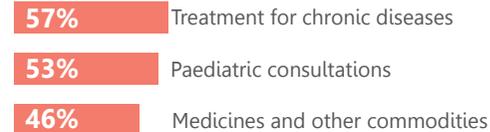


Access to Health Services

35%

% of assessed communities where KIs reported that the households did not have access to health services in the assessed location

Most commonly reported health priority needs (by % of assessed communities) ⁸



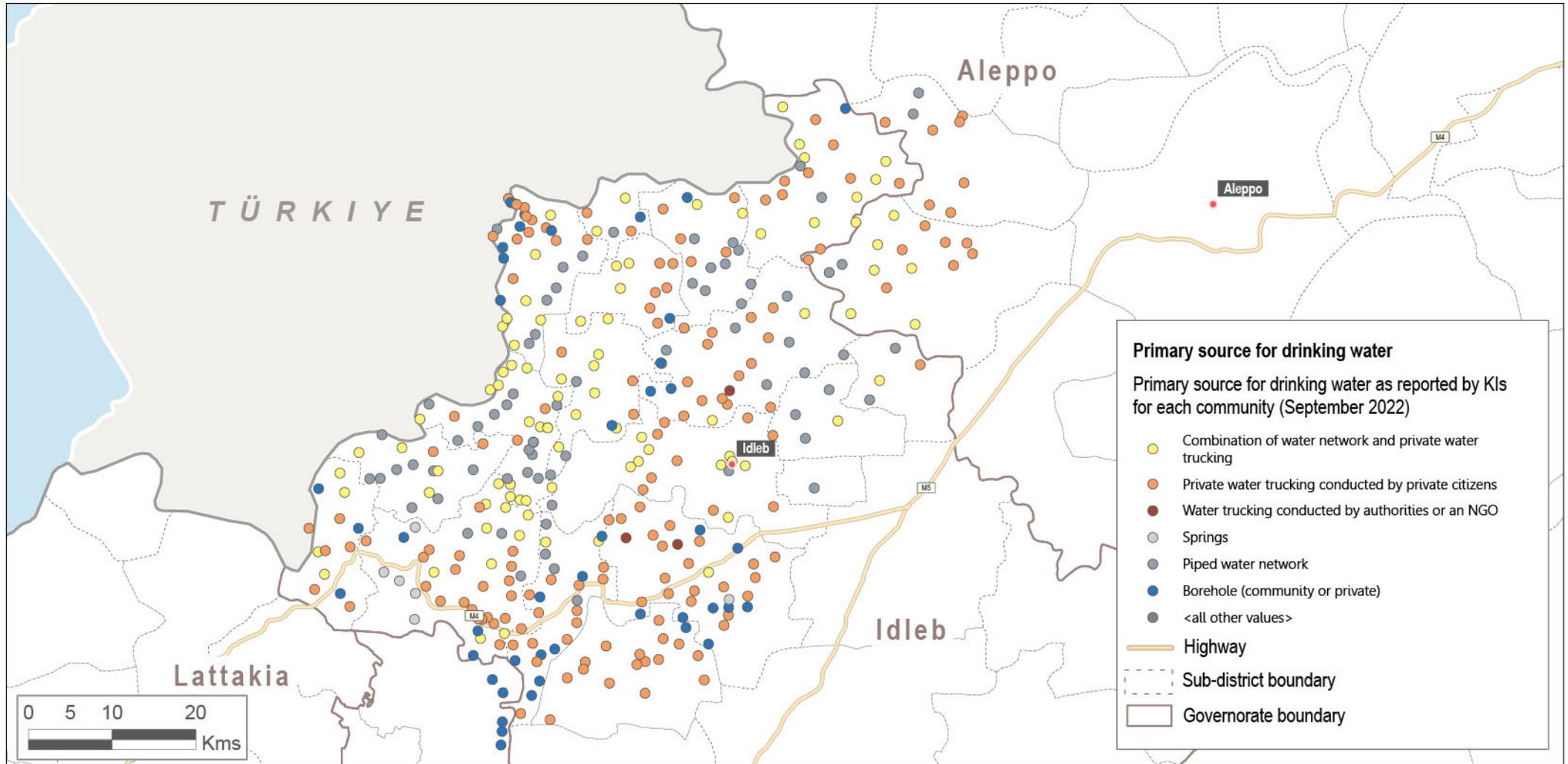
Going to the pharmacy instead of a clinic

was the most commonly reported coping strategy for a lack of healthcare (reported by KIs in 82% of assessed communities)



Access to Education Services

Due to summer holidays, no information on education was collected. Information on access to education services will be displayed again in October.



Source of drinking water

Note on the map

This map shows the primary source of drinking water as reported by KIs in each assessed community in greater Idlib.



COVID-19

Effects of COVID-19 on livelihoods sectors in the community (by % of assessed communities)

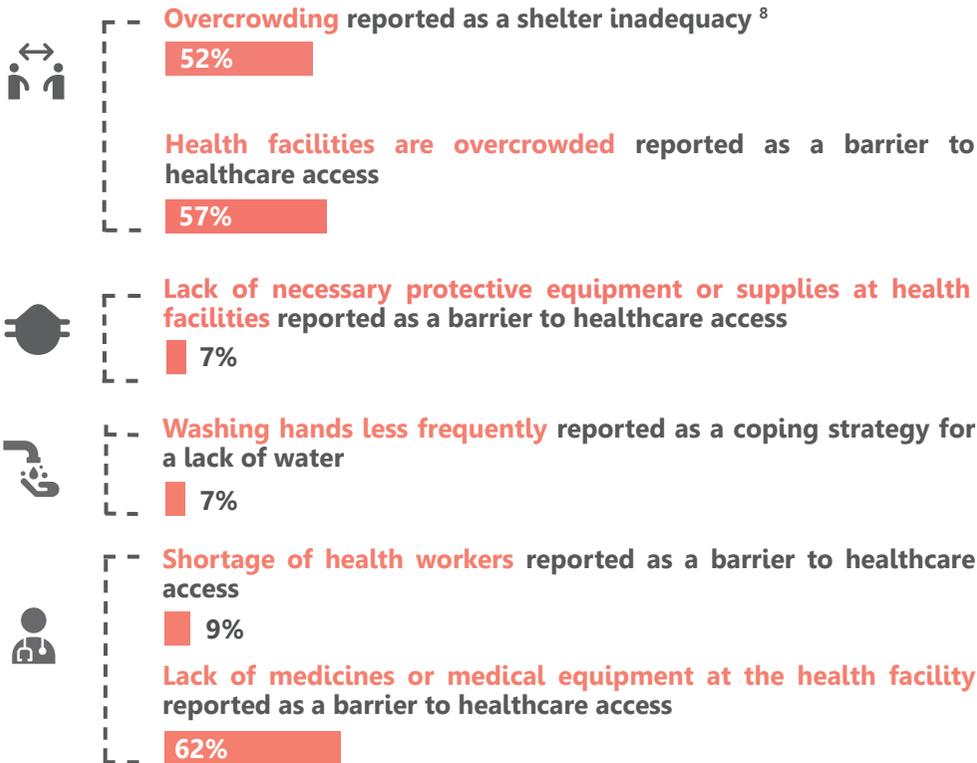


None of the available livelihood sectors were affected **90%**
At least one of the available livelihood sectors was partially or totally affected **10%**

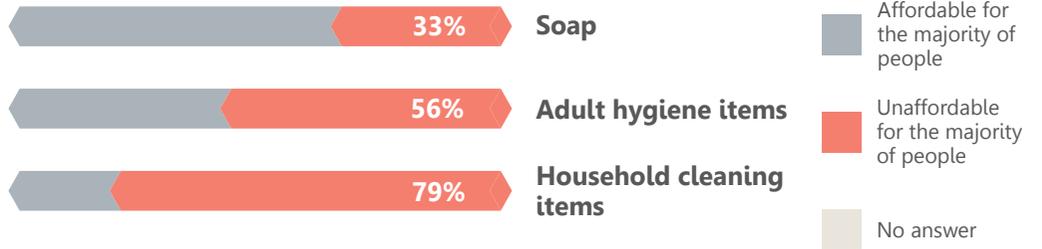
Most commonly reported sectors affected by COVID-19 (by % of assessed communities)

- 6% Trading
- 4% Agriculture
- 2% Manufacturing

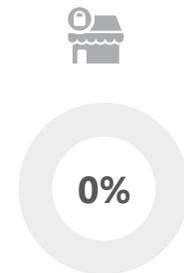
% of assessed communities where COVID-19 risk indicators were reported by KIs



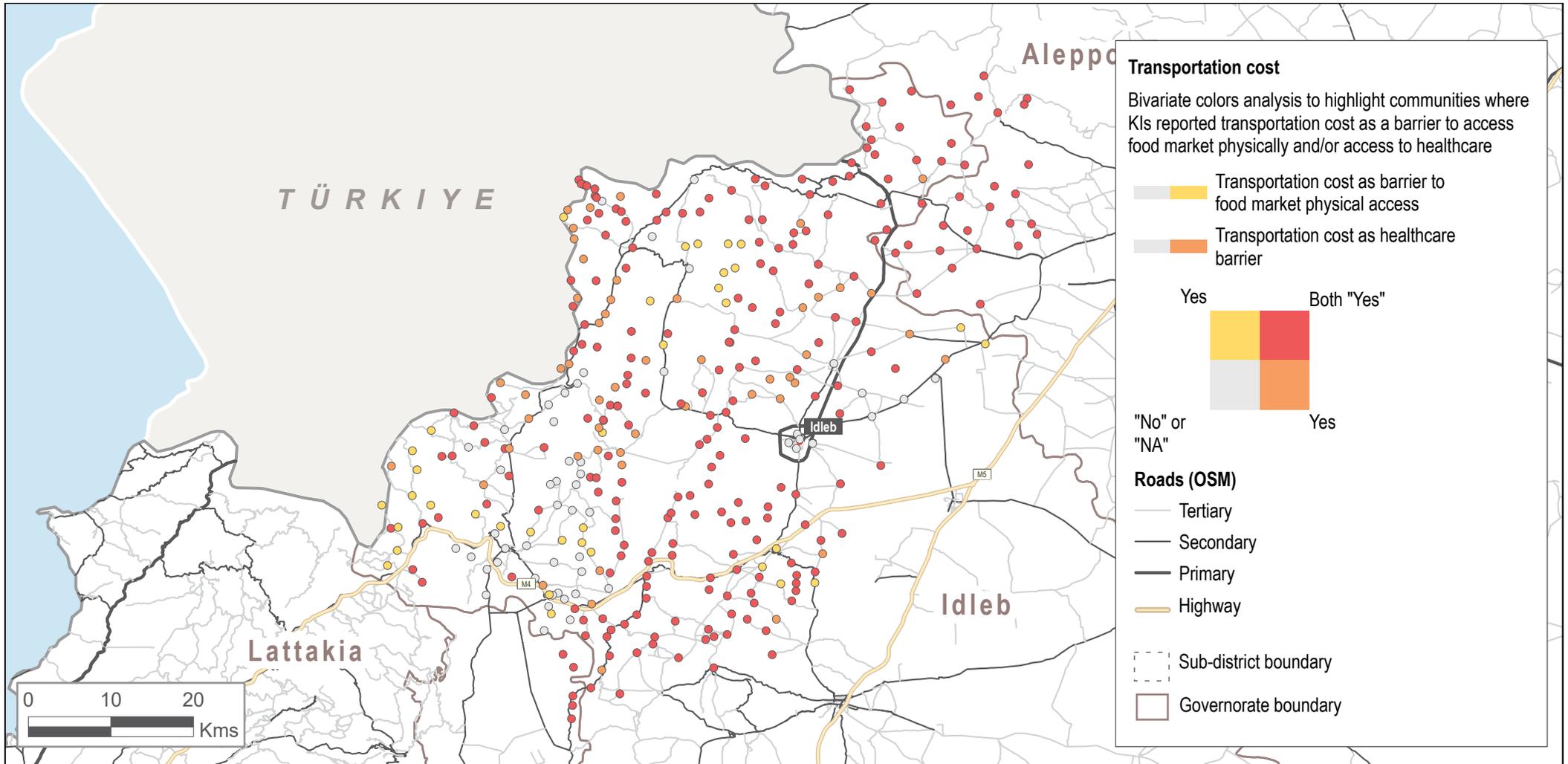
Reported hygiene item availability and affordability (by % of assessed communities) ¹²



% of assessed communities where COVID-19 related barriers to access services were reported



Access to markets was reportedly hindered because markets reduced opening hours or days because of COVID-19



Transportation costs

Note on the map

This map highlights the communities where KIs reported transportation costs as a barrier to accessing markets and/or health services.



Security and Protection

Intersectoral findings on security



General safety and security concerns restricting movement to markets was a reported barrier to market access in **3%** of assessed communities

General safety and security concerns at markets was a reported barrier to market access in **4%** of assessed communities

Markets not opening because of security issues was a reported barrier to markets not functioning in **0%** of assessed communities



Threat from airstrikes was reported as a protection risk in **36** communities⁸

Threat from shelling, snipers or gunfire was reported as a protection risk in **55** communities⁸

Threat from improvised explosive devices (IEDs), mines or unexploded ordnances was reported as a protection risk in **2** communities⁸

Fear from imminent conflict was reported as a protection risk in **92** communities⁸



The inability to lock homes securely was reported as a shelter inadequacy in **33%** of assessed communities⁸

Lack of lighting around the shelter was reported as a shelter inadequacy in **85%** of assessed communities⁸

The security situation was reported as a barrier to shelter repairs in **14%** of assessed communities



General safety and security concerns at the health facility was reported as a barrier to healthcare in **2%** of assessed communities

Most commonly reported protection priority needs (by % of assessed communities)^{3, 8}

1 81% Special assistance for vulnerable groups

2 67% Specialised child protection services

3 38% Psychosocial support



% of assessed communities where the lack of civil documentation for residents and IDPs was reported

58% Lack or loss of civil documentation as a protection risk

65%

5% Some people did not have the necessary personal documents as a barrier to accessing humanitarian

4%

% of assessed communities where extreme coping strategies used by residents and IDPs to meet basic needs were reported⁴

Residents

39% Early marriage

0% Forced marriage

2% High risk work

1% Sending family members to beg

88% Sending children (15 or below) to work

IDPs

46%

0%

7%

2%

89%

Age, Gender, and Diversity

KIs in **43%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to meeting basic needs⁸

KIs in **39%** of assessed communities reported a **lack of employment opportunities for persons with a disability** as a barrier to meeting basic needs⁸

KIs in **17%** of assessed communities reported a **lack of privacy for women and girls at health facilities** as a barrier to healthcare access

KIs in **40%** of assessed communities reported a **lack of market access for people with restricted mobility**

KIs in **7%** of assessed communities reported that **women and girls feel unsafe when traveling to markets**

Children below the age of 12 were reported as a group affected by child labour in **18%** of assessed communities⁸

Hazardous child labour was reported as a protection risk in **7%** of assessed communities⁸

Endnotes

1. The greater Idleb area includes Idlib governorate, parts of Aleppo western countryside, and parts of Hama northwestern countryside controlled by armed opposition groups (AOGs).
2. KIs were asked to select a first, second, and third highest priority needs in their communities. The ranking shows the sectors most frequently chosen as either first, second or third highest priority. The overall priority need refers to the frequency a sector was selected across all three categories (first, second or third highest priority).
3. KIs could select three answers, thus findings might exceed 100%.
4. KIs could select multiple answers, thus findings might exceed 100%.
5. KIs were asked about the situation at the time of data collection, instead of the last 30 days.
6. KIs had the option to select the price in United States Dollars (USD), Turkish Lira (TRY), or Syrian Pounds (SYP). When the price was not reported in SYP, the Idlib Governorate Market Monitoring exchange rate was used to calculate the amount in SYP. According to the [Joint Market Monitoring Initiative \(JMMI\)](#) September 2022, 1 USD = 4,520 SYP; 1TRY= 247 SYP.
7. According to the Idlib Governorate JMMI September 2022, 1 USD = 4,520 SYP.
8. Findings for residents and IDPs were merged. The merge was calculated as follows: (option was selected for either residents or IDPs) / (communities reporting challenges/barriers/coping strategies for either residents or IDPs).
9. According to the Idlib Governorate JMMI September 2022, the Survival Minimum Expenditure Basket (SMEB) = 660,105 SYP.
10. Minor damage (cracks in walls, leaking roof, need of new doors and window repairs, etc.); Major damage (buildings with extensive damage to window frames and doors, but no structural damage to columns, slabs, or loadbearing walls); Severe damage (buildings with significant structural damage to column slabs, or loadbearing walls, cracking, steel elements and deformations visible in concrete; the building would require extensive repairs); Completely destroyed (buildings with structural damage so significant that rehabilitation is not possible).
11. KIs were asked about the situation in the last two months, instead of the last 30 days.
12. Adult hygiene items include: shampoo, toothbrush, and toothpaste. Household cleaning items include: washing powder, liquid, and dish detergent.

◆ By number of communities where KIs reported the relevant indicator for the relevant population group(s)

<i>Indicator</i>	<i>Subset</i>	<i>Indicator</i>	<i>Subset</i>
<i>N.o of communities reporting on:</i>		<i>N.o of communities reporting on:</i>	
Residents	365	Currency used for paying water	344
IDPs	361	Currency used for paying rent	283
Challenges to assistance access (resident)	304	Currency in which wages are paid (merge)	318
Barriers to assistance access (resident)	49	Barriers to accessing sufficient food (merge)	365
Challenges to assistance access (IDPs)	311	Days when water is available from network	328
Barriers to assistance access (IDPs)	38	Barriers to markets functioning	28

Sources

- a. UN Office for the Coordination of Humanitarian Affairs (OCHA) (July 2022). Northwest Syria – Funding gap analysis (July to September 2022). Retrieved from: <https://reliefweb.int>
- b. Al-Nahas, H., Moran, A., et al (December 2021). Destruction, Obstruction, and Inaction – The Makings of a Health Crisis in Northern Syria. Retrieved from: <https://phr.org>
- c. Cash Working Group (September 2022). September 2022 – Joint Market Monitoring Initiative Dataset. Retrieved from: <https://www.humanitarianresponse.info>
- d. UN News (September 2022). Syria: Cholera outbreak is 'serious threat' to whole Middle East. Retrieved from: <https://news.un.org>
- e. Health Cluster, World Health Organization (October 2022). Cholera Response Tracking Dashboard – 2022 : Northwest Syria.
- f. Slemrod, A. (September 2022). Cholera worries grow in Syria's Idleb. Retrieved from: <https://www.thenewhumanitarian.org>

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. 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). For more information please visit our website: www.reach-initiative.org. You can contact us directly at: geneva@reach-initiative.org.