REACH Situation Overview: Displacement and Needs in Eastern Aleppo City, Syria

14 October 2016



INTRODUCTION

Since July 2016 the city of Aleppo has been the center of intense hostilities and is currently undergoing an unprecedented humanitarian crisis. Intense shelling has led to the destruction of roads, hospitals, schools and markets and severely affected civilian access to water and electricity. Commercial goods and humanitarian assistance have been unable to enter eastern Aleppo since access was cut on 4 September.¹ One month later, the eastern part of the city was classified as besieged,² leaving some 250,000 - 275,000³ people trapped in a deteriorating humanitarian situation amid ongoing conflict.

Repeated attacks on healthcare practitioners and facilities, and the urgent need for medical supplies have left eastern Aleppo's health services on the verge of collapse⁴. The Al-Sakhour Primary Health Centre, whose trauma and dialysis services were among the last remaining in the city, was entirely destroyed on October 3rd.⁵ As of October 8, an estimated 30 doctors, 7 partially functioning hospitals and 11 ambulances remained available to service the remaining population.4 After a week of relative decline in the number of attacks, airstrikes picked up again on Tuesday 11th, further increasing the number of civilian casualties and the immediate need for humanitarian access.6

In contrast to all other assessed areas, the humanitarian situation in the Kurdish neighbourhood of Sheikh Maqsoud is comparatively better. In mid-September, the opening of an access route into western Aleppo allowed some civilians to leave the neighbourhood and enabled commercial and humanitarian vehicles to provide relief for the estimated 2,000 – 2,500 individuals who remain.

Since 18 August, REACH has conducted four rapid assessments of the humanitarian situation of affected populations in eastern Aleppo. This overview marks the fifth assessment of the situation and intends to provide updated information on civilian access to food, water, shelter, non-food items and healthcare as well as the priority needs of those who remain. Data was collected from 10-13 October through 32 qualitative interviews with key informants (KIs) residing in the same previously assessed neighbourhoods: Ansari. Bustan al-Qaser. Kady Asker, Masken Hanano, Sheikh Magsoud and Tarek al-Bab. It was not possible to assess all affected communities within Aleppo city due to an inability to obtain information from KIs during the time frame of the current assessment. Accordingly, the list of assessed areas should not be considered representative of all affected neighbourhoods and findings cannot be generalised further. Interviews were conducted with community representatives with sector specific knowledge about their neighbourhood: local council representatives, nurses, pharmacists, workers from local relief organisations, teachers, shop owners and businessmen.

Information is currently being fed into a joint Syrian INGO Forum effort to provide an overview of the rapidly evolving situation within the city.

MOVEMENT OF CIVILIANS

Movement in and out of eastern Aleppo neighbourhoods remains severely restricted. With the exception of Sheikh Maqsoud, where a secured access route into western Aleppo has allowed civilians of that neighbourhood to leave, no formal or informal routes allow access into or out of eastern Aleppo.

Movement of populations between suburbs of eastern Aleppo has also decreased over the past two weeks. While KIs previously reported some internal movement from destroyed areas to others perceived as safer, this is reportedly no longer the case; all neighbourhoods are reportedly considered equally unsafe and insecure. Given the current intensity of the conflict, the safety and security of civilians remains the main imperative and

Map 1: Assessed neighbourhoods of Aleppo City



Eastern Aleppo areas assessedWestern Aleppo areas not assessed

priority need for all key informants. This is true for both civilians who are willing to leave Aleppo if safe access routes are guaranteed, as well as for those who would remain.

Residents of Sheikh Maqsoud remain able to use the secured road leading into the adjacent neighbourhood of Ashrafiyeh, known as Al Jazeera pass. This route opened during the mid-September ceasefire and allows for the entry and exit vehicles carrying commercial and humanitarian assistance, as well as civilians traveling by foot. Kls estimate that approximately 2,000-2,500 residents remain in the area, citing family ties and a lack of money to pay for transport or shelter as

¹ REACH Situation Overview: Displacement and Needs in Eastern Aleppo City, Syria, 6 September 2016

² OCHA: Eastern Aleppo Crisis, Situation Report No.3, 4 October 2016

³ UNHCR Syria: Flash Update on Recent Events. 5 October 2016

⁴ WHO & Health Cluster: Eastern Aleppo City: Two-weeks snapshot, 23d September to 8th October 2016; MSF, Syria, 10th October 2016

⁵ OCHA: Eastern Aleppo Crisis, Situation Report No.4, 9th October 2016

⁶ ReliefWeb: AFP Syria, 11th October 2016

the most common reasons for staying. All remaining residents are able to enter and exit the neighbourhood everyday upon showing documentation. People reportedly do so in order to purchase goods (food, NFIs, fuel and medical items) and access health facilities in surrounding areas. Many of the civilians who have left Sheikh Magsoud remain in Ashrafiyeh, while those who can afford to pay for further movement have travelled north-west to communities in the subdistrict of Afrin. KIs also indicated that some residents have travelled south from here, reaching areas in Rural Damascus governorate and surrounding countries.

Map 2: Areas with secured access routes



CURRENT HUMANITARIAN SITUATION

Healthcare

The health situation in eastern Aleppo has continued to deteriorate since the last assessment (September 30), access to adequate healthcare remains the greatest priority need for populations amid continuing airstrikes. With the exception of Sheikh Magsoud, no medical supplies reportedly entered have assessed neighbourhoods since pre-positioned WHO medicines were delivered more than two months ago.8 Health professionals reported that as of 8 October, only 30 doctors and 7 partially functioning hospitals remained in eastern Aleppo.4 The Al-Sakhour Primary Health Centre was severely damaged by shelling on October 1st. Two days later it was completely destroyed.5 This facility provided one of the two dialysis services in eastern Aleppo and demand for the last remaining facility is expected to dramatically increase.5 KIs on the ground corroborate this prediction - for the first time since assessments commenced in August, access to treatment for chronic diseases became the most needed medical service across all neighbourhoods.

Across assessed neighbourhoods, some mobile clinics, field hospitals and primary healthcare facilities are functioning, however, both medical facilities and ambulances continue to be targeted and only 11 ambulances remain to transport patients to facilities9. In Kady Asker and Tarek al-Bab, KIs indicated that Reported medical facilities functioning by neighbourhood⁷

	Hospitals	Mobile clinics / field hospitals	GP surgeries / clinics	Informal emergency care points
Ansari	×	/	×	/
Bustan al-Qaser	\checkmark	V	\checkmark	×
Kady Asker	×	V	×	×
Masken Hanano	×	×	×	×
Sheikh Maqsoud	×	×	V	×
Tarek al-Bab	×	V	V	×

Some facilities reported functioning

health facilities in their neighbourhoods had been put out of service within the past week due to conflict-related damage. In addition,

a city-wide shortage of fuel is limiting the capacity of health services to function and restricting the mobility of the few available ambulances.

Due to the critical shortage of supplies, medical personnel and fuel needed to treat the increased caseloads, some health facilities have reportedly stopped or delayed the treatment of minor presenting cases, prioritising remaining resources for the critically injured. Health personnel are reportedly continuing to recycle medical equipment, operating without anesthesia and using non-medical items as a substitutes for unavailable supplies. Kls in



No facilities reported functioning

all neighbourhoods stressed the critical need for more health facilities to be able to meet presenting caseloads, while the most common services needed were treatment for chronic diseases, surgery and emergency care for accidents and injuries.

In Sheikh Magsoud, the health situation is markedly different. The last remaining field hospital has reportedly closed because doctors have left, however medical supplies are able to enter through humanitarian deliveries and vehicles carrying commercial goods. A primary healthcare clinic has been set up in a closed school, where medical students are providing services. Residents in need of primary health care are also able to leave the neighbourhood and seek treatment at functioning facilities in western Aleppo.

Areas with access Areas with no access

Functioning does not necessarily imply full access to services or teatment by a doctor formally trained in the relevant procedure, or the use of anaesthesia or appropriate clinical equipment.

⁸ REACH Situation Overview Eastern Aleppo City August 30

⁹ MSF. Reaching hospitals in besieged east Aleppo has become a danger in itself. 11 October 2016. (Link here)

Map 3: Most commonly reported functioning health facilities



- Mobile clinics and field hospitals
- Informal emergency care points
- Primary healthcare facilities
- No health facilities available

Water

Following almost two weeks without access to safe water sources, one of the two main pumping stations in eastern Aleppo, the Bab Al Nayrab station is operational. In recent weeks, the functionality of both water stations in eastern Aleppo has been affected by ongoing conflict. The Bab Al Nayrab station, previously out of service after being heavily damaged, was repaired on October 6th and again on October 10th, and water supply to some parts of eastern Aleppo recommenced. However, the service is reported to reach only 13 of the 21 suburbs in its potential network. Similarly, while the Suleiman al Halabi station was repaired after a technical issue, power supply had been kept off due to the close proximity of conflict. Between the 10 - 12 October, the station was able to provide intermittent access to approximately 25% of its potential network, however this service subsequently ceased following insufficient fuel to power pumps.

Due to these water outages and the increasing unreliability of Aleppo pumping stations, most residents of eastern Aleppo no longer rely on the main network for their water. Over the past 7 days, residents of Ansari and Bustan al-Qaser have primarily obtained their water from closed wells (boreholes), whereas those in Masken Hanano and Tarek al-Bab have been forced to rely on open wells, some of them dug directly into the streets or sidewalks by local councils. Sheikh Magsoud is the only neighbourhood where local councils have been able to maintain a functional, widely used water network. In all other areas, water is generally available for just two to three hours per day, depending on the availability of fuel to run the pumps. Residents use these brief windows to fill their tanks and all other containers they own in order to store water for the remainder of the day.

Households in all neighbourhoods but Sheikh Maqsoud faced universal difficulty obtaining enough water to meet their needs. Many had to collect water from more than one source, relying on the inadequate municipal network and local council distributions of bottled water as their main secondary sources. In many cases, this was still not enough, and residents reported having to bathe less often and reduce their consumption of drinking water. Residents of nearly all neighbourhoods reported having to purchase their own water in the absence of distributions. At the same time.

the price of water in the southern besieged neighbourhoods (Ansari, Bustan al-Qaser and Kady Asker) increased by a median of 200 SYP per barrel over the past week, placing greater strain on residents who need to supplement their consumption through purchase.

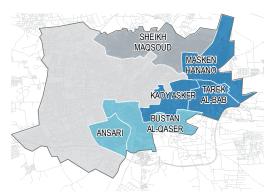
Water quality was not reported as a major issue except in Ansari, where residents tend to collect their water from wells lining the Quweiq River. Sanitation levels in the river are unknown and exposure and raw sewage is suspected. Residents in Ansari reported that their drinking water smelled bad and that people got sick after drinking it.

Food and markets

In neighbourhoods without access to either humanitarian or commercial vehicles, no food has entered for several weeks, leading to a shortage of food in markets. The food security of populations in these areas remains a concern. The exception to this has been the northern neighbourhood of Sheikh Maqsoud, which remains the only assessed area where food has been permitted to enter.

In a development from the previous assessment, local councils reportedly used some of their remaining supplies to distribute bread this week to populations across assessed neighbourhoods, with the exception of Sheikh Maqsoud. Each pack contained six pieces of bread, however there was an insufficient quantity to reach all households. KIs indicated they expected a similar distribution to occur within the next week.

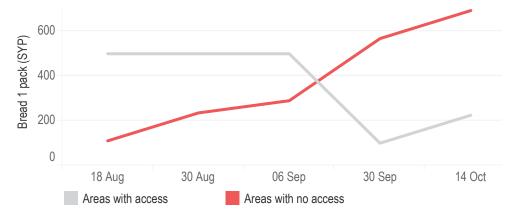
Map 4: Most common source of water



Main network — Closed wells — Open wells

As intense conflict continues, populations remain limited in their ability to access food in markets, either because markets have closed due to damage, or because civilians cannot leave their homes due to the insecurity. In the absence of access to markets, populations have been swapping remaining food items among neighbours, as was reported in previous assessments, however KIs in all neighbourhoods reported that more food secure families are now donating to particularly vulnerable populations. Populations in Tarek al-Bab and Masken Hanano remain vulnerable, with limited access to both markets and household food stocks. Residents in both neighbourhoods have been strictly rationing the last remaining basic food items in their homes. Local organisations in Ansari and Bustan al-Qaser have reportedly been providing some cooked meals, generally rice or pasta, for the most vulnerable members of their communities through community kitchens.

Average reported price of bread since August 18, 2016 (SYP)¹⁰



With the exception of Sheikh Maqsoud, all other assessed areas in the east of Aleppo reportedly remain without access to core food items such as flour, eggs, sugar, fruit and vegetables, chicken and oil, as was also reported in the previous update (30 September). Similarly, Kls in these neighbourhoods indicated that populations remain unable to access cooking fuel. People have reportedly been burning wood, furniture and other household assets deemed 'unimportant' in order to cope with this lack of fuel.

Market prices of all remaining food items have continued to rise across all assessed neighbourhoods without access for commercial vehicles. When REACH assessments began in mid-August, prices of available food items in the Kurdish neighbourhood were actually higher in comparison to all other areas due to the reduced access of commercial vehicles from both the east and the west boundaries. However, as the entry of food has remained severely limited in particular areas since assessments began, market availability has drastically declined and prices have continued

to inflate. The graph to the left presents the change since August 18 in the average reported prices of bread between areas with limited access and areas without access to commercial or humanitarian vehicles.

All neighbourhoods, bar Sheikh Magsoud, experienced an increase in the coping strategies used to deal with a lack of food. If possible to do so, populations continue to trade remaining food items, however it was commonly reported that where trading is no longer possible, some residents are being given basic items from households who are more food secure. Although KIs indicated they were not sure how long this would be able to continue. In Tarek al-Bab it was also reported that an increased number of residents have been trying to grow vegetables at home due to their continued inability to access markets and their concerns about the protracted length of the siege.

Despite the recent bread distribution by the local authority, all KIs reported that access to bread remains a challenge for various reasons, mainly due to insufficient supplies of flour and challenges to accessing fuel and electricity.

Shelter and NFIs

As the humanitarian situation in eastern Aleppo worsens, the shelter situation of displaced and non-displaced populations have begun to resemble each other more closely. Non-displaced populations continue to live in homes or apartments they own or rent, some sharing accommodation with other host community or displaced households. Meanwhile, IDPs who are not living with the host population are generally housed in abandoned homes and apartments by local councils. Collective centres, perceived as unsafe due to the continued targeting of public infrastructure, have largely fallen out of use, with no reports of IDPs using them in any assessed neighbourhood. Further, while displaced populations previously reported moving within east Aleppo to areas of perceived relative security, this is no longer possible as residents indicate there are no remaining safe spaces to seek protection from the conflict.

Access to NFIs throughout eastern Aleppo remains limited due to high prices, the widespread closure of small shops and

Average reported prices of core food items and reported change over the past week (SYP)^{10, 11}

		Ansari		Busta	an al-C)aser	Ka	ıdy Ask	ker	Masl	ken Ha	nano	She	ikh Maqsoud	Taı	ek al-E	Bab
Bread (1 pack)	700	1	+17%	600	+	-3%	760	1	+23%	700	1	+17%	225	\$	650	1	+8%
Rice (1 Kg)	660	1	+22%	660	1	+18%	660	1	+29%	500	1	+11%	300		450	1	+11%
Bulgur (1 Kg)	540	1	+23%	500	1	+14%	500	1	+9%	450	1	+5%	250		450		
Flour (1 Kg)	470	•	+10%	Not Available	Av	ailable	Not Available			Not Available			125	\rightarrow	Not Available		

REACH Informing more effective humanitarian action

Negative increase
Positive decrease
No change

¹⁰\$1 = 515 SYP (UN operational rates of exchange as of 1 October 2016)

¹¹ Some assessed core food items were reportedly unavailable across many parts of eastern Aleppo this week. As such, comparative changes are not necessarily reflective of areas experienceing high prices last week and current unavailability.

Reported access to NFIs by neighbourhood

	Personal hygiene items	Female hygiene items	Household hygiene items	Jerry cans / buckets	Cooking utensils	Blankets / sleeping mats	Clothes / shoes	Change since September 30
Ansari	V	V	✓	X	×	X	✓	+
Bustan al Qaser	✓	✓	X	×	X	×	√	+
Kady Asker	X	×	X	X	×	X	X	+
Masken Hanano	×	×	X	X	×	X	X	
Sheikh Maqsoud	V	V	V	V	V	V	√	
Tarek al Bab	×	X	X	X	×	X	X	

the dangers associated with traveling to larger markets. NFIs are frequently absent from markets or are present in insufficient quantities. Where they do exist, they are expensive enough to place them out of reach of ordinary households.

KIs in Masken Hanano and Tarek al-Bab reported that they could not access any of the assessed NFIs which included hygiene items, jerry cans, cooking utensils, blankets and clothing. Those in Kady Asker reported much the same, though they noted that clothing and some hygiene items could occasionally be found. Residents of Ansari and Bustan al-Qaser faced fewer restrictions on the whole, though jerry cans, buckets, cooking utensils, blankets and sleeping mats could not be obtained in any besieged neighbourhood of the city.

Sheikh Maqsoud, with its atypical access to commercial goods and humanitarian aid, remained an exception, with all assessed NFIs reportedly available in markets.

HUMANITARIAN PRIORITY NEEDS

The table on the following page shows the ranking of priority needs as reported by KIs, with a breakdown of reported needs by sector. The most recent assessment indicates that safety and security remains a key cross-cutting issue across all sector needs. Following this, health was ranked as the second highest priority need, with access to adequate shelters and sufficient safe water sources and basic food items subsequently prioritised.

A lack of access to vital medication supplies and an inadequate number of qualified medical staff were cited as the key priorities within the health needs of the populations.

Water networks were cited as a concern with the local network needing repairs following damage from shelling.

No formal humanitarian assistance has been received by populations currently under siege since late August. The unanimously cited need for safe entry and exit routes into eastern Aleppo is indicative of the deteriorating situation since the last assessment. Renewed access for humanitarian vehicles is necessary to enable any delivery of any assistance to affected civilians.

Conversely, humanitarian vehicles have reportedly been able to enter Sheikh Maqsoud without restrictions, delivering food, medication and medical equipment and NFIs since the opening of the Al Jazeera pass. KIs reported that vehicles continued enter during the past week.

CONCLUSION

As the conflict in eastern Aleppo continues to escalate and most parts of the city remain cut off from commercial, humanitarian and civilian access, the humanitarian situation is critical. Populations in areas without access are exposed to extensive shelling, which has resulted in heavy damage civilian

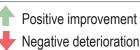
infrastructure such as health facilities, markets, water stations and roads. No food, fuel, medical items or NFIs have entered the area since access to Ramouseh road was cut almost six weeks ago. Access to health care, shelter, water and food is increasingly limited. The marked difference in the humanitarian situation between areas with access and areas without access is clear, with populations in Sheikh Maqsoud reporting few challenges in accessing assessed services.

Populations in remaining neighbourhoods report that health care remains their top priority need, as remaining facilities cannot cope with presenting caseloads. With critical shortages in medical services, supplies, personnel, fuel and space, and increasing numbers of patients requiring treatment, facilities are now reportedly turning away patients with relatively minor injuries or delaying treatment. KIs have reported the need for more facilities, medical staff and supplies, and as only one functioning dialysis machine in available for the population, treatment for chronic illness is also now a major concern.

With the increased severity of shelling, remaining shelters are not able to provide civilians with sufficient protection from the conflict and no areas in east Aleppo are considered safe. Populations are in need of adequate, safe shelter to provide relief from the constant insecurity and reported







Summary of priority reported needs by sector

Sector specific needs
 Increased number of functioning health facilities, quantity of medicines, trained medical personnel, and equipment (in particular; treatment for chronic diseases, emergency care for accidents and injuries, and surgery
 Alleviation in the number of presenting caseloads and medical evacuations for critical cases
Sufficient fuel supplies to power generators, medical equipment and ambulances
Access to safe spaces and secure shelters in order to protect civilians from shelling
 Access to sufficient safe water sources, either through renewed and reliable access to the public water network or through the distribution of chlorine to purify unsafe sources currently in use
 Increased quantity of fuel to pump water to households
General access to basic food items; either at affordable prices in markets or through distributions
 Items largely unavailable across neighbourhoods; flour, eggs, infant formula, vegetables, friut, milk, sugar, oil, meat

the need for secure access routes to enable affected civilians to leave, if they wish to do so.

Similarly, renewed access to safe water sources is also a concern as just one of the two pumping stations in eastern Aleppo, the Bab Al Nayrab station, is partially operative. In order to cope, residents are currently sourcing water from either open or closed wells, some of which are reportedly exposed to contamination from raw sewage,

rendering populations highly susceptible to water-borne diseases.

Food also remains a concern for populations under siege, as no food items have entered the area since early September. Access to food is a particular concern in the neighbourhoods of Tarek al-Bab and Masken Hanano, where residents remain unable to travel to markets due to the intensity of the conflict. In all areas except Sheikh Magsoud, the availability of food

items in markets is very limited and prices have continued to rise. Populations have been surviving on strict rationing of basic food items and bartering between close neighbours. An increase in the strategies used to cope with a lack of food has been reported and members of the community with remaining items have been donating some goods to those facing particular vulnerability. Renewed access to affordable basic food items, either in markets or through distributions is a priority.

Overall, the humanitarian situation has continued to deteriorate for the 250,000 – 275,000² people remaining within inaccessible parts of east Aleppo. With the conflict reaching unprecedented levels, populations are in critical need of access to safety as well as to life saving humanitarian assistance and to an alleviation of the constant shelling.

Together with Syrian INGO Forum and partners, REACH will continue to monitor the situation in eastern Aleppo, in order to provide updated information on trends related to intentions, priority needs and the overarching 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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