

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

25 November 2016

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INTRODUCTION

Since July 2016, the situation in eastern Aleppo has continued to deteriorate for the 250, 000 - 275,000 residents still living in the city's besieged neighbourhoods and is evolving into an unprecedented humanitarian crisis. Following three weeks of reduced airstrikes, conflict intensified on November 15th in eastern Aleppo, resulting in a drastic reduction in the available health services, with no functioning hospitals remaining¹.

Food insecurity has reached acute levels as the last food rations have been distributed and markets are inaccessible since attacks have resumed². **For the first time since assessments began in August, residents of east Aleppo have reported eating weeds and searching for food in garbage in order to cope with a lack of food.**

Compared to previous assessments, the neighbourhoods of Masken Hanano and Tarek al-Bab are now being directly affected by intense fighting, which has resulted in the inward movement of civilians, towards southern neighbourhoods of eastern Aleppo³.

This situation overview is the 7th rapid assessment conducted by REACH of the humanitarian situation in eastern Aleppo, providing updated information on civilian access to food, water, shelter, non-food

items and health care as well as the priority needs of those who remain. Data was collected from 21-24 November through qualitative interviews with 19 key informants (KIs) residing in the same previously assessed neighbourhoods: Ansari, Bustan al-Qaser, Kady Asker, Masken Hanano and Tarek al-Bab. Information on the functionality of water services was also provided by the northern Syria WASH Cluster. 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 and businessmen.

While the Kurdish neighbourhood of Sheikh Maqsoud has been included in previous assessments of eastern Aleppo, information was not collected for this update and, as such, no findings from this neighbourhood are included in this situation overview. Following an agreement between parties to the conflict and the opening of an access route into west Aleppo in mid-September, residents have experienced a marked improvement in the

humanitarian situation in contrast to all other assessed neighbourhoods of Eastern Aleppo.

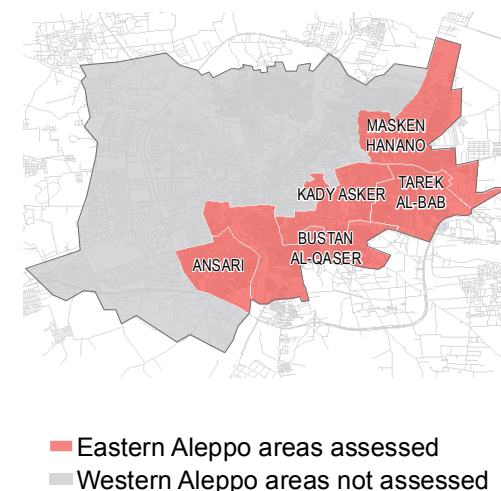
MOVEMENT OF CIVILIANS, GOODS AND ASSISTANCE

Civilian movement into and out of eastern Aleppo remains prohibited amid the current intensification of conflict. KIs reported that all civilians and vehicles carrying commercial goods or humanitarian assistance remain prevented from accessing the besieged area of the city, which has been the case since the beginning of September⁴.

While movement between neighbourhoods has also remained limited due to the heightened risk of shelling, residents in the neighbourhoods of Masken Hanano and Tarek al-Bab, which are currently experiencing direct fighting, have reportedly moved inwards in search of safety .

All KIs indicated that the current intensification of conflict has prevented civilians from leaving their homes to access markets, community kitchens, health facilities and wells. This is in contrast to the previous assessment (November 11), when some parts of the population were able to leave their homes and access basic services during the period of reduced airstrikes which commenced in late October.

Map 1: Assessed neighbourhoods of Aleppo City



CURRENT HUMANITARIAN SITUATION

Shelter and NFIs

There remains no protection for civilians as available shelters are unable to provide safety or security given the current intensity of the conflict. **IDPs are commonly living in shared accommodation or unfinished buildings, and, for the first time since assessments began in August, IDPs in Ansari and Bustan al-Qaser are reportedly making use of collective centres.** This is despite common community perceptions that collective centres are at increased risk of shelling due to the targeting of large

1 WHO Statement November 20 2016

2 OCHA, Bi-Weekly Situation Report No.17, 14th November 2016

3 Chicago tribute, 16th November 2016

4 REACH Situation Overview Eastern Aleppo City, September 4 2016

gatherings, however following the widespread destruction and damage to infrastructure, KIs reported a lack of alternative accommodation options.

As previously, no fuel was able to enter east Aleppo in the past two weeks. Populations continue to rely on coping strategies such as burning plastics, waste, furniture, clothes and other productive assets for heating and cooking purposes, while a lack of fuel also affects access to water and the functionality of health services. **Limited access to both fuel sources and non-food items remains a priority concern for populations given the start of winter, with residents becoming increasingly at risk of exposure to the cold.**

All assessed non-food items, clothes, shoes, blankets and winterisation supplies, have become inaccessible to populations across all neighbourhoods over the past two weeks.

Previously, populations in most neighbourhoods reported some access to clothes and shoes, however for varying reasons this is no longer the case. KIs in all neighbourhoods, with the exception of Ansari, reported that due to the increased shelling, there were no functioning shops or markets selling NFIs. In Ansari, it was reported that populations were unable to access available items due to high prices and a lack of income or resources.

Food and markets

As commercial vehicles and humanitarian deliveries remained unable to enter eastern Aleppo, food stocks are now depleted, and for remaining populations, the risk of starvation continues to increase. Since neighbourhoods were last assessed, there has been a sharp decrease in the number of households that have remaining food stocks; **across all neighbourhoods, less than 50% of households have enough food to last four days or more, and in Ansari KIs indicated that no households have sufficient stocks to last more than this time frame.**

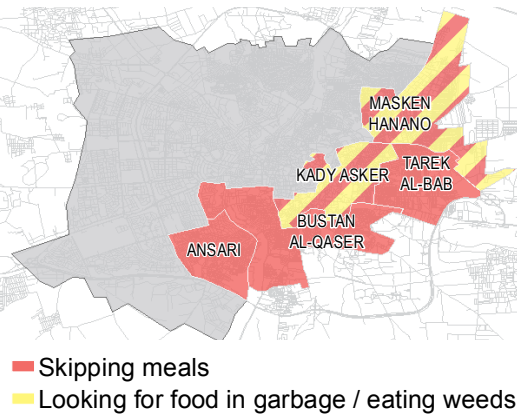
Given the deteriorating food security situation, populations across east Aleppo reported the increased use of coping strategies to deal with a lack of food; including begging or bartering, reducing size or number of meals per day, skipping meals, stealing food from empty homes and planting vegetables for consumption. **In the neighbourhoods of Kady Asker and Masken Hanano, KIs indicated that populations were commonly searching for food in the garbage and**

eating weeds in order to cope with a lack of food; the first time these coping strategies have been reported since assessments began in August.

The World Food Programme and partners reportedly distributed the last of their pre-positioned food stocks on 13 November.⁵ **All KIs reported that populations had been surviving on the strict rationing of this last distribution of food, which contained sugar, rice, bulgur, oil and dates, however the 900 rations were only expected to last two weeks.**⁵ UNOCHA estimates that there remains 100 MT of bulgur and 61 incomplete food rations in eastern Aleppo City.⁵

KIs across east Aleppo reported that populations were no longer able to access markets due to the escalation in conflict over the last two weeks. Damaged infrastructure, and security and safety concerns were cited as challenges in accessing markets in most neighbourhoods, while in Tarek al-Bab no functioning markets remained. Flour, eggs, sugar, milk, infant formula, chicken, meat, oil and vegetables remained unavailable in

Map 2: Reported use of emergency food coping strategies



markets across most neighbourhoods, and where items remained, it was reported that prices had further increased to prohibitive levels. Civilian access to basic cooked meals from community kitchens, which was reported in the last REACH Situation Overview (November 11), has since decreased as kitchens have stopped functioning due to the heightened levels of insecurity. However, in Kady Asker, it was reported that local community organisations were still providing some basic meals to orphaned children.

Average reported prices of core food items and reported change since last week (SYP)⁶

	Ansari			Bustan al-Qaser			Kady Asker			Masken Hanano			Tarek al-Bab	
Bread (1 pack)	1567	↑	+135%	1588	↑	+117%	1775	↑	+255%	2000	↑	+233%	Not Available	Available
Rice (1 Kg)	1025	↑	+179%	1000	↑	+122%	1050	↑	+142%	1075	↑	+115%	900	↑ +125%
Bulgur (1 Kg)	1200	↑	+227%	1150	↑	+213%	1275	↑	+283%	1000	↑	+150%	1200	↑ +243%
Flour (1 Kg)	Not Available	↓		Not Available	↓		Not Available	↓		Not Available	↓		Not Available	↓

⁵OCHA Biweekly Situation Report 17. 14 November 2016
⁶\$1 = 515 SYP (UN operational rates of exchange as of 1 November 2016)

Healthcare

The health situation within eastern Aleppo has deteriorated to unprecedented levels in the past week, with the continued targeting of remaining hospitals and health facilities. Health partners have reported that **there are now no functioning hospitals for the 250 000 – 275 000 people under siege in east Aleppo**⁷ and that the last remaining medical supplies are expected to deplete in the coming weeks.⁸

Following this deterioration, it was not possible to collect information about any remaining facilities from KIs due to widespread community concerns about the ongoing targeting of health services. While it was reported that some informal emergency care points were treating casualties, these services are unable to cope with caseloads given the intensity of the conflict. Given the critical shortage of medicine, medical supplies, facilities and trained personnel, **populations**

Most commonly reported medical services / items needed

1. Surgery
2. Treatment for chronic illness
- = 3. Antibiotics
- = 3. Emergency care for accidents and injuries

across eastern Aleppo are relying on civilians without professional training to treat patients; bandages, syringes and needles are commonly recycled and non-medical items such as wooden sticks and salt water are being used for treatment.

KIs almost universally indicated that access to surgery was urgently needed for populations, while a majority reported that treatment for chronic diseases, antibiotics and emergency care for accidents and injuries were also needed across neighbourhoods. **All KIs reported the need for the medical evacuation of critically ill and injured patients, to enable them to receive lifesaving treatment in facilities outside of east Aleppo.** At the time of writing, negotiations between parties to the conflict to allow the medical evacuation of critical cases were reportedly taking place⁹.

Water

The current functionality of the two water stations in eastern Aleppo has remained uncertain following damage sustained by shelling. The WASH Cluster reported that both stations were working on November 17th although not at full capacity.

Currently, populations across east Aleppo are accessing water from closed wells, in comparison to the last assessment when Kady Asker and Masken Hanano were able to rely on the main network. Overall, access to water has decreased over the two last weeks, with all KIs reporting that insufficient access to water

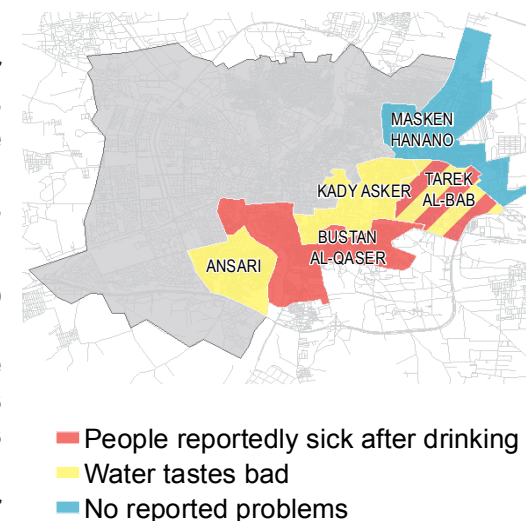
is affecting the entire population. Previously, no issues in accessing water were reported in Bustan al-Qaser.

Water quality has also decreased over the last two weeks; water from wells was reported to have a bad taste or to have made people ill in all neighbourhoods, except Masken Hanano where no issues were reported.

The adoption of coping strategies has also increased compared to early November. Residents across all neighbourhoods have reportedly adopted several coping strategies in order to cope with intermittent access to water; **modifying hygiene practices, spending money usually spent on other things in order to purchase water and reducing drinking water consumption have now become common across eastern Aleppo.**

Finally, it was reported that residents across eastern Aleppo no longer have access to any assessed hygiene and sanitation items including female sanitary items and household hygiene items. In previous assessments, some access to hygiene items was reported in most neighbourhoods, but shops and markets have reportedly closed following the recent escalation of conflict. Women are reportedly using old clothes as a substitute for sanitary pads.

Map 3: Most commonly reported issues with water quality



HUMANITARIAN PRIORITY NEEDS

Safety and security was the highest reported priority for populations within eastern Aleppo; all KIs cited that the alleviation of shelling and the provision of secure access routes to allow for the freedom of movement of both civilians and humanitarian assistance, were essential to ensure the protection of populations amid the ongoing airstrikes and increased fighting.

The subsequent ranked priority needs were access to healthcare and food, followed by water and shelter. The table on the following page displays the sector-specific priority needs, as reported by KIs across the communities assessed.

⁷ WHO. Eastern Aleppo without any hospitals for more than 250,000 residents. 20 November 2016

⁸ OXFAM, Thousands of people in besieged East Aleppo under attack with little food, water and healthcare. 17 November, 2016

⁹ Al Jazeera. UN awaits 'green light' for aid deliveries to Aleppo. 24 November 2016

CONCLUSION

Since the re-intensification of conflict on the 15th of November, the humanitarian and security situation in east Aleppo has rapidly deteriorated, developing into an unprecedented humanitarian emergency.

Over the past week, increased ground fighting within Masken Hanano and Tarek al-Bab has resulted in the displacement of civilians towards southern neighbourhoods of eastern Aleppo.

Given the current intensity of the conflict, there remains no protection for civilians and IDPs have resorted to sheltering in unfinished buildings and collective centres due to a lack of accommodation options caused by widespread destruction of infrastructure.

Food security is also a critical concern as WFP distributed their last remaining food stocks on November 13th. While civilians have reported strictly rationing this food, extreme coping strategies are now commonly being adopted across east Aleppo, including skipping meals and eating weeds.

Following the direct targeting of health facilities over the past week, there are now no functioning hospitals to treat the population. As the delivery of medicine, medical supplies and trained personnel continues to be prevented, remaining services cannot cope with presenting caseloads given the near-constant airstrikes. The delivery of

emergency assistance is a priority need, with remaining medical stocks estimated to be depleted in the coming weeks.¹⁰

Access to safe water remains limited, with populations relying on the intermittent access to water from closed wells. **The quality of water from these wells remains a concern with at least one KI in all neighbourhoods, except Masken Hanano, reporting that residents became sick after drinking water.**

Overall, the humanitarian situation in east Aleppo has reached critical levels. With no access to protection, food, fuel or NFIs, and extremely limited access to healthcare, the survival of the 250, 000 – 275, 000 people besieged within the city is a major concern as winter commences.

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.

Visit www.reach-initiative.org and follow us @REACH_info.

Summary of priority reported needs by sector

Priority	Sector specific needs
= 1. Food	<ul style="list-style-type: none">• Access to basic food items through delivery of assistance or affordable items in markets• Specifically, populations are in need of; flour, rice, eggs, sugar, milk, baby milk, oil, fruits and vegetables
= 1. Health	<ul style="list-style-type: none">• Increased number of functioning health facilities, quantity of medicines, trained medical personnel, and equipment (in particular, surgery, treatment for chronic diseases, antibiotics, and emergency care for accidents and injuries)• Alleviation in the number of presenting caseloads and medical evacuations for critical cases
2. Water	<ul style="list-style-type: none">• 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
3. Shelter and NFIs	<ul style="list-style-type: none">• Access to secure shelter for protection of civilians from security concerns• Access to winterisation materials; fuel, blankets, clothes, shoes

¹⁰ OXFAM, Thousands of people in besieged East Aleppo under attack with little food, water and healthcare. 17 November, 2016