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

18 August 2016



INTRODUCTION

Since the closure of Castello road in early July and the ensuing intensification of conflict in and around Aleppo city, an estimated 250,000-275,000 people have remained trapped in Eastern Aleppo.1 The main access route to Western Aleppo, via Khanasser, has been barred since early August, bringing the total number of individuals with limited freedom of movement to two million.² Since late July, continued targeting of clinics and hospitals has severely strained the capacity of healthcare facilities to provide for the needs of civilians.3 Damage to key infrastructure in early August has heavily restricted access to the main water and electricity networks for the two million people in Aleppo, while restrictions on humanitarian access to most parts of the city have resulted in shortages of food and medical supplies.

On 14-16 August, REACH conducted a rapid assessment of access to food, water, shelter, non-food items and healthcare as well as the priority needs and future intentions of those who remain in eastern Aleppo. This information is currently being fed into a joint Syrian INGO Forum effort to provide an overview of the rapidly evolving situation in Aleppo. Information was collected through qualitative interviews with a total of 28 Key Informants (KIs) residing in the neighbourhoods of Masken Hanano, Kady Asker, Bustan al Qaser, Ansari, Tarek al Bab and the Kurdish area of Sheikh Magsoud

(see map). Interviews were conducted both in person and remotely with key informants who had sector-specific knowledge about their neighbourhood: teachers, shop owners, businessmen, local council workers, third sector employees, pharmacists, mechanics, lab workers, nurses, and water network employees.

INTENTIONS

Displacement

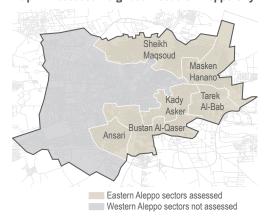
The civilian population inside eastern Aleppo typically consists of family groups: most commonly married men with their families. followed by married women with their families but without their husbands. Most inhabitants of eastern Aleppo left early in the conflict, whilst the remaining population have commonly experienced multiple displacement and have had their resources steadily eroded by the effects of conflict.4 Despite this, the remaining families have typically stayed to protect assets. preserve family ties, or for a lack of alternative destinations.⁵ Over the past two weeks, there has reportedly been no civilian movement into or out of eastern Aleppo. There has also been little movement within the area, although a few KIs reported limited movement around Masken Hanano neighbourhood.

At the time of the assessment, the majority of the population was unable to leave eastern

Aleppo. However, KIs identified triggers that could result in an estimated third of the population (85,000 people) wanting to leave if it were possible to do so. Others would reportedly be unlikely to do so either for patriotic reasons, to protect assets, or for a lack of alternative destinations. Reported "push" factors that would encourage the population to leave include the further escalation of conflict, a loss of income, and reduced access to water. The most commonly reported specific trigger event was increased shelling. Notably there has been a recent decline in the availability of water due to a lack of power to operate pumps- a situation which is reportedly becoming untenable. In Sheikh Magsoud, a predominantly Kurdish neighbourhood in which additional access restrictions have limited the availability of food and basic items, KIs reported that if a guaranteed secure road to Afrin were opened then people would be prompted to leave. Elsewhere, whilst the potential opening of humanitarian corridors outside of the city may be a pre-condition for civilians to leave, it did not appear to be a major trigger factor on its own.

For those wanting to leave, primary intended destinations would be elsewhere in Aleppo governorate (particularly to communities in Daret Azza, A'zaz, Atareb and Afrin sub-districts), certain communities in Idleb governorate (most commonly Dana, Khan Shaykun and Idleb sub-districts) and

Map 1: Assessed neighbourhoods of Aleppo City



Turkey. Reported pull factors to these locations mirror the push factors away from Aleppo city, most commonly the possibility of safety and security, access to lifesaving assistance, water, basic services, and livelihoods. Family ties in intended destinations, access to food and access to health services were reported as pull factors by approximately a quarter of Kls.

CURRENT HUMANITARIAN SITUATION

Food and Markets

Following a decrease in food distributions due to a lack of humanitarian access to eastern

Aleppo, KIs in all neighbourhoods reported that populations are typically accessing food

² OCHA Call for Urgent Humanitarian Access in Aleppo, Syria. 8 August 2016

³ WHO briefing notes: Eastern Aleppo situation. 9 August 2016

Figure 1: Average reported prices

	Ansari	Bustan al Qaser	Kady Asker	Masken Hanano	Sheikh Maqsoud	Tarek al Bab
Bread (1 pack)	120	118	100	115	500	100
Rice (1 Kg)	194	173	350	260	350	330
Bulgur (1 Kg)	90	88	125	131	220	115
Flour (1 Kg)	115	120	130	108	200	135

provided by local councils, as well as through purchase from shops or markets. In all neighbourhoods, with the exception of Sheikh Magsoud, populations are also accessing food through distributions from local NGOs.

While KIs in most neighbourhoods reported that populations are generally able to access markets, this was less common in Sheikh Magsoud and Masken Hanano. In Sheikh Magsoud, a lack of safety and security reportedly limits movement both to and around markets. In Masken Hanano, physical and logistical constraints, such as damaged roads, insufficient transport, and a lack of mobility for women and people requiring adapted services were the most commonly reported barriers.

Despite populations being able to access markets in all neighbourhoods with the exception of Ansari, access to food and cooking fuel remains challenging. The most common barriers included the high cost of available foods, and a lack of resources to buy available goods. Despite hawala systems typically functioning, a lack of access to cash was reportedly widespread, with less than half of the population able to access cash in all but one assessed neighbourhood.6 KIs across the assessed neighbourhoods reported that core food items such as tomatoes, potatoes, eggs, milk, meat and poultry were not available. Shortages of these and other items were reportedly particularly severe in Sheikh Magsoud and Masken Hanano neighbourhoods.

Despite problems related to both access and availability, the re-opening of the Castello road has allowed some access for commercial vehicles into and out of Eastern Aleppo, resulting in a modest decrease in the price of staple foods (bread, rice, bulgur, flour) over the past two weeks. The availability of some food items also increased during the same period although severe food insecurity remains a key challenge.7

Kls reported that all households in Ansari and Bustan al Qaser and most households in Masken Hanano and Kady Asker have enough food stocks to last at least four days.

In contrast, less than half of households in Tarek al Bab and Sheikh Magsoud neighbourhoods reportedly have enough food stocks to last more than 4 days. Such areas are likely to be particularly vulnerable to any decrease in distributions or commercial vehicle access, particularly given persistent challenges related to the availability and affordability of food in markets.

Challenges to accessing bread were reported in all neighbourhoods except Ansari, most commonly due to a lack of functioning shops or bakeries, insufficient supplies, or difficulties accessing flour. However, some public bakeries in eastern Aleppo are still functioning, and at least one KI in each neighbourhood reported populations accessing bread through local authority distributions in the last 14 days. In Masken

Hanano, people have accessed bread through humanitarian distributions, and in Bustan al Qaser from private bakeries and distributions by local volunteers.

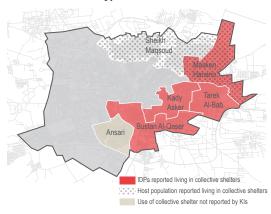
The use of coping strategies was reported by KIs in all neighbourhoods of eastern Aleppo. Stress strategies such as borrowing money for food, selling non-productive assets and reducing essential non-food expenditure (e.g. health care, water, utilities or heating) were prevalent across the city, with parts of the population also engaging in crisis coping strategies, including sending family members who have not previously worked to search for jobs in order to support the household, as well as reducing expenditure on productive assets such as livestock, seed-stock, fuel and machinery.

KIs reported that boys and girls under the

Figure 2: 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
Ansari	/	/	V	√	/	V	/
Bustan al Qaser	V	/	V	\	/	V	V
Kady Asker	V	V	V	/	/	/	V
Masken Hanano	V	/	V		/	V	/
Sheikh Maqsoud	/	×	X	X		V	/
Tarek al Bab	/	/	/	/		/	/

Map 2: Reported use of collective shelters as a common shelter type



Sheikh Magsoud

Masken Hanano

Kady Askar

Al-Bab

Ansari

Bustan Al-Qaser

Map 3: Reported use of tents as a common

shelter type

age of 5 are the most vulnerable groups at risk to a lack of food. Similarly, elderly persons (above 60 years) were identified in all communities as the third population group most at risk.

Water

Access to water in eastern Aleppo has recently deteriorated, due to a lack of power for generators preventing pumps from working. Open wells are the most commonly accessed water sourced reported by all KIs, with the exception of those in Sheikh Maqsoud where populations most commonly access water from the water network. In this neighbourhood, services are run by Kurdish local authorities separate to the rest of eastern Aleppo. Approximately half of KIs reported that populations have also accessed water through the main water network at times during the past 30 days. This was reported by all KIs in

the communities of Ansari and Bustan al Qaser and some in Masken Hanano. In Kady Asker, it was reported that water has been sourced from both the water network and trucks.

IDPs reported living in tents

Use of tents not reported by KIs

Over 50% of KIs reported that populations' faced intermittent access to water in the last 30 days; access is sometimes sufficient access and sometimes insufficient depending on the security situation. Five KIs in the communities of Ansari, Bustan al Qaser and Masken Hanano (approximately 20%) reported that everyone/nearly everyone has faced problems accessing enough water for their needs while KIs in Sheikh Magsoud reported no problems in access to water. The current issue is one of availability rather than affordability, with only one KI in Tarek al Bab reporting an increase in water prices during the past two weeks, from 225 SYP to 500 SYP per barrel.

KIs in all city sectors assessed, with the exception of Sheikh Magsoud, reported that populations have adopted strategies to cope with a lack of water. Of these, all reported that populations had modified their hygiene practices (i.e. bathed less) and the majority of KIs reported that people had also reduced their consumption of drinking water. In previous assessments conducted in Aleppo governorate, populations in the city sectors of Ansari and Bustan al Qaser commonly reported they had resorted to bathing less than once a week and washing their laundry once every two weeks. In contrast, populations in Sheikh Magsoud were not reportedly suffering from a lack of water, as local Kurdish organisations had repaired their water network soon after it had been damaged due to shelling.

Shelter / NFIs

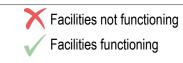
The most commonly reported shelter for host populations are owned homes and apartments, followed by rented homes or apartments and shared accommodation. KIs in the communities of Sheikh Maqsoud and Masken Hanano reported that some host populations are living in collective centres such as schools or mosques, reportedly a result of damage rendering homes inhabitable.

IDPs in assessed neighbourhoods are most commonly living in shared and rented accommodation, followed by collective centres. KIs in the neighbourhoods of Ansari, Kady Asker and Tarek al Bab reported that IDPs are commonly living in tents or informal settlements within the community. While collective centres are reportedly being used

Figure 3: Reported medical facilities functioning by neighbourhood*

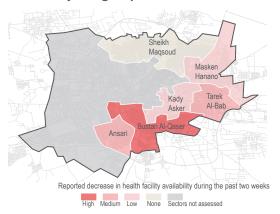
	Hospitals	Mobile clinics /field hospitals	GP surgeries / clinics	Informal emergency care points
Ansari	/	/	\	X
Bustan al Qaser	V	V	V	X
Kady Asker	V	V	×	V
Masken Hanano	X	V	×	X
Sheikh Maqsoud	×	√	×	×
Tarek al Bab	V	V	\checkmark	V

^{*} 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.





Map 4: Reported decrease in health facility availability during the past two weeks



to house people in all neighbourhoods, with the exception of Ansari, only KIs in Bustan al Qaser and Masken Hanano reported their capacity to accommodate more people.

While access to most assessed NFIs varied across neighbourhoods, all KIs reported that populations have some access to personal hygiene items, clothes and shoes. As shown in the table on page 2, people in Sheikh Maqsoud are unable to access many of the assessed items. The most commonly reported barrier to accessing NFIs across eastern Aleppo was their unavailability or low supplies in markets.

KIs in all neighbourhoods reported that populations currently have access to cooking fuel; however, the proportion of the population who have sufficient supplies to last more than four days varied across areas assessed. In the neighbourhoods of Ansari, Sheikh Maqsoud and Bustan al Qaser it was reported that more

than 50% of the population currently have cooking fuel enough to last more than four days, while this was the case for less than half of the population in Kady Asker, Tarek al Bab and Masken Hanano.

Healthcare

In the past month, five of eastern Aleppo's nine hospitals in eastern Aleppo have been affected by direct conflict,8 inhibiting the ability of facilities to cope with the needs of the population. Few functioning healthcare facilities were reportedly available in the city - primarily mobile clinics or field hospitals with some surgeries/clinics and hospitals - and all KIs reported that health services were needed. The most common services reportedly required include treatment for chronic disease (diabetes, blood pressure, heart problems); emergency care for accident and injury, surgery, antibiotics and the provision of assistive devices. Population groups reportedly most at risk from a lack of health care were children under the age of five, followed by the elderly.

Aid

For the 275,000 people currently estimated to remain in eastern Aleppo, the situation is rapidly deteriorating and access to assistance is limited. Typically, aid is reportedly prevented from entering the city at all. When it does, key informants indicated the presence of multiple barriers preventing people from receiving assistance, notably crowding at distribution points; and the risk of such locations being

targeted by shelling. Respondents indicated a community preference for distributions to be organised in multiple stages to reduce occurrence of large gatherings, or alternatively for aid to be delivered directly. Home deliveries of aid, organised through the local authority, have occurred in the past in Sheikh Maqsoud, where this is reportedly a favoured method of distribution.

The majority of KIs reported that were assistance to be delivered, they would prefer it to be distributed immediately. Approximately half indicated that communities would prefer assistance to be distributed and monitored by

those responsible for providing the aid, whilst some KIs in Sheikh Maqsoud, Tarek al Bab and Kady Asker indicated that local councils should be involved.

HUMANITARIAN PRIORITY NEEDS

The table below shows the ranking of priority needs as reported by KIs, with a breakdown of specific reported needs in each sector. Water was the top ranked need, followed by food, health and shelter / NFIs.

Figure 4: Top ranked priority needs

Priority	Sector specific needs
1. Water	 Access to safe drinking water Access to additional new water points Power to enable usage of existing wells
2. Food	General availability of and access to basic food items
3. Health	 Access to clinics and hospitals Treatment for chronic disease, emergency care, surgery, antibiotics Need for all basic medical items and healthcare facilities in Sheikh Maqsoud
4. Shelter/ NFIs	 Ensure safety of existing shelters Cooking fuel Access to electricity and regular power

CONCLUSION

The situation in Eastern Aleppo has been steadily deteriorating since early July. The remaining civilian population is largely unable to leave and the situation is exacerbated by the limited entry of goods and assistance. The humanitarian response has been hindered by a lack of access and ongoing security concerns, while fears about the safety of large congregation in public spaces indicate a need to consider alternative distribution modalities, were assistance able to enter.

In the immediate term, safety and security remains a primary concern of residents within eastern Aleppo, with the lack of safe shelter during shelling among priority reported concerns. Ongoing conflict will only decrease the availability of safe shelter and further exacerbate the situation. Access to water has rapidly declined over the past two weeks as pumps are unable to function without power. KIs have indicated that the situation is becoming untenable, representing an important trigger that might encourage people to leave. Whilst humanitarian needs are similar across most of eastern Aleppo, priorities differ slightly in Sheikh Magsoud, where water and electricity services are functioning more effectively but increased access restrictions are resulting in a severe lack of availability of core food items.

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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