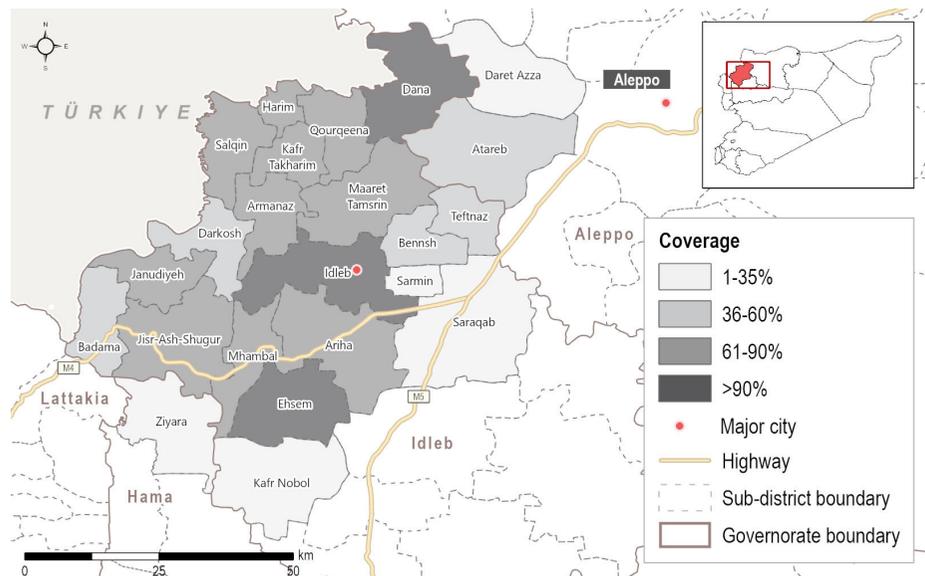


## INTRODUCTION AND METHODOLOGY

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, public health, and the security and protection situation in Northwest Syria (NWS). HSOS focuses on host community and internally displaced persons (IDP) households residing in communities. **This assessment does not provide information on camps and informal settlements.**

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 generalised across the population and region. The complete monthly HSOS dataset is available on the [REACH Resource Centre](#).

The assessment is conducted using a key informant (KI) methodology at the community level. REACH enumerators in Greater Idlib interview three to six KIs per assessed location, either directly or remotely. KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in **294 communities** across Greater Idlib area.<sup>1</sup> Data was collected **between 7-17 May 2023** from **1,103 KIs** (6% female).



## KEY MESSAGES

**The unaffordability of basic goods and unemployment persisted in Greater Idlib, leading to high needs for livelihoods support. IDP children continued to face further barriers to access to education, while access to health services remained limited despite the presence of severe health problems in the region.<sup>a</sup>**

- **Amid harsh economic conditions, KIs reported a high need for livelihoods support.** In 92% of assessed communities in Greater Idlib region, KIs reported the presence of households whose income was not covering expenditures. Additionally, KIs increasingly cited the lack of employment opportunities as a barrier to accessing livelihoods throughout the first half of 2023 (reported in 65% of assessed communities in May compared to 55% in January). This increase could be related to the impact of the February earthquakes on the job markets in NWS.<sup>b</sup> While the need to access humanitarian programs supporting livelihoods was reported in 76% of assessed communities, KIs mentioned the presence of humanitarian livelihood support in less than 1% of assessed communities.
- **Access to schools remained limited, especially among IDP children.** Despite the reported presence of functioning education services in 90% of assessed communities, not all children were able to access learning facilities. IDP children were particularly impacted, with KIs in 21% of assessed communities reporting that half or less of the school aged IDP children accessed school in the last 30 days (compared to 12% for host community children). Reports of children feeling uncomfortable to attend schools were also higher for IDP children (reported in 30% of assessed communities) than for host community children (18%). This difference was likely due to the fact IDP children were further exposed to long periods out of school and cumulative delay in learning.<sup>c</sup>
- **The access to essential health services remained limited in Greater Idlib.** KIs in 40% of assessed communities reported that households were unable to access healthcare within their own community. Furthermore, some essential health services remained widely inaccessible in the region. This was the case for treatments of parasitic infection, which KIs in 31% of assessed communities reported as inaccessible either within the community or in nearby locations. This raises concerns especially in a region exposed to various parasitic diseases such as leishmaniasis.<sup>d</sup>

### HSOS Dashboards

The interactive [HSOS Dashboard](#) provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level. The [Humanitarian Trends Dashboard](#) uses HSOS data to visualise how the humanitarian situation in northern Syria has been changing over time.

## PRIORITY NEEDS AND HUMANITARIAN ASSISTANCE



Most commonly reported **overall** priority needs for host community households (by % of assessed communities) <sup>2</sup>



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



Yes: 86%  
No: 14%

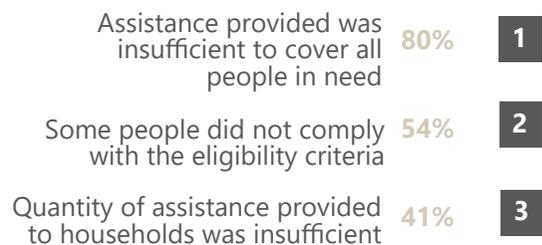
% of assessed communities where KIs reported the presence of the following **types of assistance for host community households** <sup>3</sup>



Most commonly reported barriers that host community households faced in accessing humanitarian assistance (by % of assessed communities reporting barriers) <sup>3</sup>

Communities where access to humanitarian assistance was reported

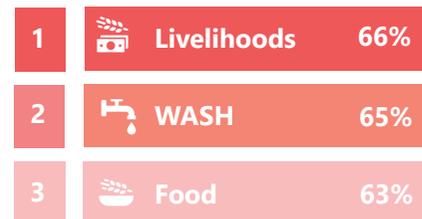
Communities where no access to humanitarian assistance was reported



100% No humanitarian assistance was available



Most commonly reported **overall** priority needs for IDP households (by % of assessed communities) <sup>2</sup>

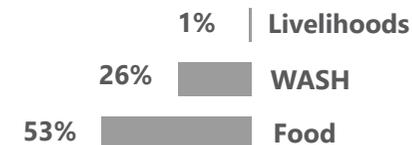


% of assessed communities where some of the IDP households were able to access humanitarian assistance



Yes: 87%  
No: 13%

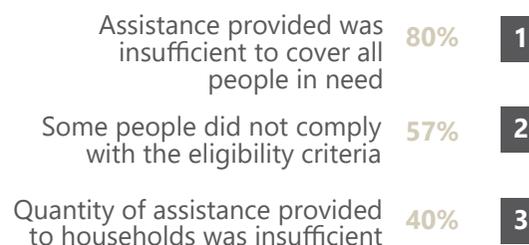
% of assessed communities where KIs reported the presence of the following **types of assistance for IDP households** <sup>3</sup>



Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of assessed communities reporting barriers) <sup>3</sup>

Communities where access to humanitarian assistance was reported

Communities where no access to humanitarian assistance was reported



100% No humanitarian assistance was available

## ECONOMIC CONDITIONS

Region	Median estimated monthly household expense for water for a household of six <sup>4,5</sup>			Median estimated monthly rent price for a two bed-room apartment <sup>4,5</sup>			Median estimated daily wage for unskilled labour <sup>4,6,7</sup>		
	SYP	TRY	USD	SYP	TRY	USD	SYP	TRY	USD
Northwest Syria	150 TRY			472 TRY			50 TRY		
% of assessed communities where indicator was reported in following currencies	0%	100%	0%	0%	49%	51%	0%	100%	0%

### Most common sources of meeting basic needs for households (by % of assessed communities) <sup>3,7</sup>



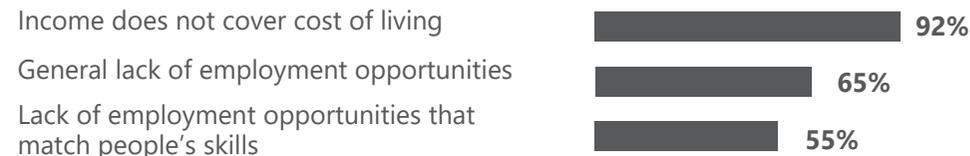
### Presence of host community and IDP households relying on non-productive sources of livelihoods to meet their basic needs (by % of assessed communities) <sup>3</sup>



### Intersectoral findings on unaffordability hindering access to goods and services <sup>7</sup>

- KIs in **69%** of assessed communities cited **rent** was unaffordable for the majority of people
- KIs in **83%** of assessed communities cited the high cost of **solar panels** as a common challenge
- KIs in **89%** of assessed communities cited the high cost of **food** as a common challenge
- KIs in **28%** of assessed communities cited high cost of **fuel for generators** as a common challenge
- KIs in **46%** of assessed communities cited the high cost of **water trucking** as a common challenge
- KIs in **61%** of assessed communities cited the high cost of **health services** as a common challenge

### Most commonly reported barriers to accessing livelihoods (by % of assessed communities) <sup>3,7</sup>

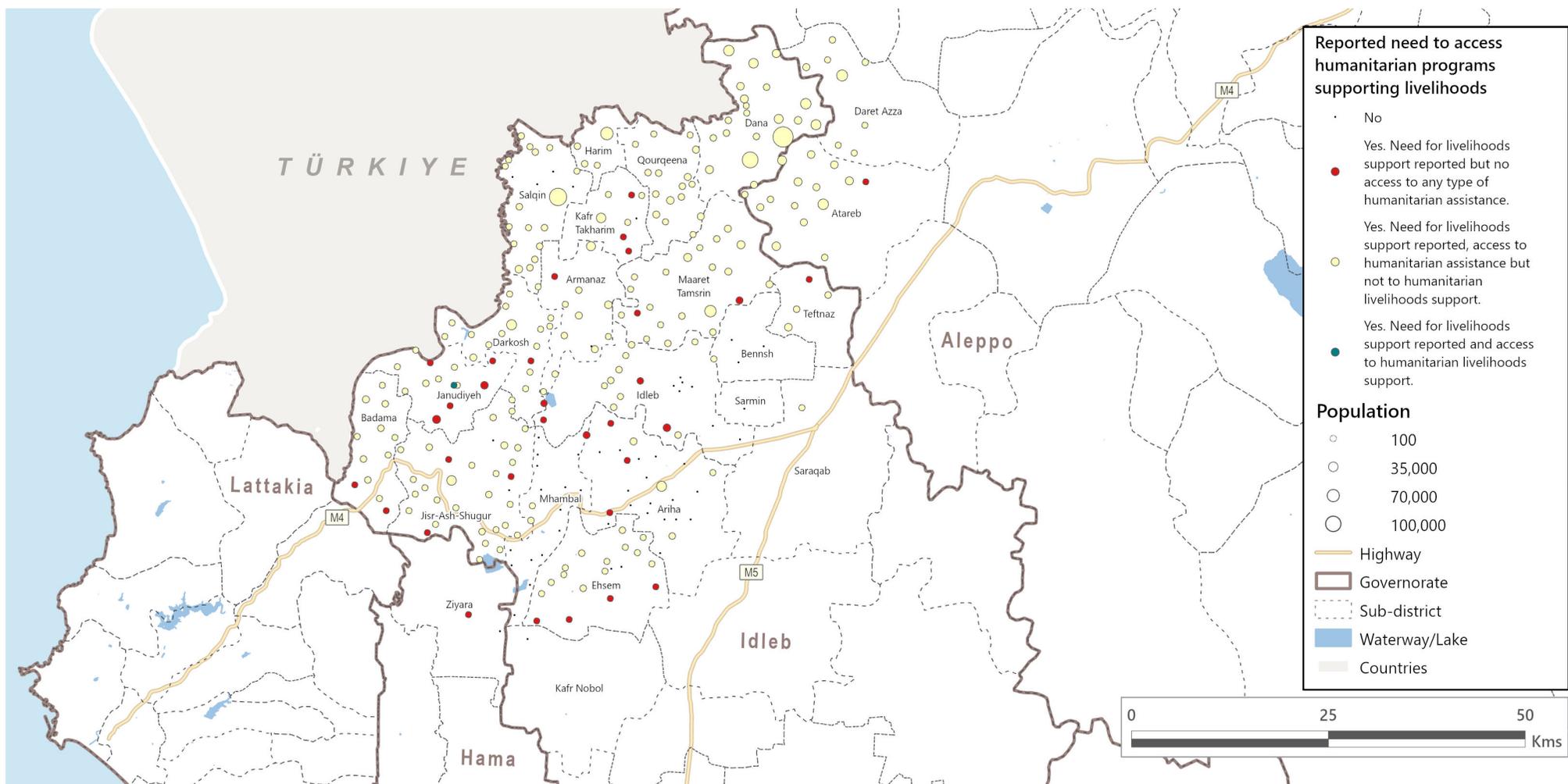


### Most commonly reported barriers to accessing livelihoods related to agriculture (by % of assessed communities) <sup>3</sup>



### % of assessed communities where livelihood sources from agriculture were reported <sup>3</sup>

Livelihood source	Host community households	IDP households
Food crop production	58%	18%
Cash crop production	54%	6%
Livestock products	65%	51%
Sale of livestock	13%	11%



## Need for livelihoods support and reported humanitarian aid in Greater Idlib

### Note on the map

This map focuses on the communities in which KIs reported a need to access humanitarian livelihoods support. Among these communities, three scenarios can be visualised on the map: In red, the communities where KIs reported no access to any kind of humanitarian support. In yellow, the communities where KIs reported access to humanitarian assistance, but not to livelihoods programs. In green, communities with reported access to humanitarian programs supporting livelihoods.

## BASIC NEEDS OVERVIEW

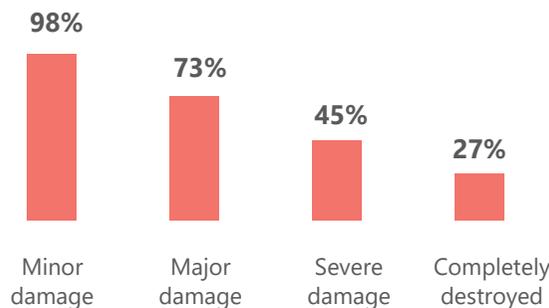
In **87%** of assessed communities, at least **80%** of the host community households reportedly **owned their shelter**

In **61%** of assessed communities, **none** of the IDP households reportedly **owned their shelter**

In **29%** of assessed communities, at least **one fifth** of the IDP population reportedly lived in **unfinished or abandoned residential buildings**

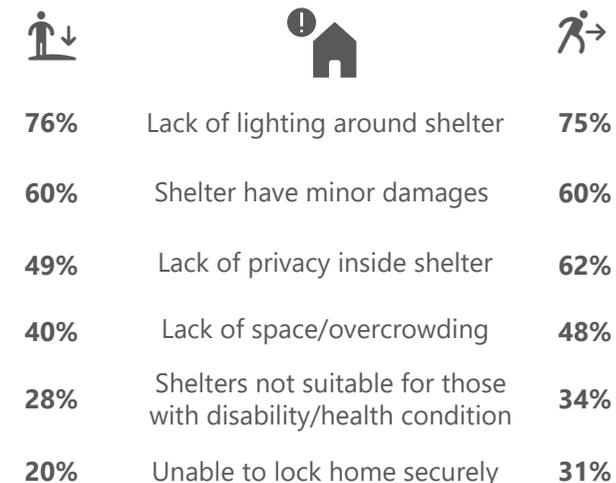
In **20%** of assessed communities, at least **one fifth** of the IDP population reportedly lived in **tents**

### Reported presence of occupied shelters with damage (by % of assessed communities)<sup>4,8</sup>



**Shelter and repair materials being too expensive** was the most commonly reported challenge for households to repair their shelter (reported by KIs in 96% of assessed communities)

### Most commonly reported shelter inadequacies (by % of assessed communities)<sup>3</sup>



**96%**

% of assessed communities where KIs reported that **households experienced barriers to accessing sufficient food**<sup>7</sup>

### Commonly reported barriers to accessing sufficient food (by % of communities)<sup>3,7</sup>

- |          |   |            |
|----------|---|------------|
| <b>1</b> | Markets exist and food is available but households cannot afford essential food items | <b>89%</b> |
| <b>2</b> | Markets exist but not all essential food items are available                          | <b>14%</b> |
| <b>3</b> | Households are not able to store food or cook food                                    | <b>4%</b>  |



**High price of suitable foods formula** was the most commonly reported challenge to feeding young children (reported by KIs in 95% of assessed communities)<sup>7,9</sup>

### Commonly reported **source of food** for households **other than markets** (by % of assessed communities)<sup>10,7</sup>

- |          |  |            |
|----------|--|------------|
| <b>1</b> | Own production or farming                            | <b>64%</b> |
| <b>2</b> | Relying on food stored previously                    | <b>26%</b> |
| <b>3</b> | Assistance from local councils, NGOs or other groups | <b>23%</b> |

## ACCESS TO BASIC SERVICES



### Access to Electricity

> 12 hrs/day

was the most commonly reported range of hours of electricity accessible to households (reported by KIs in 48% of assessed communities)

### Solar panels

was the most commonly reported main source of electricity (reported by KIs in 64% of assessed communities)

83%

% of assessed communities where KIs reported **Solar panels too expensive** as the most frequently reported barrier to electricity access



### Access to Water

50%

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



7 days 14%  
5-6 days 13%  
3-4 days 11%  
1-2 days 6%  
0 days 56%

Days per week where water from the network was available (by % of 283 communities connected to a water network)

Private water trucking

was the most commonly reported source of water for all purposes (reported by KIs in 52% of assessed communities)

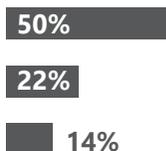


### Access to Sanitation

35%

% 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)



Paid private waste collection  
Waste disposed of by household to a dumping location  
Free public waste collection

45%

% of assessed communities where KIs reported **waste removal services** as a WASH priority need <sup>7</sup>



### Access to Markets

7%

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

### Not enough consumers to support markets

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)

70%

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

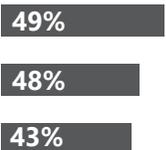


### Access to Health Services

40%

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

Most commonly reported health priority needs (by % of assessed communities)<sup>7, 10</sup>



Medicines and other commodities  
Treatment for chronic diseases  
First aid or emergency care

High cost of transportation to health facilities

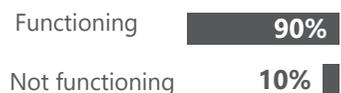
was the most commonly reported **barrier to accessing healthcare** (reported by KIs in 80% of assessed communities)



### Access to Education Services

12%  
21%

% of assessed communities in which only half or less of the school aged-children accessed school in the last 30 days for **host community** and IDP households



Functioning 90%  
Not functioning 10%

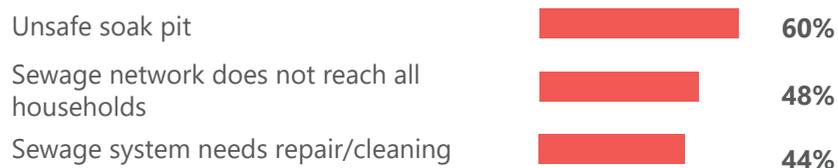
Reported functionality of education services in the assessed location

79%

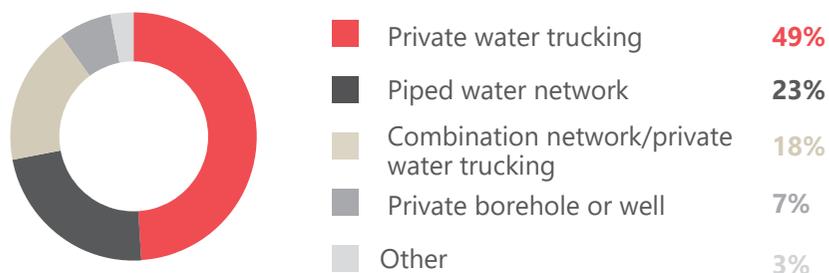
% of assessed communities where KIs reported that **Families cannot afford to prioritize school and children must work** <sup>7</sup>

## PUBLIC HEALTH

### Most commonly reported sanitation issues (by % of assessed communities)<sup>3</sup>



### Primary sources of drinking water (by % of assessed communities)



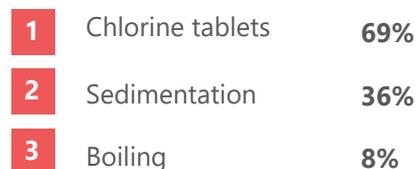
49%

% of assessed communities where KIs reported that households **faced problems with drinking water.**

70%

% of assessed communities where KIs reported that households **did not use any methods** to make water safer to drink.

### Methods used by households to make water safer to drink (by % of assessed communities in which KIs reported methods being used)<sup>3</sup>



### Reported challenges related to quantity, quality and diversity of food for babies and young children (less than 2 years old)<sup>3,9</sup>

**Limited variety of food** reported in **34%** of assessed communities

**Not enough food** reported in **27%** of assessed communities

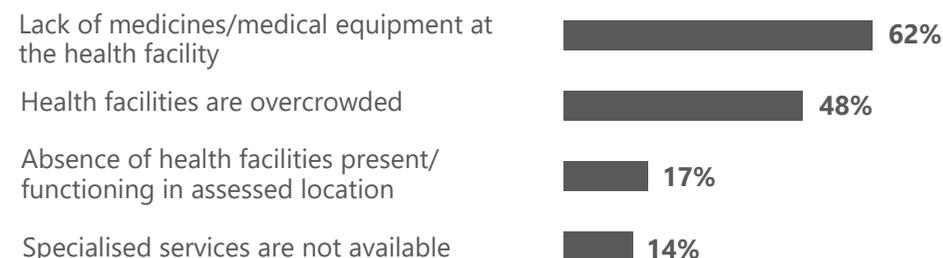
**Poor quality of food** reported in **15%** of assessed communities

4%

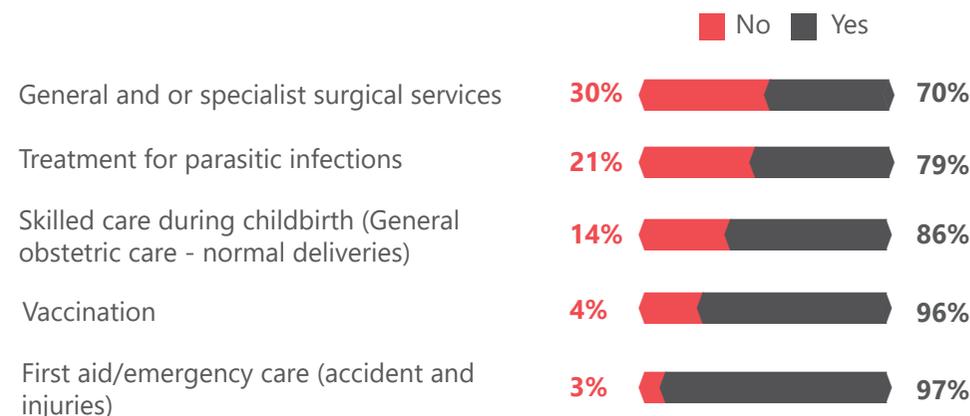


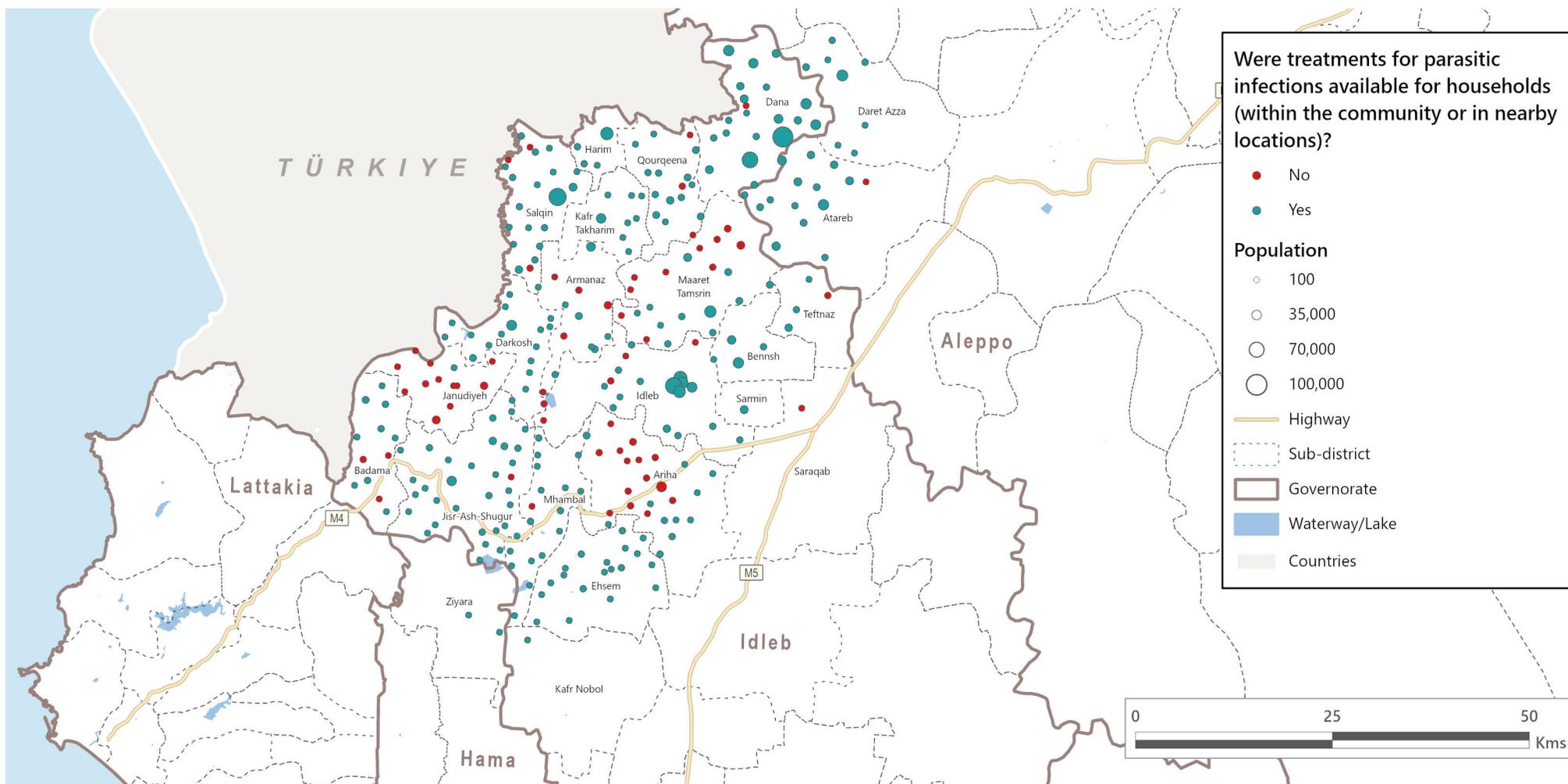
% of assessed communities where KIs reported that **no paediatric services** were available either in the assessed community or nearby locations

### Reported barriers to accessing healthcare (by % of assessed communities)<sup>3,12</sup>



### Essential health services available either in the assessed community or in nearby locations (by % of communities where households could access health services)<sup>13</sup>





## Availability of treatments for parasitic infections

### Note on the map

This map shows in green, the communities where KIs reported the availability of treatments for parasitic infections for households, either within their community or in nearby locations. The communities displayed in red are the ones where KIs reported that treatments for parasitic infections were unavailable either within the assessed communities or nearby locations. Janudiyeh and Ariha sub-districts count a high concentration of communities in which such treatments were unavailable for households.

## SECURITY AND PROTECTION

### Intersectoral findings on security



**General safety and security concerns restricting movement to markets** was a reported barrier to market access in 6 assessed communities

**General safety and security concerns at markets** was a reported barrier to market access in 8 assessed communities



**Theft** was reported as a protection risk in 9% of assessed communities <sup>7</sup>

**Fear from imminent conflict** was reported as a protection risk in 12% of assessed communities <sup>7</sup>

**Threat from shelling** was reported as a protection risk in 10% of assessed communities <sup>7</sup>

**Threat from airstrikes** were reported as a protection risk in 21 assessed communities <sup>7</sup>



**The security situation** was reported as a barrier to shelter repairs in 39 assessed communities <sup>7</sup>



**Lack of safety while travelling to or from school** was reported as a barrier preventing access to education in 22 assessed communities <sup>7</sup>

### Most commonly reported protection priority needs (by % of assessed communities) <sup>7,10</sup>

- 1** Special assistance for vulnerable groups **79%**
- 2** Specialised child protection services **55%**
- 3** Psychosocial support **40%**



### % of assessed communities where the lack of civil documentation for host community and IDP households was reported

- 52%** Lack or loss of civil documentation as a protection risk
- 56%** Some people did not have the necessary personal document as a barrier to accessing humanitarian assistance
- 4%** Lack of personal documentation required to enrol in school as a barrier to education access
- 5%**
- 10%**
- 11%**

**80%**

% of assessed communities where **child labour** was reported as a protection risk for **host**

**83%**

**community** and **IDP** households

### Gender and diversity

KIs in **37%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to accessing livelihoods <sup>7</sup>

KIs in **38%** of assessed communities reported a **lack of employment opportunities for persons with a disability** as a barrier to accessing livelihoods <sup>7</sup>

KIs in **11%** of assessed communities reported a **lack of privacy for women and girls at health facilities** as a barrier to healthcare access

KIs in **37%** 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**

KIs in **14%** of assessed communities reported **challenges specific to girls** as a barrier preventing access to education <sup>7,14</sup>

## ENDNOTES

<sup>1</sup> The Greater Idlib area includes Idlib governorate, parts of Aleppo governorate (Atareb and Daret Azza sub-districts), and parts of Hama governorate controlled by armed opposition groups (Ziyara sub-district).

<sup>2</sup> KIs were asked to select a first, second, and third highest priority needs in their communities. The overall priority need refers to the frequency a sector was selected across all three categories (first, second or third highest priority).

<sup>3</sup> KIs could select multiple answers, thus findings might exceed 100%.

<sup>4</sup> KIs were asked about the situation at the time of data collection, instead of the last 30 days.

<sup>5</sup> 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 NWS Market Monitoring exchange rate was used to calculate the amount in SYP. According to the [Joint Market Monitoring Initiative \(JMMI\)](#) May 2023, 1 USD = 8,400 SYP; 1TRY= 428 SYP.

<sup>6</sup> According to the NWS [JMMI](#) May 2023, 1 USD = 8,400 SYP.

<sup>7</sup> 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).

<sup>8</sup> 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).

<sup>9</sup> KIs were asked about the situation in the last two months, instead of the last 30 days.

<sup>10</sup> KIs could select three answers, thus findings might exceed 100%.

<sup>11</sup> This section provides a visualisation of three types of problems with drinking water. These problems were not selected based on how commonly they were reported, but rather on their potential negative impact on health.

<sup>12</sup> This section only focuses on barriers related to the health facilities and excludes financial barriers as well as obstacles linked to transportation to health facilities.

<sup>13</sup> This section provides a visualisation of the availability of five essential types of health services reported in the assessed communities or in nearby locations. The displayed services were not selected based on how commonly they were reported.

<sup>14</sup> Challenges specific to girls include the following: Families not allowing attendance or continuation of education, fear of harassment on the way to or inside education facilities, and the lack of privacy in toilets.

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a. Assistance Coordination Unit (ACU). (April 2023). Epidemiological Weekly Bulletin – Syria. Early Warning Alert and Response Network (EWARN) week 17, 2023. Retrieved from <https://acu-sy.org>

b. International Labour Organization. (March 2023). Impact of the February 2023 earthquakes on employment and labour market in Syria. Retrieved from <https://www.reliefweb.int>

c. UNESCO. (2019). Internally displaced people and education in Syria. Retrieved from <https://unesdoc.unesco.org>

d. World Health Organization (WHO). (5 December 2022). WHO enhances national efforts to prevent the spread of leishmaniasis in Syria. Retrieved from <https://www.emro.who.int>

N,o of communities reporting on:	Subset	N,o of communities reporting on:	Subset
Host community households	287	Currency used for paying rent	221
IDP households	290	Currency in which wages are paid (merged)	262
Challenges to assistance access (host community)	237	Days when water is available from network	283
Barriers to assistance access (host community)	40	Barriers to markets functioning	22
Challenges to assistance access (IDP)	244	Methods to make water safer (merged)	88
Barriers to assistance access (host community)	37	Problems with drinking water (merged)	145
Currency used for paying water	259		

## ABOUT REACH

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).