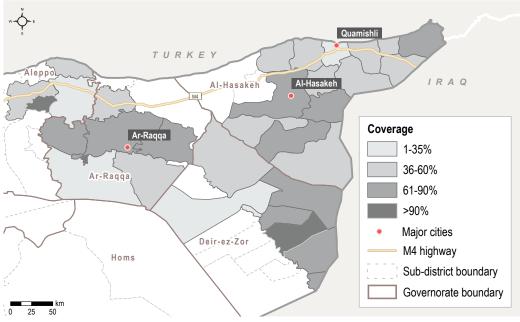
#### **Introduction and Methodology**

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

The assessment is conducted using a key informant (KI) methodology at the community level. REACH enumerators are based inside Syria and interview three to five KIs per assessed location, either directly or remotely (via phone). KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in 1,249 communities across Aleppo¹ (220 communities), Ar-Raqqa (271 communities), Al-Hasakeh (678 communities), and Deir-ez-Zor (80 communities). Data was collected between 4-21 August 2021 from 3,905 KIs (20% female). Unless specified by an endnote, all indicators refer to the situation in the 30 days prior to data collection. Findings are indicative rather than representative, and should not be generalized across the population and region. Findings that are calculated based on a subset of the community are indicated by the following footnote ◆, with each subset specified in the endnotes.

#### The complete monthly HSOS dataset is available on the REACH Resource Centre



### **Key Highlights**

The humanitarian situation in Northeast Syria (NES) continued to worsen in August with the increase in COVID-19 cases deeply affecting essential services and humanitarian response. The ability to access essential health services, including maternal health, is an urgent concern, with KIs in 49% of communities reporting lack of medicines or health equipment at health facilities as a barrier to healthcare access. Moreover, the water supply from the Euphrates remains low and is not sufficient to cover regional water and electricity needs, which further complicates the ability of people to cope with the surge in COVID-19 cases.<sup>a</sup> The most commonly reported range for hours of electricity accessible to households dropped to 2-4 hours per day in August.

- COVID-19 continues to negatively impact the health and economic situation in NES. In August, 20,611 COVID-19 cases were reported across northeast Syria, an increase of 1,960 new cases compared to the previous month, representing the second highest monthly caseload since December 2020. An additional 138,000 vaccine doses meant for government-controlled areas, including NES, arrived to Syria mid-August. However, only 218,000 people in both regions are confirmed vaccinated, reflecting less than one percent of Syria's total population. KIs in 29% of communities reported that at least one available livelihood sector was either partially or totally affected by the disease, with the most commonly affected sectors being trade, daily/waged labour and shops/markets. In 37% of assessed communities, KIs reported that lack of employment opportunities for women was a barrier to meeting basic needs. Further, KIs in 86% of communities reported the high costs of health care as a common challenge.
- Economy and livelihoods remain in peril. Access to markets and livelihoods remains a major challenge in NES with the drought and lack of water for agriculture affecting a significant proportion of households. According to a recent REACH Market Network Analysis, Around 44% of the assessed communities have no kind of functioning markets, making traveling to outside markets the only option. According to KIs in communities 42% of communities rely upon food crops, 53% on cash crops, 67% on livestock products and 62% on the sale of livestock. According to KIs, the drought's impact on seasonal crop reliability affects 63% of assessed resident communities, with 62% of communities reporting lack of access to fodder, 59% reporting lack of water for agriculture, and 61% reporting deficiency of rainfall as barriers to accessing livelihoods. Aggravating factors also include the high cost of water trucking and fuel. KIs in 80% of communities cited the high cost of food as a common challenge. Relatedly, while the total Survival Minimum Expenditure Basket (SMEB) value in NES decreased by 1% from July to August, it has increased by 18% over the previous six months, with the SMEB Food value increasing by 14% in the same period. In Raqqa, this year's wheat harvest (approximately 183,000 tons) is the least productive in the past three years.

#### **HSOS Dashboard**

For a breakdown of sector-specific indicators by location, please see the <u>HSOS dashboard</u>. The interactive HSOS dashboard provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level.



## **Priority Needs and Humanitarian Assistance**



Most commonly reported first, second, and third and overall priority needs for residents (by % of communities) <sup>2,3</sup>

	FIRST	SECOND	THIRD	OVERALL	
1	WASH •	Livelihoods	Livelihoods	Livelihoods	74%
2	Healthcare	WASH	Healthcare	WASH	65%
3	Food	Healthcare	Infrastructure	🕏 Healthcare	55%

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



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

3%	Livelihoods
0%	WASH
1%	Healthcare

## **7**→

Most commonly reported first, second, and third and overall priority needs for internally displaced persons (IDPs) (by % of communities) 2.3

	FIRST	SECOND	THIRD	OVERALL	
1	Food	Livelihoods	Livelihoods	Livelihoods	77%
2	Livelihoods	Healthcare	Healthcare	<b>≅</b> Food	51%
3	WASH	WASH	Summer items *	🕏 Healthcare	50%

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



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

1%	Livelihoods
28%	Food
2%	Healthcare

Most commonly reported barriers that resident households faced in accessing humanitarian assistance (by % of communities) 4.\*

## Communities reporting access to humanitarian assistance

Assistance provided was insufficient to cover all people in need

Quantity of assistance provided to households was insufficient

Assistance provided was not relevant to all needs

## Communities reporting no access to humanitarian assistance

No humanitarian assistance was

available

Not aware if assistance was

available
People did not comply with the eliqibility criteria

## Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of communities) 4.\*

## Communities reporting access to humanitarian assistance

Assistance provided was insufficient to cover all people in need

Assistance provided was not relevant to all needs

Quantity of assistance provided to households was insufficient

## Communities reporting no access to humanitarian assistance

98% No humanitarian assistance was

available

Not aware if assistance was

Not aware it assistance was available

1% People did not comply with the eligibility criteria

REACH Informing more effective humanitarian actio



<sup>▲</sup> Water Sanitation and Hygiene (WASH)



#### **Economic Conditions**

Region	Estimated median monthly household expense for water for a household of six <sup>5,6</sup>	Estimated median monthly rent price for a two bedroom apartment <sup>5,6</sup>	Estimated median daily wage for unskilled labour
Northeast Syria	20,000 SYP	35,000 SYP	5,000 SYP
Aleppo	10,000 SYP	25,000 SYP	5,000 SYP
Al-Hasakeh	26,500 SYP	50,000 SYP	5,000 SYP
Ar-Raqqa	8,000 SYP	35,000 SYP	5,000 SYP
Deir-ez-Zor	30,000 SYP	40,000 SYP	5,000 SYP

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

Residents		<b>IDP</b> s
63%	Seasonality of production	33%
62%	Lack of access to fodder	24%
61%	Deficiency of rainfall	23%
59%	Lack of water for agriculture	26%

% of communities where common livelihood sources from agriculture were reported  $^{\scriptscriptstyle 4}$ 

## Livelihood source	Residents	IDPs
Food crop production	42%	22%
Cash crop production	53%	2%
Livestock products	67%	30%
Sale of livestock	62%	27%

80% and 93%

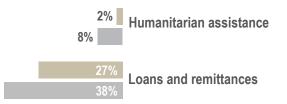
% of communities where KIs reported daily waged labour as a common source of income for residents and IDPs

## 67 days

Number of days the average day labourer would need to work to earn the monthly cost of basic SMEB<sup>a</sup> items <sup>5,9</sup>

93% and 70%

% of communities where KIs reported the insufficient income of households and lack of employment opportunities that match people's skills as barriers to meeting basic needs <sup>8</sup> % of communities where KIs reported the presence of residents and IDP households relying on non-productive sources of livelihoods to meet their basic needs 4



Intersectoral findings on unaffordability hindering access to goods and services



KIs in 23% of communities cited that rent prices were unaffordable for the majority of people



KIs in **54%** of communities cited the high cost of **fuel for generators** as a common challenge



KIs in **68%** of communities cited the high cost of **solar** panels as a common challenge



Kls in **45%** of communities cited the high cost of **water trucking** as a common challenge



KIs in 80% of communities cited the high cost of food as a common challenge  $^{\rm 8}$ 



KIs in **86%** of communities cited the high cost of **health** services as a common challenge



## **Living Conditions**

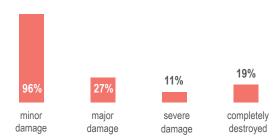
In 92% of communities reportedly at least 80% of the resident population owned their shelter

In 80% of communities reportedly none of the IDP households owned their shelter

In 9% of communities at least one fifth of the IDP population reportedly lived in unfinished or abandoned residential buildings

In 10% of communities at least one fifth of the IDP population reportedly lived in tents

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





Shelter and repair materials being too expensive was the most commonly reported challenge for households to repair their shelter (reported by KIs in 96% of communities) 4



A lack of toilets was reported as a shelter issue for IDPs in 17% of communities



A lack of bathing facilities was reported as a shelter issue for IDPs in 13% of communities



Problems with the drinking water were reported in 47% of communities



Water tasting bad was the most commonly reported problem with drinking water (reported by KIs in 28% of communities)

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

Rodents and/or pests are frequently visible

Solid waste in the streets

Sewage system pollutes public areas

Stagnant water

Flooding in the streets





98% of communities where KIs reported that households experienced barriers to accessing sufficient food 8

In 19% of these communities, KIs reported that the unavailability of certain food items was a challenge to accessing sufficient food 8

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

Borrowing money to buy food 78%

Relying on less preferred food / lower food 72% quality

Buying food with money usually used for 65% other things



High price of suitable foods formula was the most commonly reported challenge to feeding **young children** (reported by KIs in 95% of communities) 4,11

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

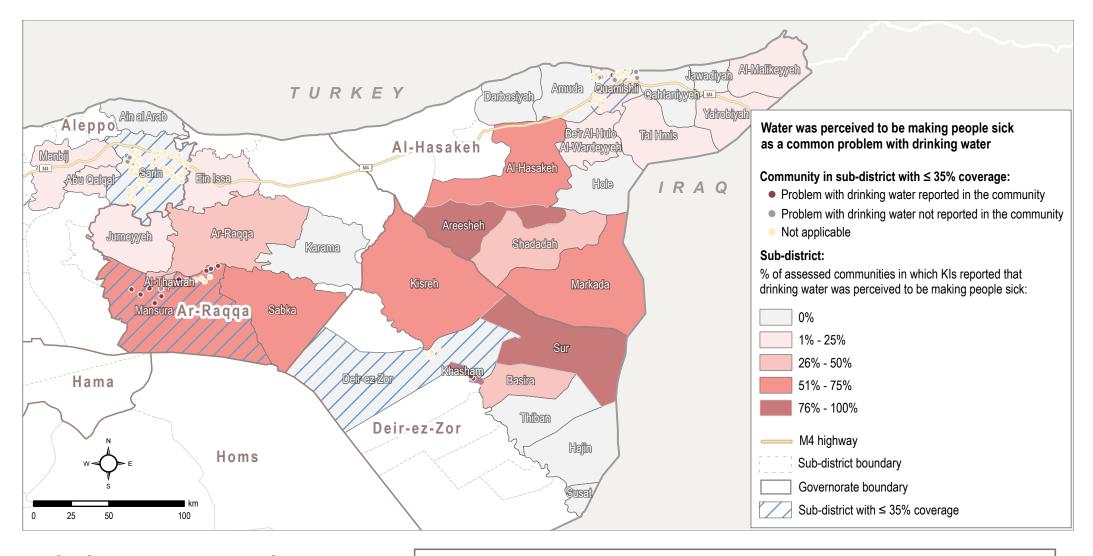
Borrowing money for food

Own production or farming

Relying on food stored previously







# Drinking water as perceived to be making people sick

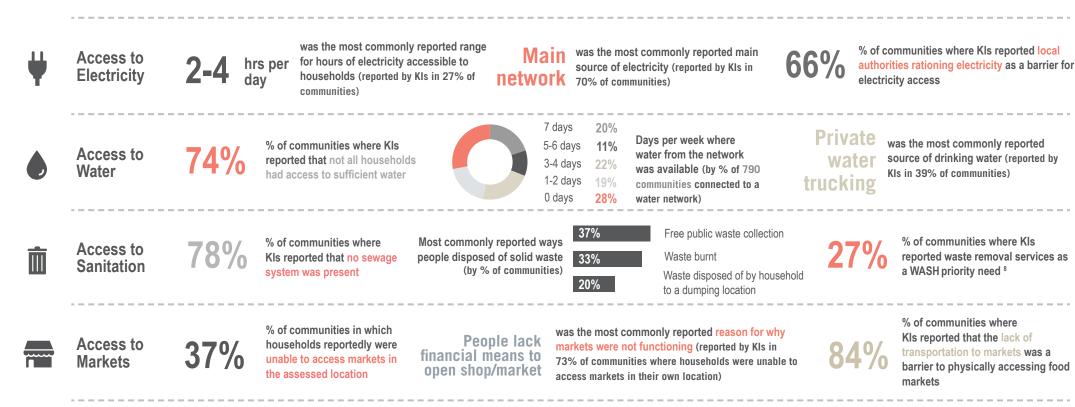
#### Note on the map

This map displays the proportion of assessed communities by sub-district where KIs reported that water was perceived to be making people sick as a common problem with drinking water. In a total of 243 communities KIs reported this water problem. In particular, this was the case in 25 communities (100%) in Areesheh sub-district and 50 communities (53%) in Al-Hasakeh sub-district.





#### **Access to Basic Services**





Access to Health **Services** 

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

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

Treatment for chronic diseases Going to the 58%

Medicines and other commodities Pediatric consultations

pharmacy instead of a

was the most commonly reported coping strategy for a lack of healthcare (reported by KIs in 92% of communities)



Access to Education **Services** 

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

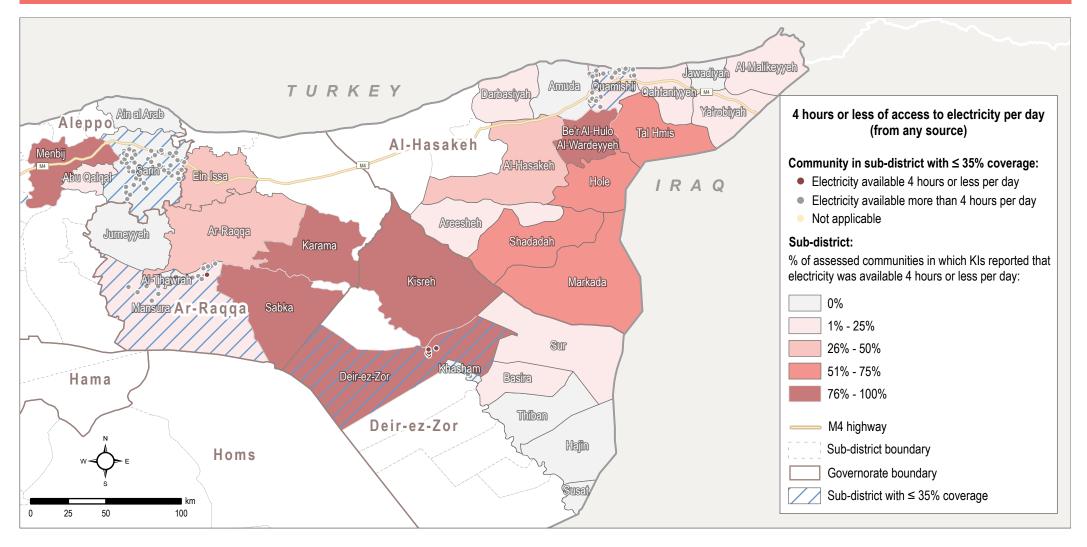
43%





location





## **Access to electricity**

#### Note on the map

This map displays the proportion of assessed communities by sub-district where KIs reported 4 hours or less of access to electricity (from any source) per day. In particular, this lack of access to electricity for more than 4 hours per day was reported in all 48 communities (100%) of Be'r Al-Hulo Al-Wardeyyeh sub-district and in 69 communities (90%) of Menbij sub-district.



#### COVID-19

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



None of the available livelihood sectors were affected

71%

29%

At least one of the available livelihood sectors was partially or totally affected

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

24% Trading

Daily waged labour 20%

20% Shops/markets

% of communities where COVID-19 risk indicators were reported



Overcrowding reported as a shelter inadequacy 8

53%

Health facilities are overcrowded reported as a barrier to healthcare access

33%



Lack of necessary protective equipment or supplies at health facilities reported as a barrier to healthcare access



Washing hands less frequently reported as a coping strategy for a lack of water



Shortage of health workers reported as a barrier to healthcare access



10%

Lack of medicines or medical equipment at the health facility reported as a barrier to healthcare access

51%

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





78%

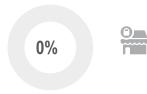




No answer

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

Soap



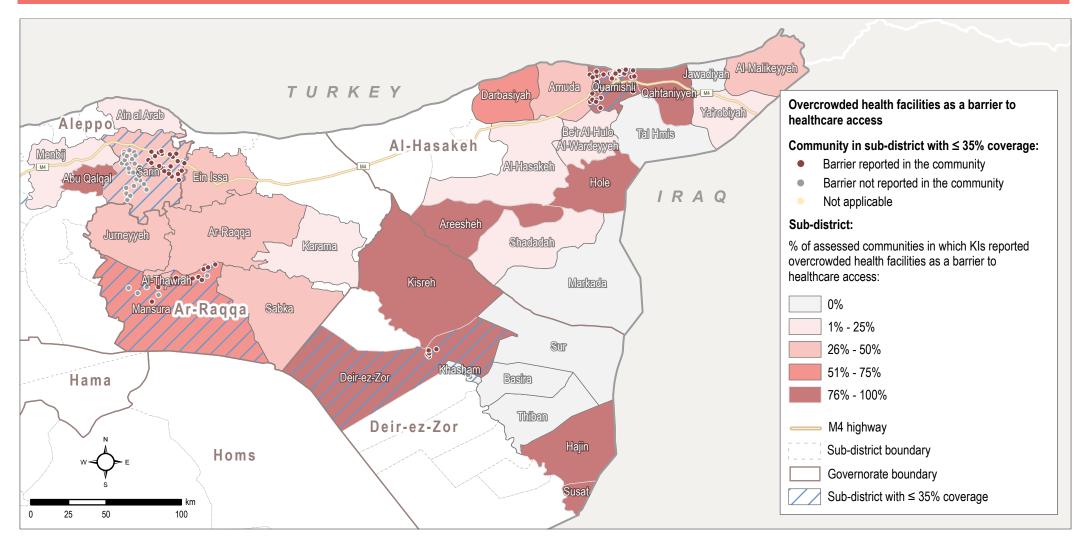




Repairs to the main electricity network were reportedly hindered due to COVID-19 measures

(1)





# Overcrowded health facilities as a barrier to healthcare access

#### Note on the map

This map shows the proportion of assessed communities by sub-district where KIs reported overcrowded health facilities as a barrier to healthcare access. Deir-ez-Zor and Al-Hasakeh governorates in particular display a high proportion of communities (of 76% to 100%) in four sub-district each in which this was reportedies.





## **Security and Protection**

#### Intersectoral findings on security

General safety and security concerns restricting movement to markets was a reported barrier to market access in 46 communities

General safety and security concerns at markets was a reported barrier to market access in 20 communities

Movement restrictions was reported as a protection risk in 12 communities 8

Tribal disputes were reported as a protection risk in 29 communities 8

Threat from shelling was reported as a protection risk in 2 communities 8

Fear from imminent conflict was reported as a protection risk in 51 communities 8

The inability to lock homes securely was reported as a shelter inadequacy in 37% of communities 8

Lack of privacy inside the shelter was reported as a shelter inadequacy in 58% of communities 8

Lack of lighting around the shelter was reported as a shelter inadequacy in 79% of communities 8

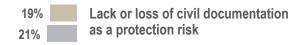
The security situation was reported as a barrier to shelter repairs in 2% of communities

Safety and security concerns travelling to health facilities was reported as a barrier to healthcare in 25 communities

Most commonly reported protection priority needs (by % of communities) 3.8



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



2% Lack of necessary personal documents to receive humanitarian assistance \*

% of communities where extreme coping strategies used by residents and IDPs to meet basic needs were reported 4

Reside	nts	<b>IDP</b> s
18%	Early marriage	23%
2%	Forced marriage	3%
7%	High risk work	8%
0%	Sending family members to beg	0%
54%	Sending children (15 or below) to work	68%

#### Age, Gender, and Diversity

Kls in 37% of communities reported a lack of employment opportunities for women as a barrier to meeting basic needs 8

KIs in 16% of communities reported a lack of employment opportunities

for persons with a disability as a barrier to meeting basic needs 8

Kls in 14% of communities reported a lack of privacy for women and girls at health facilities as a barrier to healthcare access

KIs in 19% of communities reported a
 lack of market access for people with restricted mobility

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

Children below the age of 12 were reported as a group affected by child labour in 12% of communities <sup>8</sup>

Hazardous child labour was reported as a protection risk in 95 communities 8



(i)





#### **Endnotes**

- 1. Aleppo governorate includes Menbij and Ain Al Arab districts. The rest of Aleppo governorate is included under Northwest Syria.
- 2. Kls were asked to select a first, second, and third highest priority needs in their communities. The ranking shows the sectors most frequently chosen as either first, second or third highest priority. The overall priority need refers to the frequency a sector was selected across all three categories (first, second or third highest priority).
- 3. Kls could select three answers, thus findings might exceed 100%.
- 4. KIs could select multiple answers, thus findings might exceed 100%.
- 5. Kls were asked about the situation currently, instead of the last 30 days.
- 6. KIs had the option to select the price in United Stated Dollars (USD), Turkish Lira (TRY), or Syrian Pounds (SYP). When the price was not reported in SYP, the NES REACH Market Monitoring exchange rate was used to calculate the amount in SYP. According to the REACH Market Monitoring August 2021, 1 USD = 3,231 SYP; 1TRY= 378 SYP.
- 7. According to the NES REACH Market Monitoring August 2021, 1 USD = 3,231 SYP.
- 8. Findings for residents and IDPs were merged. The merge was calculated as follows: (option was selected for either residents or IDPs) / (communities reporting challenges/barriers/coping strategies for either residents or IDPs).
- 9. According to the NES REACH Market Monitoring August 2021, the Survival Minimum Expenditure Basket (SMEB) = 333,893 SYP.
- 10. Minor damage (cracks in walls, leaking roof, need of new doors and window repairs, etc.); Major damage (buildings with extensive damage to window frames and doors, but no structural damage to columns, slabs, or loadbearing walls); Severe damage (buildings with significant structural damage to column slabs, or loadbearing walls, cracking, steel elements and deformations visible in concrete; the building would require extensive repairs); Completely destroyed (buildings with structural damage so significant that rehabilitation is not possible).
- 11. KIs were asked about the situation in the last two months, instead of the last 30 days.
- 12. Adult hygiene items include: shampoo, toothbrush, and toothpaste. Household cleaning items include: washing powder, liquid, and dish detergent.

## ♦ By number of communities where KIs reported the relevant indicator (accesss/barriers/inadequacies/damages/coping strategies/risks etc.) for the relevant population group(s)

Indicator  N.o of communities reporting on:	Subset	Indicator N.o of communities reporting on:	Subset
Residents	1,247	Barriers to assistance access (IDPs)	421
IDPs	640	Barriers to accessing sufficient food (merge)	1,220
Challenges to assistance access (resident)	249	Days when water is available from network	789
Barriers to assistance access (resident)	959	Barriers to markets functioning	458
Challenges to assistance access (IDPs)	192		

- a. Ronahi. (25 August 2021). Official And Coordinator Of The Operations Room In The Euphrates Dam: There Is Nothing New In The Water Supply. Retrieved from <a href="https://ronahi.net/">https://ronahi.net/</a>
- b. Word Food Program. (21 September 2021). Syria mVAM Bulletin #58: August 2021. Retrieved from <a href="https://reliefweb.int">https://reliefweb.int</a>.
- c. REACH. (August 2021). Market Monitoring Exercise in Northeast Syria. Retrieved from <a href="https://www.impact-repository.org/">https://www.impact-repository.org/</a>
- d. North Press Agency. (15 August 2021). Self-management: This year's wheat season is the least productive compared to the past three years. Retrieved from <a href="https://npasyria.com/">https://npasyria.com/</a>

#### **About REACH**

REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT). For more information please visit our website: www.reach-initiative.org. You can contact us directly at: geneva@reach-initiative.org.

