Northeast Syria HSOS Zoom-in, IDPs in Host communities Hasakeh, Ar-Ragga, Aleppo, Deir-ez-Zor Governorates, May 2020



OVERVIEW

This situation overview seeks to provide information on the humanitarian situation of internally displaced persons (IDPs) living in host communities, either in similar dwellings (solid buildings) as resident population or in temporary shelters (such as tents) outside of sites, settlements, and collective centres covered by the Sites and Settlements Working Group (SSWG).

Following the escalation of conflict in northeast Syria (NES) in October 2019, massive population displacements and increased humanitarian needs have been observed in the region. This crisis has also created significant challenges for humanitarian information management, thus hampering an effective response. The first phase of the humanitarian needs assessment effort has been focused on IDPs in camps, sites, settlements and collective centres. However, a major information gap remains regarding the humanitarian situation for IDPs in host communities across NES. REACH therefore conducted a separate analysis using data collected via the Humanitarian Situation Overview in Syria (HSOS) assessment in NES in the month of May.

KEY FINDINGS

Findings from this analysis suggest a lack of targeted humanitarian assistance focused on IDPs in host communities. In 58% of assessed communities, IDPs had reportedly not been able to access humanitarian assistance in the month prior to data collection. Assistance provided was mostly food and nutrition (95%), whereas findings showed extensive needs for livelihoods support. Further, lack of income to meet basic needs increases the risk of households resorting to negative coping strategies such as sending children to work or early marriage. These two strategies were reported by Key Informants (KIs) in 52% and 31% of the assessed locations as a strategy used by some IDP households to cope with a lack of income.

Sector specific findings

<u>Livelihoods</u>: KIs in 305 assessed locations (39%) reported livelihoods as the top priority needs for IDP households. Daily waged labour was reported as a common source of livelihoods for IDPs in 91% of assessed locations, and low wages were reported in 74% of assessed locations as a common challenge for IDPs to access livelihoods.

Food security and nutrition: Food was selected as a top priority need for IDPs in 296 assessed locations (38%). Physical access to food markets was reportedly impeded by lack of transportation in 53% of assessed locations, while the main reported barrier to accessing sufficient food was unaffordability of items (reported in 74% of assessed locations).

<u>Health:</u> Healthcare was the third most selected priority need among the sectors (268 assessed locations, or 34%). The absence or non-functionality of any health facility within the community was reported in 22% of the assessed locations across NES.

Water, sanitation and hygiene (WASH): KIs in 49 assessed locations (12%) reported that less than 60% of the total population had access to sufficient water in the past month. It was reported in 37 assessed locations (9%) that IDPs did not have access to handwashing facilities.

Shelter & Non-food items (NFIs): KIs in 97% assessed locations reported solid finished house as one of the three most common shelter types for IDPs. Complete destruction of 1-40% of shelters was reported in 132 assessed locations (35%).

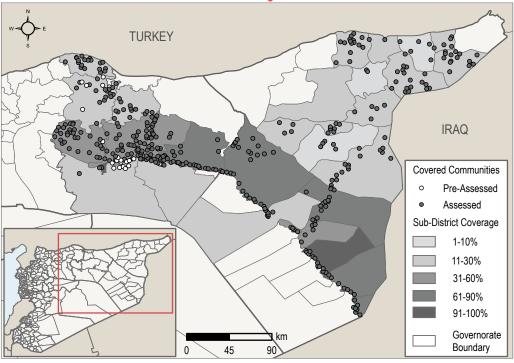
<u>Protection:</u> Two most commonly reported protection risks for IDPs in assessed locations were child labour and early marriage, as reported in 65% and 48% of the assessed locations, respectively.

METHODOLOGY

Data for this assessment was collected via REACH's HSOS monthly assessment between 4 and 17 May 2020. REACH enumerators remotely interviewed three to five KIs per assessed location, selected based on their knowledge of the local situation and sectors. A total of 781 locations were covered by HSOS in May (including 26 neighbourhoods of Hasakeh city and 13 neighbourhoods of Quamishli city), in 29 sub-districts in Hasakeh, Deir-ez-Zor, Aleppo and Ar-Raqqa governorates. All graphs and narrative in this report only present results at regional level, aggregated based on data from the 434 locations where the presence of IDPs in host communities were identified. Locations were included in the analysis if: 1) the proportion of IDPs reportedly living in tents and public buildings in the location did not exceed 40% of the total IDP population; or, 2) the location was not reported by the SSWG as hosting any IDP sites, settlements or collective centres.

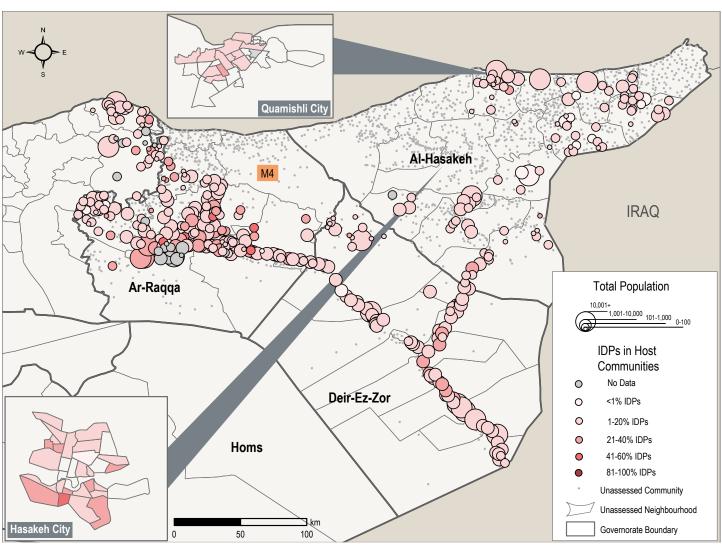
Detailed analysis for governorate and sub-district level can be found in the complete **dataset**. For further information, in particular on resident population, please refer to **HSOS products**. All findings are only indicative of the situation in assessed locations at the time of data collection.

Assessed locations and sub-district level of coverage:



THE DEMOGRAPHICS

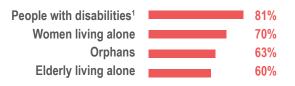
Estimated proportions of IDPs living in host communities at time of data collection against total population per location (as of May 2020):1



The presence of IDPs in host communities was identified in 56% (434 locations) of the total 781 locations assessed via HSOS in NES in May through this analysis. The repartition of locations with IDPs in host communities was 81% in Deir-ez-Zor governorate, 79% in Ar-Raqqa governorate, and 35% in Hasakeh governorate (101, 174 and 136 communities, respetively). A breakdown of results by governorate and sub-district can be found here.

While specific population figures for IDPs in host communities were not collected by REACH as part of this assessment, demographic data related to IDPs in general (which includes IDPs in camps, sites, settlements and collective centres, if any at location) give an indication of the presence of vulnerable groups among IDPs in host communities.

Top 4 most commonly reported vulnerable groups for IDPs (by % of 303 assessed locations where presence was reported):



¹ Population Task Force, April-May 2020.

¹ This includes both mental and physical disabilities.

MOVEMENT INTENTIONS

Findings on the movement history of IDPs provide an indication of the multiple waves of displacement that have resulted from successive developments of the Syrian conflict. The first arrivals of IDPs in the assessed locations started before the most recent escalation of conflict, with KIs in 93 locations (21%) even reporting IDP arrivals back in 2011 or 2012. This indicates that basic services in assessed locations may have had to cope with additional demographic pressure for a long time. Further, while multiple displacements are likely to increase vulnerabilities, it was reported in 284 assessed locations (71%) that at least some IDPs have been displaced before reaching their current location. This includes 164 locations (41%) where more than half of the IDPs have already been displaced.

The October 2019 escalation of conflict also led to more IDP households seeking refuge in host communities, with a latest wave of IDP arrivals in October and November 2019 reported by KIs in 142 assessed locations (33%). In the majority (89%) of assessed locations, it was reported that no new IDPs were expected to come in the month following data collection, indicating a relative stability of movements. Among the 39 assessed locations where potential new arrivals were reported, the majority (95%) were located in Deir-ez-Zor or in Hasakeh governorates (19 and 18 locations, respectively).

In line with the relative stability of IDP movements in the region, KIs in only 70 assessed locations (17%) reported that no IDPs intended to stay in their current location for the long term. In the assessed locations where some IDPs reportedly intended to stay, KIs in 331 assessed locations (97%) reported more than 60% of IDPs intending to stay. Further, KIs reported that at least some IDPs intended to leave the location in the week following data collection in only 32 assessed locations (8%). However, this was reported in 18% of the assessed locations in Deir-ez-Zor governorate.

Top 3 most commonly reported reasons for IDPs to stay in assessed locations (by % of 342 assessed locations where some IDPs intended to stay):

Stability of the security situation 90%
Availability of basic services 47%

Opening Presence of returned family members 469

Top 3 most commonly reported reasons for IDP to leave assessed locations (by % of 32 assessed locations where some IDPs intended to leave):

1	Cost of living	669
2	Lack of access to healthcare	50 9

Lack of employment 449

PRIORITY NEEDS

Top reported priority needs for IDPs in assessed locations (by number and % of assessed communities):

4

		1st	2nd	3rd	Overall
1	Livelihoods	58	87	160	39%
2	Food	146	106	44	38%
3	Health	95	102	71	34%
4	Water, sanitation and hygiene	30	54	60	19%
5	Shelter	95	27	18	18%
6	Non-food items	4	51	48	13%
7	Education	5	6	18	4%
8	Winterisation	0	0	3	0%
9	Protection	0	1	2	0%

Livelihoods, food and health were the top three most reported priority needs for IDPs in assessed locations reported by KIs.

HUMANITARIAN ASSISTANCE

58%

Proportion of assessed locations where it was reported that IDPs had not received any humanitarian assistance in the 30 days prior to data collection.

KIs in 252 assessed locations (58%) reported that IDP households were not able to access humanitarian assistance in the month prior to data collection. This proportion was much higher in Ar-Raqqa governorate, where humanitarian assistance was reported as inaccessible by KIs in 141 assessed locations (81%).

In the month prior to data collection, the most commonly reported type of assistance provided to IDP households was food and nutrition (172 assessed locations, 95%). WASH, health and cash assistance were only marginally reported (as detailed in the graph below). Food, health and WASH were however among the five most commonly reported priority needs for IDPs in the assessed locations. Further, no livelihoods assistance was reported to IDPs in the assessed locations in the month prior to data collection, despite livelihoods ranking as the most commonly reported priority need overall.

Types of humanitarian assistance provided to IDP households in assessed locations in the month prior to data collection (by % of the 83 locations where assistance was reportedly available):

Food and nutrition		95%
WASH		7%
Health		5%
Cash assistance	1	2%



WATER, SANITATION AND HYGIENE (WASH)

WASH findings show limited access to sufficient water for a concerning portion of populations in the assessed locations, with price constituting a major barrier to sufficient access. Hygiene concerns revolved around availability of handwashing facilities for IDPs, which were reported as available in only 9% of assessed locations.

KIs in 49 assessed locations (12%) reported that less than 60% of the total population had access to sufficient **water** in the past month. The main reported barriers to accessing sufficient water were the price of water trucking (143 assessed locations, 55%), the main network partially or completely not functioning (118 assessed locations, 45%), and the lack of sufficient pressure to pump water (103 assessed locations, 39%). In addition, it was reported in 212 assessed locations across NES (49%) that IDPs had to pay for drinking water; a proportion that reached 74% in Deirez-Zor governorate.

45%

Proportion of assessed locations where main water network was reportedly partially or completely not functioning.

Piped water networks were the most reported sources of water for both drinking water and water for other purposes (including cooking, drinking, bathing and washing), as reported by KIs in 223 assessed locations (51%) and 242 assessed locations (56%), respectively. Findings also showed disparities between governorates regarding the average number of days per week with water available from the main network. At the regional level, KIs in 63% of assessed locations reported less than 5 days of water per week. However, the proportion of KIs reporting less than 5 days of water per week was higher in some governorates, being 91% in Aleppo governorate and 86% in Deir-ez-Zor governorate. Access to functional **latrines** for IDPs was reported in 399 assessed locations

across NES (92%); however, KIs in a total of 26 locations in Hasakeh governorate (19%) reported no access to functional latrines for IDPs. In the majority (90%) of assessed locations where access was reported, family latrines² were reportedly the most common type of latrines available to IDP households.

Most common garbage disposal methods in assessed locations (by % of assessed locations where reported):

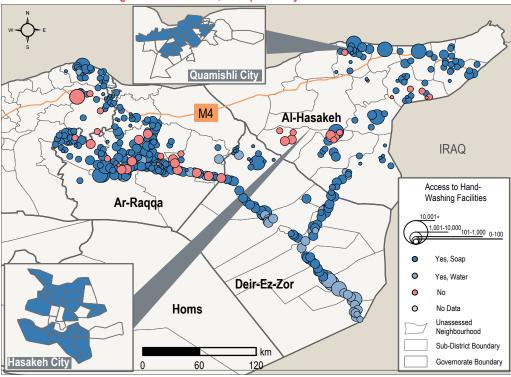


Handwashing facilities were reportedly not available for IDP households in 37 assessed locations (9%). KIs in 38 assessed locations (9%) reported access to facilities providing water only, and KIs in the remaining 359 locations (83%) reported access to handwashing facilities with both water and soap.

It was reported in 25 assessed locations (6%) that leaving garbage in public areas was the most common **garbage disposal method**, while KIs in 122 assessed locations (28%) reported burning as the most common disposal method for garbage. Garbage in the streets was also

reported as a sanitation issue in 37 assessed locations (9%). Regarding **sanitation** issues, the most reported issues were related to the absence of any sewage system in the community (300 assessed locations, 69%) and the need to clean (787assessed locations, 18%) or repair (74 assessed locations, 17%) the sewage system.

Access to handwashing facilities for IDPs, as reported by KIs in assessed locations:



EDUCATION

Across all 434 assessed locations, schools were reportedly not in sessions over the month prior to data collection due to COVID-19 related restrictive measures put in place by local authorities. Curfews were extended several times throughout May, including the closure of cafes, cafeterias, schools and universities.³ In line with these measures, reported barriers to accessing education relate to COVID-19 restrictions.

In addition, KIs in 27 assessed locations, including 11 in Deir-ez-Zor governorate and 16 in Hasakeh governorate, reported the inability for IDP families to prioritise sending children to school over work as a barrier to access education in the absence of COVID-19 restrictions. Education services not being provided to children after a certain age and children quitting school because of early marriage were also reported as barriers in 25 (6%) and 24 (6%) assessed locations.

² "Family latrines" refer to latrines shared only between members of the same household, as opposed to communal latrines

³ Syrian Observatory for Human Rights, 26 May 2020.

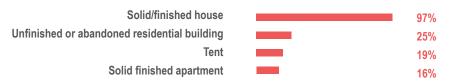


SHELTER AND NON-FOOD ITEMS (NFIs)

While findings show that most IDPs in host communities live in solid finished buildings, issues such as overcrowding and damage of shelters were widely reported by KIs across assessed locations.

Across all 434 assessed locations, the most common IDP shelter types reported by KIs⁴ were solid finished houses (reported in 419 assessed locations, 97%), unfinished or abandoned residential buildings (110 assessed locations, 25%), tents (84 assessed locations, 19%) and solid finished apartments (71 assessed locations, 16%). Where reported as a common shelter type, KIs in 73% of the locations reported more than 60% of the IDPs living in solid finished houses. KIs in 181 assessed locations (44%) reported this was the case for 100% of IDPs.

Top 4 most commonly reported shelter types for IDPs (by % of assessed locations where reported):4



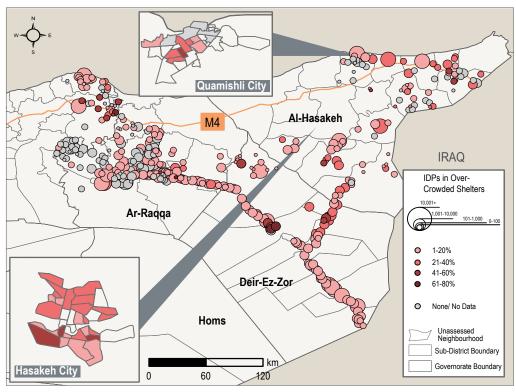
Kls reported the issue of overcrowding for at least some IDPs in 304 of the assessed locations (71%). More specifically, it was reported in 50% of assessed locations (214 assessed locations) that 1 to 20% of IDPs were living in overcrowded shelters, while Kls in 15% of assessed locations (66) reported it for 21 to 40% of IDPs. The latter range of IDPs living in overcrowded shelters was reported in 42 assessed locations in Hasakeh governorate, representing 31% of the assessed locations in this governorate.

Among the 397 assessed locations where some shelter inadequacies were reported, the most commonly reported issues were a lack of lighting around the shelter (reported in 234 assessed locations, 59%), a lack of privacy around the shelter (reported in 190 assessed locations, 48%), and a lack of space in the shelter (reported in 148 assessed locations, 37%).

The majority of KIs reported most IDPs to be hosted for free in their shelter, with KIs in 183 (43%) assessed locations reporting 100% of IDPs at location to be in this type of occupancy situation. However, KIs in 55 assessed locations (13%) reported between 1 and 10% of IDPs in the community to own their shelter, while renting was reported as the occupancy situation of more than 70% of IDPs in 79 assessed locations (20%). Renting was highly reported as the occupancy situation for IDPs in assessed locations of Deir-ez-Zor governorate, with KIs in 28 assessed locations (36% of all in this governorate) reporting renting for at least 70% of IDPs.

KIs across 209 assessed locations (56%) reported that 1 to 20% of shelters have sustained major damage.⁵ Severe damage⁶ of an approximate 1 to 20% of shelters was reported by KIs in 134 assessed locations (36%), while complete destruction⁷ of 1 to 20% of shelters was reported in 125 of the assessed locations (33%). While shelter was mentioned by KIs as one of the top priority needs for IDPs in 140 assessed locations (18%), specific priority needs for shelter were

Proportion of IDPs living in overcrowded shelters, as reported by KIs in assessed locations:



items to improve safety and or privacy of shelters (selected by KIs in 174 assessed locations, 41%), followed by cash to cover rent (143 assessed locations, 33%), and by doors or doorframes (119 assessed locations, 28%).

Regarding specific NFIs, the top three most commonly reported needs for IDPs were clothing (199 assessed locations, 46%), cooking fuel (89 assessed locations, 44%) and bedding items (167 assessed locations, 39%).

Top 5 most needed NFIs for IDPs $\,$ (by % of assessed locations where reported):

1	Clothing	46%
2	Cooking fuel	44%
3	Bedding items	39%
4	Water containers	35%
5	Mattresses/sleeping mats	27%

⁴ KIs could select multiple options, therefore, findings may exceed 100%.

⁵ Major damage: "buildings with extensive damage to window frames and doors, but no structural damage to columns, slabs, or loadbearing walls".

⁶ 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"

⁷ Completely destroyed: "buildings with structural damage so significant that rehabilitation is not possible"



FOOD SECURITY & NUTRITION

Across NES, findings show widespread need for increased food security and livelihoods support for IDPs in host communities. In a regional context of currency devaluation and price inflation, temporary forms of employment were selected in most of the assessed locations as the main source of income for IDPs.8 Further, it was reported in 323 assessed locations (74%) that one of the barriers for IDPs to accessing sufficient food was related to unaffordability of essential food items even though they were generally available in markets.

Livelihoods and food security were commonly selected as priority needs across the assessed locations. KIs in 305 assessed locations (39%) and 296 assessed locations (38%) selected food security and livelihoods as a priority need for IDPs, respectively. The main reported barrier for IDPs to physically access food markets was the lack of transportation to markets (whether

public or private), as reported by KIs in 229 assessed (53%).locations reported barriers included safety or security constraints negatively affecting movements to markets (10 assessed locations, 48%)

Top 6 most needed food items for IDPs (by % of assessed locations where reported):

1	Cooking oil	81%	4	Bread	35%
2	Sugar	55%	5	Meat	22%
3	Rice	49%	6	Fresh vegetables	22%

and markets being too far (60 assessed locations, 37%).

Regarding **nutrition**, the most commonly reported challenges faced by people in the assessed locations with feeding babies under 6 months were the lack of support for non-breastfed babies (reported in 337 assessed locations, 81%), breastfeeding difficulties (248 assessed locations, 59%), and poor hygiene for feeding non-breastfed babies (62 assessed locations, 15%). The most commonly reported challenges to feeding children 6-24 months of age were high price of suitable food formula (reported in 88% of locations where challenges were reported), insufficient diversity of food (62%), insufficient quality of food (26%) and insufficient quantity (23%).



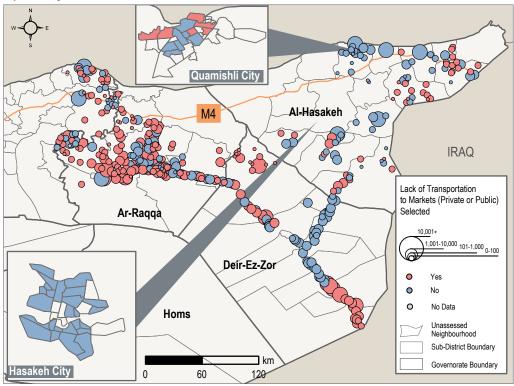
LIVELIHOODS

livelihoods The context for IDPs in host communities precarious, as seen by daily waged labour being the most common source of income, mentioned by Kls in 393 assessed locations (91%).

Top 6 most commonly reported livelihoods sources for IDPs (by % of assessed locations where reported):



The main reported challenge to accessing livelihoods for IDPs in the assessed locations was low wages (as reported in 74% of assessed locations, 319). Of note, low wages were reported as the main barrier to livelihoods in 93% of assessed locations in Aleppo governorate and 84% Assessed locations according to presence of transportation facilities to access food markets, as reported by Kls:



of assessed locations in Ar-Ragga governorate.9 In each of these governorates, the reported medians for daily wage were 3,500 SYP and 2,500 SYP a day, respectively, while the regional median across NES was 2.750 SYP a day.

Other reported challenges faced by IDPs in accessing livelihoods were a lack of employment opportunities matching people's skills and a general lack of employment opportunities (reported by KIs in 280 assessed locations (65%) and 180 assessed locations (41%), respectively). Negative coping strategies were reported among IDP households as a result of the lack of income

or resources to meet basic needs. Sending children younger than 15 to work or beg was reported by KIs in 227 assessed locations (52%), and early marriage was reported in in 134 assessed locations (31%).

Most commonly reported types of livelihood support needed for IDPs (by % of assessed locations where reported):



⁸ For more details on prices and market mornitoring, please see REACH monthly Market Monitoring assessments

⁹ Governorate-level findings are detailed in the narrative when proportions are higher than at regional level. For more details at governorate level, please refer to the analysis included in the dataset file.



HEALTH

IDPs in host communities continue to experience significant barriers to healthcare. Health was selected as the third priority need overall, with KIs in 268 assessed locations (34%) selecting health as a priority need for IDPs.

KIs in a total of 175 assessed locations (40%) across NES reported that households were not able to access health services in their communities. Findings show important disparities between governorates, with 79% of KIs in Aleppo reporting no access, compared to 49% in Ar-Raqqa, 42% in Hasakeh and 0% in Deir-ez-Zor governorate. However, 4% of KIs (19 assessed locations) reported that health services could also not be accessed in nearby communities. Whether being accessible in assessed locations or in nearby locations, the top three most commonly reported types of health facilities available were pharmacies (reported in 244 assessed locations, 94%), primary care facilities (82 assessed locations, 32%) and private clinics (78 assessed locations, 30%).

The most commonly reported average time to access most commonly used health facility was 16 to 30 minutes. It is concerning that in 20 assessed locations (5%), KIs reported that the travel time to access the most commonly used health facility was higher than an hour.

Average reported travel time to access most commonly used health facility (by % of communities where reported):

1 to 15 minutes	24%	
16 to 30 minutes	48%	
31 to 60 minutes	23%	
More than 1 hour	5%	

The most common barrier to access healthcare for all the population in the assessed locations was the price of health services, as reported by KIs in 294 assessed locations, 68%. Other reported barriers included the high cost or lack of transportation to facilities (177 assessed locations, 41% and 175 assessed locations, 40%, respectively) and a lack of medicines at health facilities (reported in 157 assessed locations, 36%). Ambulance services were also reportedly missing in a quarter of assessed locations (107), while the absence or non-functionality of any health facility in the community was reported in 22% of assessed locations (96) across NES, and 38% of locations assessed in Aleppo governorate (16).

The most common reported specific healthcare priority needs for IDP households were treatments for chronic diseases, skilled care during childbirth and first aid/emergency care.

Top 5 most reported healthcare needs for IDPs (by % of assessed locations where reported):

Treatment for chronic disease 49	
	%
General obstetric care 46	%
First aid/emergency care 42	%
Paediatric consultations 24	%
Emergency obstetric care 24	%



PROTECTION

Kls in assessed locations reported that key protection issues among IDPs in host communities concern children. The most common cited protection risk faced by IDP populations in the month prior to data collection was child labour (selected in 166 assessed locations, 65%). Child labour was selected by Kls as a protection risk in 82% of the assessed communities in Deirez-Zor governorate. This is of particular concern in a context of school closures due to COVID-19 restrictive measures. The second most cited protection risk was forced and early marriage, as reported by Kls in 122 assessed locations (48%) in NES, including 49 locations in Deir-ez-Zor governorate (82%) and 10 in Aleppo (67%). Further, both child labour and early marriage were significantly reported as a coping strategy for a lack of income (as detailed in the livelihoods section above).

Top 6 most commonly reported protection risks faced by IDP population in the month prior to data collection (by % of 257 assessed locations where risks were reported):

Child labour	65%
Forced and early marriage	48%
Movement restrictions by local	 ,
authorities	39%
Lack/loss of civil documentation	30%
Exploitation	12%
Domestic violence abuse	7%

Regarding specific protection needs for IDPs in the assessed locations, the most commonly reported needs were special assistance for vulnerable groups, psychosocial support and information about services.

Top 3 most needed protection support for IDPs (by % of assessed locations where reported):

1	Special assistance for vulnerable groups ¹¹	47%
2	Psychosocial support	41%
3	Information about services	39%

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 and follow us on Twitter geneva@reach-initiative.org and follow us on Twitter geneva@reach-initiative.org and follow us on Twitter geneva@reach-initiative.org and follow us on Twitter

¹⁰ Governorate-level findings are detailed in the narrative when proportions are higher than at regional level. For more details at governorate level, please refer to the analysis included in the dataset file.

¹¹ Women living alone, orphans, disabled people, etc.