Northwest Syria, May 2019
Humanitarian Situation Overview in Syria (HSOS)

**Coverage**

Key events impacting the humanitarian situation in Northwest Syria (NWS)

- **Operation "Olive Branch"** commences in Afrin.
- Approximately 1.9 million IDPs reside in Idlib, western Aleppo, northern Hama and eastern Lattakia according to UNHCR.
- Announcement of a demilitarised zone barring the presence of heavy weaponry and certain armed opposition groups.
- Renewed violence and hostilities in southern Idlib, northern Hama and western Aleppo governorates begin early February.
- Towards the end of April, shelling and airstrikes intensify.
- Almost 270,000 displacements from northern Hama and southern Idlib governorates were recorded between 1 - 22 May. Large areas of cropland were burned since 10 May.

**Introduction**

HSOS is a monthly assessment that aims to provide comprehensive, multi-sectoral information about the humanitarian situation inside Syria. The assessment is conducted at the community level covering displacement, food security and livelihoods (FSL), education, water, sanitation and hygiene (WASH), health and shelter and non-food items (SNFI).

The factsheet presents information gathered in 1,000 communities across Idlib (439 communities), western Aleppo (81 communities), northern Aleppo (452 communities), and northern Hama (28 communities) governorates. Data was collected during the month of May 2019, and refers to the situation in Northwest Syria (NWS) in May 2019. Findings are indicative rather than representative, and should not be generalised across the region. Community-level datasets are available on the REACH Resource Centre, the Humanitarian Data Exchange, and are also distributed through partners across the humanitarian community.

* Information on the humanitarian situation in northwest Syria in May 2019 was gathered in 1,000 communities, of which 10 communities in southern Idleb and northern Hama governorates were reportedly empty due to displacement. The information presented in this factsheet therefore covers 990 assessed communities.
* The western part of Aleppo where humanitarian response and coordination is conducted from the northeast rather than the northwest.
* To gain insight into the effects of the recent increase in violence in NWS, the May factsheet includes additional analysis on communities located in conflict-affected sub-districts. These sub-districts are: Abul Thohur, Arhun, As-Suqaylabiyah, Azaz, Badama, Darat Azza, Ehssem, Hadher, Hama, Haritan, Heish, Idleb, Jandiyeh, Jebel Saman, Jisr Ash-Shugur, Kafr Nobol, Kafri Zeita, Khan Shaykun, Maarrat An Numman, Madiq Castle, Masyaf, Sanjar, Saraqab, Suran, Tamanah, Zarb, Ziyan.

**People in need (PIN) Demographics**

<table>
<thead>
<tr>
<th>PIN</th>
<th>People in Acute Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,474,022</td>
<td>2,558,317</td>
</tr>
</tbody>
</table>

Survival Minimum Expenditure Basket (SMEB):

<table>
<thead>
<tr>
<th>Sub-district assessed (50 of 51)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of communities assessed in sub-district</td>
</tr>
<tr>
<td>Not assessed</td>
</tr>
<tr>
<td>&lt; 30% assessed</td>
</tr>
<tr>
<td>30% - 60% assessed</td>
</tr>
<tr>
<td>61% - 90% assessed</td>
</tr>
<tr>
<td>&gt; 90% assessed</td>
</tr>
</tbody>
</table>

Average price in May 2019: 66,348 Syrian pound (SYP)

- One month change: 0%
- Six month change: +11%

* People in Need (PIN) refers to people whose physical security, basic rights, dignity, living conditions or livelihoods are threatened or have been disrupted, and whose current level of access to basic services, goods and protection is inadequate to re-establish normal living conditions within their accustomed means without assistance.

People in Acute Need refers to those facing more severe forms of deprivation in terms of their security, basic rights and living conditions and face life-threatening needs requiring urgent humanitarian assistance (HNO 2019).
Northwest Syria, May 2019

**CONTEXT**
Hostilities continued across Northwest Syria (NWS), forcing almost 270,000 people to leave their homes to flee the violence from northern Hama and southern Idlib governorates between 1 and 22 May. Most Internally Displaced Persons (IDPs) were displaced for a second or third time. The high influx of IDPs continues to put pressure on already overstretched IDP camps in Dana sub-district, who have reportedly reached capacity. This reportedly forced some IDPs to camp in open fields or shelter under trees, highlighting a clear need for humanitarian response. Key Informants (KIs) in REACH’s Rapid Needs Assessment of May 2019 furthermore reported that safety and security concerns in their community severely limited people’s ability to reach health facilities and food markets in areas directly affected by the conflict in northern Hama and southern Idlib governorates. In addition, in May, acres of agricultural lands were burned, partly due to active conflict, threatening the food security and livelihoods of people in NWS. REACH’s Relativized Burn Ratio Analysis May June 2019 analysed that roughly 151,500 acres were burned in NWS. Northern Hama, Southern Idlib, and Western Aleppo were particularly affected (in terms of absolute acres of burned area).

**KEY HIGHLIGHTS**

**Protection most pressing priority need in northern Hama governorate**
In May, the most commonly reported priority need in northern Hama governorate was protection, reported by KIs in 20 (95%) of the 21 assessed communities, which was reported for two consecutive months in this area. Communities in Hama governorate are witnessing an ongoing conflict deterioration since the end of April. To illustrate, in March, KIs in none of the assessed communities in northern Hama reported any security concerns as barriers to enter or remain in a health care facility. However, KIs in 38% of assessed communities reported this as one of the barriers to accessing health care during May, in line with the escalation of conflict. In addition, May saw a notable increase in communities in which KIs reported that school-aged children in their communities were unable to attend school as routes to educational facilities were unsafe (from 25, 63% of 40 communities in March to 20, 95% of 21 communities in May), in both months this was the most commonly reported barrier. Due to the conflict, 16 humanitarian organisations had to suspend activities in southern Idlib and northern Hama governorates. This severely limits humanitarian actors’ ability to access the most vulnerable, especially in terms of a much-needed protection response.

**Food security in conflict-affected areas affected**
The escalation of conflict also affected the food security situation in NWS, with KIs in 51 (14%) of 367 assessed communities in conflict affected areas reporting people in their community not being able to obtain bread on a daily basis. The main barriers reported to not obtaining bread daily, were electricity/fuel being too expensive and hard to access (53% of communities) and flour being too expensive and hard to access (53% of communities). In conflict affected areas, negative coping strategies were furthermore reported: KIs in 252 (69%) of 367 assessed communities reported people in their community borrowing money from family or friends, KIs in 189 (51%) of communities reported children were being sent to work or beg. KIs in 108 (29%) communities reported people in their community reducing the size of meals and KIs in 77 (21%) communities reported people skipping meals, demonstrating that these coping strategies continue to be persistently employed. In order to ensure a targeted needs-based response, there is a need for further and continuous sectoral and inter-sectoral understanding of the use of coping mechanisms.

**Displacement**
• More IDPs than pre-conflict population (PCP) reportedly left in conflict-affected areas. Amongst the 367 assessed communities in conflict affected areas, KIs in 96 (26%) communities reported that PCPs left their communities and KIs in 125 (34%) communities reported that IDPs left communities in May. Conflict escalation was reportedly the main reason for departures: KIs in 99% of communities reported this for PCPs and KIs in 48% of communities reported this for IDPs.

**Food Security and Livelihoods**
• Across NWS, KIs in 69% of communities reported the monthly income of households in their community to be less than 50,000 SYP. This was most commonly reported in northern Hama governorate, where it was reported by KIs in 20 (95%) of 21 assessed communities. This highlights that most communities in which households have reportedly less than 50,000 SYR to spend monthly, are located in northern Hama governorate.

**Education**
• KIs reported that none of the school-aged children (boys and girls equally) were able to access educational services in communities in northern Hama governorate (in all 21 communities), demonstrating severely restricted access to education.

**Water, sanitation and hygiene (WASH)**
• In northern Hama governorate, between April and May, the proportion of communities in which KIs reported the main network as the most common source of water decreased from 63% to 29%. However, KIs reporting water trucking as a common source of water increased from 8% of assessed communities (in April) to 24% of assessed communities (in May) in northern Hama governorate. Furthermore, May saw an increase in the number of KIs reporting a lack of water to meet household needs in communities in this area (from KIs in 3 to KIs in 9 communities in May). This shows the deterioration in WASH conditions in northern Hama governorate during the month of May.

**Health**
• Out of 367 assessed communities in conflict-affected areas, KIs in 253 (69%) communities reported health care to be the top priority need. KIs in 298 (81%) of assessed communities in conflict-affected areas reported barriers in accessing health facilities and KIs in 199 (54%) of communities in conflict-affected areas reported these barriers to be experienced equally by all population groups. However, in other communities women, elderly, IDPs and children were reportedly more likely to face barriers to accessing health care than other population groups (reported by KIs in 21%, 19%, 11% and 10% of assessed communities, respectively) in conflict-affected areas.
• Furthermore, of the 21 assessed communities in northern Hama governorate, KIs in 17 (81%) communities reported injuries to be a common health problem in May - proportionally the highest problem reported in comparison to other assessed governorates. In May, the most common barriers in accessing health care services were a lack of transportation and long distance to facilities (52%), security concerns when traveling to health facilities (52%), no availability of health facilities (48%), and security concerns around entering health facilities (38%). These findings illustrate why protection and health care were the two most commonly reported priority needs (as reported by KIs in 95% and 76% assessed communities in northern Hama governorate), as well as show the need for targeted and cross-sector interventions.

**Shelter and non-food items (NFI)**
• In the 81 communities in western Aleppo governorate, KIs in 79 (98%) communities reported that independent apartments or houses were the most common type of housing of IDPs, which was proportionally most commonly reported in western Aleppo governorate in comparison to other assessed governorates. Only one KI reported IDPs were staying in tents in one community in western Aleppo governorate. This highlights that IDP shelter conditions are relatively good in western Aleppo governorate, in comparison to the overall region of NWS, in which KIs in 127 (13%) of 990 communities reported tents as a common type of housing lived in by IDPs.
Regional areas of influence:

Area of influence
Sourced from Live UA Map, 31 May 2019

- Opposition Groups
- Opposition - (Euphrates Shield/Olive Branch)
- Syrian Democratic Forces (SDF-coalition)
- Syrian Democratic Forces (SDF)

Assessed Community
**Displacement**

**Estimated proportion of pre-conflict population (PCP) displaced from community:**

- **194,940 - 210,447** Estimated number of IDP arrivals in assessed communities in May 2019.
- **1,512 - 1,794** Estimated number of spontaneous returns in assessed communities in May 2019.

**Communities with the largest estimated number of IDP arrivals:**
- Atma (Dana, Idleb) 65,500
- Sarmada (Dana, Idleb) 18,500
- Deir Hassan - Darhashan (Dana, Idleb) 15,500

*Reported as community, (sub-district, governorate)

**Top 3 reported subdistricts of origin for IDP arrivals:**
- Madiq Castle (Hama)
- Khan Shaykun (Idleb)
- Kafr Nobol (Idleb)

*Reported as sub-district (governorate)

- **875** communities reported no PCP departures.
- **Top 3 reasons for PCP departures in the remaining 115 assessed communities:**
  - Escalation of conflict 85%
  - Loss of income 33%
  - Reduced access to basic services 30%

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**Northwest Syria, May 2019**
FOOD SECURITY & LIVELIHOODS

**Communities that reported having an insufficient quantity of food:**

- **283/990** Communities reported having received food distributions in the last month.
- **235/990** Communities reported that residents were unable to access shops and markets.
- **0/990** Communities reported that residents used extreme food-based coping strategies to deal with insufficient income.

**Less than 50,000 SYP** - Most commonly reported monthly household income range.

125 communities reported that residents had enough income to cover household needs. The most commonly reported coping strategies to deal with a lack of income in the remaining 865 assessed communities were:

- Borrow money from family/friends: 76%
- Children sent to work/beg: 54%
- Reduce meal size: 19%
- Skip meals: 15%
- Sell household assets: 14%

**Most commonly reported ways of obtaining food:**

- Purchased: 100%
- Own production: 92%
- Food distributions: 29%
- Received from others: 13%
- Bartered: 8%
Northwest Syria, May 2019

**EDUCATION**

**FOOD SECURITY & LIVELIHOODS**

Core food item prices reported (in SYP): 1,12

<table>
<thead>
<tr>
<th>Food item</th>
<th>Regional average price in May 2019</th>
<th>One month change</th>
<th>Six month change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bread (8 pieces)</td>
<td>150</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Rice (1 kilogram)</td>
<td>350</td>
<td>+3%</td>
<td>+17%</td>
</tr>
<tr>
<td>Lentils (1 kilogram)</td>
<td>300</td>
<td>+8%</td>
<td>+19%</td>
</tr>
<tr>
<td>Sugar (1 kilogram)</td>
<td>325</td>
<td>+8%</td>
<td>+44%</td>
</tr>
<tr>
<td>Cooking oil (1 litre)*</td>
<td>3,894</td>
<td>+1%</td>
<td>+9%</td>
</tr>
</tbody>
</table>

*includes the combined vegetable oil and ghee prices

176 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining 814 assessed communities were: 6,7,9

- Lack of resources to buy food: 88%
- Some items too expensive: 70%
- Lack of access to market: 29%
- Decrease in local food production: 22%
- Inaccessible cooking fuel: 16%
- Some food items unavailable from the market: 12%

Prevalence of barriers to accessing education services:

546 communities reported that all children were able to access education. The most commonly reported barriers to education in the remaining 444 assessed communities were: 6,7,9

- Services are too far: 46%
- Lack of teaching staff: 45%
- Lack of school supplies: 41%
- Route to services is unsafe: 29%
- Destruction of facilities: 15%

588/990 communities reported having functioning primary education facilities, while 432 communities reported having functioning secondary education facilities. 13

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- Route to services is unsafe: 29%
- Destruction of facilities: 15%

Prevalence of barriers to accessing education services:
Communities that reported insufficient amounts of water to meet household needs:

14/990 Communities reported that water from their primary source tasted and/or smelled bad.
1/990 Community (Qubbat Elsheikh, Al Bab sub-district, Aleppo governorate) reported that drinking water from their primary source made people sick.

613 communities reported that residents had no problems with latrines. The most commonly reported problems with latrines in the remaining 377 assessed communities were:

- Inability to empty septic tanks: 71%
- Blocked connections to sewage: 36%
- No separation between men and women: 22%
- No water to flush: 18%
- Too crowded/not sufficient: 9%
- Lack of privacy: 6%
- Not safe: 6%
- Not clean: 3%

647 communities reported that they had sufficient amounts of water to meet household needs. The most common coping strategies to deal with a lack of water in the remaining 343 assessed communities were:

- Spend money usually spent on other things to buy water: 83%
- Modify hygiene practices: 54%
- Receive water on credit/borrow water or borrow money for water: 22%
- Reduce drinking water consumption: 20%

Primary drinking water source reported:

- Water trucking: 38%
- Closed well: 34%
- Network: 28%

Primary method of garbage disposal reported:

- Paid private collection: 35%
- Free public collection: 28%
- Buried or burned: 22%
- Disposed of at designated site: 8%
- Left in street/public area: 6%
### HEALTH

**Presence of medical facilities in assessed communities:**

- 216/990 Communities reported that no assessed medical items were available in their community.
- 119/990 Communities reported that the majority of women did not give birth in a formal health facility.
- 0/990 Communities reported that some individuals had been diagnosed with SAM (Severe Acute Malnutrition).

234 communities reported that residents experienced no barriers to accessing healthcare services. The most commonly reported barriers in the remaining 756 assessed communities were:

- No health facilities available in the area: 57%
- Lack of transportation/long distance to facilities: 41%
- High cost of transportation to facilities: 35%
- Old age: 22%
- Disability/injuries/illness preventing travel: 20%
- Security concerns when traveling to health facility: 18%

899 communities reported that residents were not using coping strategies to deal with a lack of medical services and items. The coping strategies used in the remaining 91 communities were:

- Using less than the recommended dose of medication: 46%
- Using low quality medication: 45%
- Recycling medical items: 35%

Communities reported that some individuals had been diagnosed with SAM (Severe Acute Malnutrition).

Top 3 most needed healthcare services reported:
- Antenatal care: 53%
- Chronic disease support: 51%
- Medicine: 51%

Top 3 most common health problems reported:
- Severe diseases affecting those younger than 5: 72%
- Chronic diseases: 55%
- Acute respiratory infections: 37%
**SHELTER AND NFI**

**5,544 SYP**  
Regional average monthly reported rent price in SYP across assessed communities.

**5,992 SYP**  
Northern Syria average monthly reported rent price in SYP across assessed communities.

**Communities that reported insufficient amounts of fuel to meet household needs:**

- 511 communities reported insufficient amounts of fuel to meet household needs.

**Most commonly reported shelter type for PCP households:**
- Independent apartment/house: 98%
- Shared apartment/house: 1%
- No information: 1%

**Most commonly reported shelter type for IDP households:**
- Independent apartment/house: 63%
- Tent: 13%
- Shared apartment/house: 8%
- Unfinished apartment/house: 5%
- No information: 11%

**Reported fuel prices (in SYP):**

<table>
<thead>
<tr>
<th>Fuel type (1L)</th>
<th>Regional average price in May 2019:</th>
<th>One month change:</th>
<th>Six month change:</th>
</tr>
</thead>
<tbody>
<tr>
<td>GoS petrol</td>
<td>450</td>
<td>+13%</td>
<td>+21%</td>
</tr>
<tr>
<td>GoS diesel</td>
<td>500</td>
<td>+19%</td>
<td>+25%</td>
</tr>
<tr>
<td>Manually refined petrol</td>
<td>300</td>
<td>0%</td>
<td>+10%</td>
</tr>
<tr>
<td>Manually refined diesel</td>
<td>250</td>
<td>0%</td>
<td>+6%</td>
</tr>
<tr>
<td>Cooking fuel</td>
<td>7,500</td>
<td>0%</td>
<td>+8%</td>
</tr>
</tbody>
</table>

**Primary source of electricity reported:**

- Generator: 53%
- Solar alternative: 31%
- Batteries: 14%
- Main network: 2%

**752 communities reported no lack of fuel.**
- Most common strategies to cope with lack of fuel in the remaining 238 assessed communities:
  - Cutting trees to burn: 58%
  - Burning productive assets: 57%
  - Burning plastics: 41%
  - Burning furniture not in use: 37%
  - Burning furniture in use: 17%
HSOS data collection is conducted through an enumerator network in accessible locations throughout Idlib, Aleppo, northern Hama, Deir-ez-Zor, Ar-Raqqa, and Al-Hasakah governorates. REACH enumerators are based inside Syria and interview Key Informants (KIs) directly in the community about which they are reporting. Where access and security constraints renders direct data collection unfeasible, some KI interviews are conducted remotely through participants identified in camps and settlements in neighbouring countries by REACH field teams. Participants contact multiple KIs in their community in Syria to collect information about their community. KIs are asked to report at the community level. KIs generally included local council members, Syrian NGO workers, medical professionals, teachers, shop owners and farmers, among others, and were chosen based on their community-level or sector specific knowledge. In cases where KIs disagree on a certain piece of information, enumerators triangulate the data with secondary sources or select the response provided by the KI with the more relevant sector-specific background. For each question asked, confidence levels are assigned based on the KIs area of expertise and knowledge of the sector-specific situation. The confidence levels associated with each question are presented in the final dataset. The full confidence matrix used to assign confidence levels is available upon request. Findings are triangulated through secondary sources, including news monitoring and humanitarian reports. Where necessary, follow-up is conducted with enumerators and participants. Findings are indicative rather than representative, and should not be generalised across the region.

**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). 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 @REACH_info.

**ENDNOTES**

1. According to an exchange rate of 1 USD = 570 SYP (see Syria Market Monitoring Dataset May 2019).
2. 18 items comprise the Survival Minimum Expenditure Basket (SMEB), which represents the minimum culturally adjusted items required to support a 6-person household for a month. SMEB Items: Bread, bulgur, chicken, eggs, fresh vegetables, ghee/vegetable oil, red lentils, rice, salt, sugar, tomato paste, bathing soap, laundry/dish soap, sanitary pads, toothpaste, cooking fuel, water trucking, smartphone data, float (other costs).
3. All information and figures reported in HSOS factsheets refer to the situation in assessed communities and cannot be generalised to other non-assessed communities of the region.

**KEY EVENTS AND DEVELOPMENTS**


**MAIN TEXT**

1. 18 items comprise the Survival Minimum Expenditure Basket (SMEB), which represents the minimum culturally adjusted items required to support a 6-person household for a month. SMEB Items: Bread, bulgur, chicken, eggs, fresh vegetables, ghee/vegetable oil, red lentils, rice, salt, sugar, tomato paste, bathing soap, laundry/dish soap, sanitary pads, toothpaste, cooking fuel, water trucking, smartphone data, float (other costs).
For population numbers, KIs were asked to provide the number of residents and IDPs present in the community as of 31 May 2019. A minimum of three KIs were interviewed in each assessed community. Where discrepancies in the information provided by KIs was deemed too large, further triangulation with additional KIs and local organizations was conducted. Estimated individual figures in this report are rounded to the nearest tenth.

Discrepancies with other available population data may be the result of any of the following: differences in assessment coverage dates; differences in definitions of population sub-groups (IDPs and residents); differences in geographic scope of assessed locations (e.g. included/excluded nearby camps and sites); differences in KI types interviewed; and differences in average household sizes used to calculate individual numbers, among others.

The definition of IDPs used by enumerators for this assessment was ‘Individuals or groups of people who have been forced to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalised violence, violations of human rights, or natural or man-made disasters, and who have not crossed an international border’.

Spontaneous returns refers to IDPs or refugees who return to their community of origin that they left due to conflict but not necessarily to their places of habitual residence (their former homes); who intend to remain in the community for an undetermined period; and who do not meet the IASC framework on durable solutions (IASC framework includes “not necessarily voluntary, safe or sustainable” elements).

Assessed using select multiple questions.

By percentage of communities reporting.

The definition of resident (pre-conflict) population (PCP), was ‘Individuals or groups of people who currently reside in their communities of origin, or communities of permanent residence prior to the Syrian conflict. This includes populations that were never displaced as well as previously displaced populations that have returned to their communities of origin’.

Not all surveys have answers for every question, in these scenarios the KI or participant will input no answer. When the dataset has no answer for a particular question the reported number of assessed communities will not add up to the total number of communities assessed and percentages will be calculated based on submitted responses.

Extreme food-based strategies: eating food waste; eating non-edible plants and spending days without eating.

Based on KI perception of sufficiency.

Bread, rice, lentils, sugar, and cooking oil are considered core food items used in food baskets across Syria. For further information on all SMEB items please see the Syria Market Monitoring May 2019 Situation Overview NWS.

Reported numbers indicate the number of communities with functioning primary and secondary education facilities during the data collection period. It is important to note that simply having a functioning facility is not indicative of students being able to attend said facility. In addition, in some cases KIs reported that children attend schools in a neighbouring community.

Assessed HSOS medical items; anti-anxiety medication, contraception, clean bandages, blood transfusion bags, diabetes medicine, anaesthetics, blood pressure medicine, antibiotics, burn treatment.

This information was derived from medical professionals (KIs). The number of total communities refers to all communities that had a KI as medical professional available.

Includes HSOS data for Idleb, Aleppo, northern Hama, Deir-ez-Zor, Ar-Raqqa and Al-Hasakeh governorates.