

## Highlights

- Following weeks of intense hostilities in the last ISIL-held area of Al Baghouz in south-eastern Deir-ez-Zor Governorate, fighting is reported to be subsiding. However, there are still concerning reports of civilians killed and injured due to the fighting as well as of 200 families reportedly still trapped in the area.
- While the transfer of people to Al-Hol camp in Al Hassakeh Governorate continues, less movement of displaced people along the 300 km route is being reported. The majority of new arrivals in Al-Hol are vulnerable women, children and the elderly. Conditions on the route are harsh, with limited food, water, shelter and health services, which is taking a toll on the most vulnerable, including those sick and injured.
- As of February 20, at least 61 children and newborns have reportedly died since December, mostly due to hypothermia, either *en route* or shortly after arriving at Al-Hol.
- Al-Hol camp now hosts more than 40,000 people. Since December 4, 2018, more than 31,000 people have arrived in the camp. Following a slight decrease in the rate of new arrivals and a large-scale up of the response by the humanitarian community, the situation at the site is now stable.
- A transit centre in Suar, halfway between Hajin and Al-Hol, is now operational, with a capacity to accommodate 400 people. The transit centre was established to provide urgent assistance for displaced people and in particular to address the high number of child deaths.
- Since 29 January, the UN and partners have been distributing food to 15 towns and informal settlements in the eastern part of Deir-ez-Zor Governorate along the eastern bank of the river from Basira to Hajin, reaching some 57,500 people. The Syrian Arab Red Crescent also delivered food assistance, hygiene kits, NFIs and nutrition supplies for some 5,000 people in Hajin town on 15 February.
- The UN remains gravely concerned for the situation of civilians, particularly those trapped in the last ISIL controlled area of Hajin. The UN calls for all parties to uphold their obligations under international humanitarian and human rights law, for all movements to be voluntary, for the displacement to last no longer than necessary, and for the displaced to be able to return as soon as possible in safety and with dignity.



## Situation Overview

Hostilities in the last ISIL-held area of Al Baghouz in Hajin in south-eastern Deir-ez-Zor, close to the Iraqi border, are reported to be less severe than in previous weeks. Nonetheless, civilian casualties continue to be reported, while two hundred families are estimated to remain trapped in the last ISIL controlled areas. In the period since 4 February, fewer people have fled the area than in previous weeks. Thousands are estimated to remain in the surrounding areas of Hajin, with reports that some people have started to return to the area in the past week from other areas in Deir-ez-Zor (not from Al-Hol).

Many of those fleeing the last ISIL-held areas were already in a dire state when they managed to leave the area, and harsh conditions in screening centers and along the 300 kilometer road to Al-Hol, with limited food and shelter, cold winter weather, and no emergency health services further exacerbating their vulnerability. Between December and 20 February, at least 61 children and one elderly woman have reportedly died either *en route* or shortly after arriving in the camp. Reports indicate that the security screening process in Baghouz is being accelerated reducing the time of transfer to Suar transit-center and/or Al-Hol. Despite these efforts, high morbidity and the lack of quick referrals to health facilities remains a key concern.

Humanitarian needs remain high in areas that recently shifted control in the Hajin area and along the east bank of the Euphrates. On 15 February, the Syrian Arab Red Crescent sent 6 trucks carrying food, hygiene kits, NFIs and

nutrition supplies to Hajin town. Between 29 January and 17 February, the UN and partners also distributed food to 15 towns and informal settlements in the eastern part of Deir-ez-Zor Governorate, from Basira to Hajin reaching some 57,500 people.

Efforts are ongoing to increase presence and further scale up responses in these areas, which has so far been limited due to insecurity. The coming weeks are likely to see families return to the area, particularly in view of spontaneous return movements reportedly already taking place from nearby informal settlements. Infrastructure and basic services are likely to be severely damaged, according to initial reports by UN partners, coming out of Hajin. Furthermore, there are concerns that returnees will be exposed to widespread explosive hazard contamination.

## Humanitarian Response

### Al-Hol camp

The rapid and large-scale influx of new arrivals in Al-Hol camp has more than tripled the camp's population in the past two months. As of 19 February, the total number of camp residents was 40,628. New arrivals since December 4, 2018 reached 31,045, out of which 2,150 arrived in only three days, between 13-16 February. While the camp reception and hosting capacities were initially put under severe strain, the situation has now improved, as screening and registration processes have been accelerated. The UN and humanitarian partners have mobilized a large-scale response and continue to scale-up efforts to provide assistance and services to new arrivals. Health assistance is being reinforced with new health centers and mobile clinics, a vaccination campaign, as well as nutritional and psychosocial first aid support. Displaced families also receive food, shelter, hygiene kits, and winterization assistance, including heaters. Currently, 4,000 individuals are living in the camp's reception area and in communal spaces while large-size tents are being set up by the humanitarian partners to temporarily host new arrivals until they are allocated family tents. The so-called "phase 5" in the camp is being extended, with an additional capacity of hosting 12,840 people, as well as phase 6 being planned. Additionally, the annex for foreign nationals is to be expanded due to a growing need. Construction of roads, lighting infrastructure, communal kitchens and rain drainage channels is on-going and is expected to be finished by the end of February 2019, depending on weather conditions. Upon arrival, displaced people receive food and non-food items. New ration cards for camp residents will be distributed starting from 25 February, alongside the monthly food distribution. If weather permits, a 2nd distribution site and warehouse should be completed within a week.

**Protection:** Protection needs in Al-Hol camp remain considerable. Additional protection staff have been mobilised, including 21 staff and 16 volunteers doing night and day shifts at the reception center and in 'Phase 5' of the site. Identification of persons with specific needs and referrals is ongoing, including through mobile teams. An interim care facility is functional with rooms for children and facilitators operating on a continuous shift. Several protection actors are coordinating through an ad hoc temporary working group to ensure family links between parents in the camp and children who may have been hospitalised. Key messages on the prevention of family separation are being prepared. To support the well-being of children with access to recreational and psychosocial support, mobile CFS's are operational. As the situation stabilises, the CFS's initially used as temporary shelters have resumed their normal activities. Case management and psychosocial support is also ongoing in the facilities and through mobile outreach. Women and girls' safe spaces are operational, together with two gender-based violence (GBV) mobile teams run by national NGOs in the reception center and in 'Phase 5' to identify women at risk and provide GBV services. Gaps however remain; more staff needs to be mobilised for the reception area and phase 5 and increased security patrols have been requested. Installing lights around latrines is currently a priority to mitigate protection concerns, with work already underway.

**Health and nutrition:** All new arrivals are screened, 24/7 and there is now health service provision in the security area, reception area and Phase 5. Two vaccination teams are working in the camp. The top causes of morbidity are related to upper respiratory infection, influenza-like illnesses, lower respiratory infections, diarrhea, and Leishmaniosis disease, with treatment for Leishmaniosis ongoing. More than 87 children have received treatment of complicated severe acute malnutrition (SAM), of which 22 are still being treated in the hospital. There are 444 cases of moderate acute malnutrition (MAM) among children and women who are being treated and followed up in the camp. A total of 8,332 children under five-years-of-age have been screened for malnutrition, while a total number of screenings done since the start of the response is 14,798. Triage system should be ready within days. Training

has taken place for all the involved actors. Two ambulances are in the reception area and a fixed clinic in phase 5 is now functional. Staff training is needed to deliver appropriate mental health and psychosocial health care.

**Shelter and NFI:** With a dramatic increase of the number of people in the camp, there is a need of 1,500 shelter plots to accommodate some of the 4,000 new arrivals currently living in communal spaces. Some 800 shelter plots are under construction, thus leaving a gap of a minimum of 700 shelter plots. The camp administration has been asked to approve a new phase, phase 6, to accommodate approx. 500 households. Two additional tents have been installed as an annex for new arrivals. Maintenance of communal kitchens is ongoing, expected to be finalized in 30 days. Also, it's been decided that winterisation items including heaters and fuel will continue to be distributed until March 2019.

**WASH:** Water, sanitation and hygiene sector partners are working on water trucking, hygiene kit distribution and installation of WASH facilities and supplies to the newly arrived. A UN partner is doing water trucking for drinking water purposes, planning to increase to 527m<sup>3</sup>/day and start quality testing of both drinking and WASH water in the camp. UN and partners are addressing critical gaps of around 290 latrines/bathing spaces in existing and a new proposed camp. Around 360 additional water storage tanks of 2m<sup>3</sup> capacity are needed to meet critical storage and continuity of water supply.

#### **Suar transit centre**

In view of providing greater assistance *en route* and mitigating morbidity and mortality rates, on 12 February the UN and partners opened a transit centre for IDPs near Suar town in eastern Deir-Ez-Zor Governorate, between Hajin and Al-Hol. Since the opening of the site, the newly displaced from the Hajin area are being reoriented to the transit site and/or directly to Al-Hol. The UN provided four large tents in the transit centre, with capacity for 400 individuals, and stands ready to increase capacity as needed. So far, only two out of four big-size tents are in use. Non-food items such as mattresses, blankets, kitchen sets, plastic sheets and solar lamps have been provided. The current food assistance only covers one meal which is not sufficient in light of the fact that many of the displaced seem to be staying longer than 24 hours. Further food assistance is therefore needed. NFIs, food, children's clothes and WASH materials were dispatched together with mobile health and nutritional clinics to provide 24/7 assistance.

The situation remains dire for the hundreds of IDPs who have passed through the site, and the UN and partners continue to advocate for the immediate provision of assistance to people fleeing Hajin, particularly critical medical assistance for the most urgent cases and ambulances along the way, as well as food, water and dignified reception conditions.

Four rotating medical mobile teams, a health and nutrition mobile team, as well as a reproductive health mobile team are present at the site providing assistance. Most health cases are referred to hospitals in Suar. The need for ambulances to accompany vehicles transporting people from Suar to Al-Hol remains critical. Work on water, sanitation and hygiene is ongoing; latrines are being prepared, hygiene and sanitary kits are being distributed and water is trucked to the site. The overall protection on the transit site needs to be improved. The centre remains unstaffed during night time which poses a threat, especially for women and girls. Family separation on the route to Al-Hol remains a grave concern, as the process of initial security screening and the order of departure of the population to Al-Hol remains unclear and insufficiently communicated. At least three unaccompanied children have been identified so far.

The UN continues to engage with parties on the ground to stress the need for the respect of existing SOPs for security screening, particularly measures for fast tracking the most vulnerable civilians, and for an accelerated, organised and well-communicated movement of IDP's from Suar to Al-Hol to avoid family separation and unnecessary suffering.

#### **Additional resources needed to continue scaling up the response**

Humanitarian actors remain gravely concerned for the most basic human condition and well-being of the population fleeing the Hajin area and their situation *en route* and continue to engage with parties on the ground to increase assistance to IDPs at screening points and to dispatch ambulances along the road to tend to the sick and injured. Humanitarian actors also urge parties to respect basic principles of humanity and dignity when conducting security screenings, fast tracking urgent cases and avoiding family separation.

With the rapid expansion of the IDP camp population in Al-Hol, further support is needed to ensure adequate assistance. This includes family tents to guarantee dignified conditions and privacy, non-food items, heaters, dignity kits, food and nutritional supplies. In addition, it is essential to continue strengthening critical health care, expand gender sensitive water and sanitation facilities, and increase the provision of protection services, including psychological first aid for the distressed population, identification of cases and referrals, restoration of family unity, spaces for the well-being of children and adolescents, women and girls' safe spaces, as well as integrated reproductive health and GBV services.

Pending the launch of the 2019 HRP, additional financial resources for humanitarian assistance are urgently needed to meet all of the above needs. To support, a reserve allocation by the Syria Humanitarian Fund of \$4 million is being launched.

Humanitarian partners continue to strongly advocate with all parties, and with those with influence over them, to ensure the protection of civilians and civilian infrastructure and to facilitate safe, unhindered and sustained humanitarian access to people in need, and for IDPs swiftly be allowed to leave Al-Hol, to move to a place of their choosing or return to their places of origin in safety and with dignity.

In areas that recently shifted control in Hajin area, efforts are needed to protect returnees, including risk education and de-mining due to likely widespread explosive hazard contamination.

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