Background and Methodology

Al Hol is a large formal camp in Al-Hasakeh governorate, which at the time of data collection was managed and administrated by a non-governmental organisation (NGO). This profile provides an overview of humanitarian conditions in Al Hol camp. Primary data was collected through key informant interviews (KIIs) with camp management on the 28 September, 3 October and 5 October 2021. A total of 8 KIIs were performed, focusing on each KI’s sector-specific knowledge. Therefore, findings presented in this factsheet are not statistically representative. Al Hol camp hosts both Iraqi refugees and Syrian internally displaced persons (IDPs). At the time of data collection, several population groups, including Syrian IDPs, were part of return trips or being relocated to Roj camp.

Camp Overview

- Number of individuals: 57,657
- Number of households: 15,703
- Number of shelters: 14,427
- First arrivals: April 2014
- Camp area: 2.9 km²

Demographics

<table>
<thead>
<tr>
<th>Gender</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>1%</td>
<td>60+</td>
<td>1%</td>
</tr>
<tr>
<td>6%</td>
<td>18-39</td>
<td>28%</td>
</tr>
<tr>
<td>21%</td>
<td>5-17</td>
<td>21%</td>
</tr>
<tr>
<td>11%</td>
<td>0-4</td>
<td>12%</td>
</tr>
</tbody>
</table>

Sectoral Minimum Standards

<table>
<thead>
<tr>
<th>Category</th>
<th>Target</th>
<th>Result</th>
<th>Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter</td>
<td>Average number of individuals per shelter</td>
<td>max 4.6</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Average covered area per person</td>
<td>min 3.5 m²</td>
<td>5.9 m²</td>
</tr>
<tr>
<td></td>
<td>Average camp area per person</td>
<td>min 35 m²</td>
<td>51 m²</td>
</tr>
<tr>
<td>Health</td>
<td>Presence of health services within the camp</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Protection</td>
<td>Reported safety/security issues in past two weeks</td>
<td>None</td>
<td>Yes</td>
</tr>
<tr>
<td>Food</td>
<td>Households receiving assistance in the 30 days prior to data collection</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Education</td>
<td>Estimated % of children aged 6-17 accessing education services</td>
<td>100%</td>
<td>30%</td>
</tr>
<tr>
<td>WASH</td>
<td>Persons per latrine</td>
<td>max. 20</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Persons per shower</td>
<td>max. 20</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Frequency of solid waste disposal</td>
<td>min. twice weekly</td>
<td>Every day</td>
</tr>
</tbody>
</table>

Top 3 Non-Food Needs

1st: Carpet/mat for floor
2nd: Cooking fuel
3rd: Jerry can

Top 3 Shelter Needs

1st: Rope
2nd: Tools
3rd: Wire

Top 3 Priority Needs

1st: Employment
2nd: Food
3rd: Psychosocial support
Camp Profile: Al Hol

**HEALTH**

Number of healthcare facilities in camp: 10

Types of facilities: Public hospitals/clinics and NGO clinics

Availability of healthcare facilities outside camp: Yes

Distance to outside health centre: 40 km

Available services at the accessible health centres:

<table>
<thead>
<tr>
<th>Service</th>
<th>In camp</th>
<th>Outside camp</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient department</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Reproductive health</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Emergency</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Minor surgery</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>X-Ray</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Lab services</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Specialized services (i.e. dialysis)</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

KIs reported that residents of the camp do use the health facilities outside of the camp.

KIs reported that no cases of diarrhoea or leishmaniasis had been reported among residents in the 2 weeks prior to data collection.

**COVID-19**

Response infrastructure

<table>
<thead>
<tr>
<th>Area</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isolation area</td>
<td></td>
</tr>
<tr>
<td>Sanitation facilities in isolation area</td>
<td></td>
</tr>
<tr>
<td>Isolation area functional</td>
<td></td>
</tr>
<tr>
<td>Main issues with isolation area</td>
<td>None</td>
</tr>
<tr>
<td>Sufficient handwashing facilities in camp</td>
<td>No</td>
</tr>
</tbody>
</table>

Top measures taken by camp management in response to the pandemic as reported by households:

- Asked people to stay home
- Distributed hygiene materials
- Closed non-essential services/schools/mosques etc.
- Sent prevention messages
- Enforced curfew

**WASH**

**Water**

Tanker truck with treated water was the primary source of water at the time of data collection.

The main issues with drinking water in the two weeks prior to data collection was lack of cleanliness of private as well as public water storage containers. Reportedly everyone or nearly everyone had enough water for their needs.

**Waste disposal**

Primary waste disposal system: Garbage collection (NGO)

Frequency of waste collection: Every day

Disposal location: A landfill 5 km from camp

Sewage system: Sewage network

The primary issue with garbage reported was insufficient number of bins/dumpsters in the camp.

**Sanitation**

<table>
<thead>
<tr>
<th>Number of communal latrines</th>
<th>4,799</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of household latrines</td>
<td>127</td>
</tr>
</tbody>
</table>

Communal latrine characteristics:

- Segregated by gender: All
- Lockable from inside: All
- Functioning lighting: All
- Privacy wall: All
- Decently clean: All
- Road lit up at night: Some

KIs reported that some households were digging private pits or constructing latrines inside of their tents as alternatives to communal latrines.

<table>
<thead>
<tr>
<th>Number of communal showers</th>
<th>1,631</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of household showers</td>
<td>0</td>
</tr>
</tbody>
</table>

KIs reported that residents bathe inside the shelter as an alternative to communal showers.

**Medicine availability**

KIs reported that required medicine for people living chronic diseases was available, and that medicine in general was sufficiently available.

**Children and infant health**

The KIs reported that infant nutrition items had not been distributed.

The following nutrition activities have reportedly been undertaken:

- Screening and referral for malnutrition: Yes
- Treatment for moderate-acute malnutrition: Yes
- Treatment for severe-acute malnutrition: No
- Distribution of micro-nutrient supplements: No
- Blanket supplementary feeding program: No
- Promotion of breastfeeding: No

**Prevention measures**

- Camp staff training: Yes
- Temperature check for people entering: Yes
- Quarantine for new arrivals: Yes
- Sanitation facilities in quarantine area: Yes
- Quarantine area functional: Yes
- Main issues with isolation area: None

**COVID-19 distributions**

The KIs reported that soap, hand sanitiser, facemasks, gloves, water and cleaning products have been distributed to the population.

Additionally, aid distributions have been modified to distributions at block level and with scheduled time slots.

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2. Reported by KIs and not verified through medical records.
3. In the 30 days prior to data collection.
4. Communal latrines and showers are shared by more than one household. Household latrines and showers are used only by one household. This may be an informal designation that is not officially enforced.
5. A shower is defined as a designated place to shower as opposed to bathing in shelter (i.e using a bucket).
FOOD SECURITY

Food consumption
Reported main sources of food for households:
- Food distributions
- Markets inside camp

Food related coping strategies were reportedly used by households in the 2 weeks prior to data collection.

Food distributions
Households reportedly received bread distribution and a food basket as types of food assistance in the 30 days prior to data collection.

Food assistance characteristics:
- Good quality: Yes
- Sufficient quantities: Yes

Top food items that households currently do not have access to:
- None reported

Food security
Food related coping strategies were reportedly used by households in the 2 weeks prior to data collection.

Estimated proportion of households using food-related coping strategies:
- Reducing meal size: no one
- Skipping meals: no one
- Purchasing food on credit: about 50%
- Selling non-productive assets: less than 50%
- Consuming non-food plants/food from garbage: no one

Markets
Food markets available to the households in the camp:
- Functional markets within the camp: Yes
- Functional markets nearby accessible for food purchase: No
- Residents are not allowed to leave the camp.

LIVELIHOODS

Household income
Top three reported income sources in the camp:
- Casual unskilled labour
- Gifts from family/friends
- Self-employed

Household debt
Sources of credit available to residents:
- Family/friends
- Local shopkeeper
- Neighbours from place of origin

Coping strategies
Reported livelihood-related coping strategies used by households at the time of data collection:
- Spending savings
- Borrowing money
- Selling assets
- Support from friends/relatives
- Reduce spending on non-food expenditures
- Selling assistance items received

In the month prior to data collection, no distributions of cash and vouchers in the camp were reported.

SHELTER AND NON-FOOD ITEMS (NFIs)

Shelter occupancy
Average number of people estimated per household: 4
Average number of shelters estimated per household: 0.9
Average number of people estimated per shelter: 4

The estimated occupation rate of the shelters in the camp is 100%.

The KIs reported that no households were sleeping in the open due to lack of other shelter solution.

Shelter adequacy
Reported shelter adequacy issues:
- Lack of electricity
- Security concerns
- Lack of insulation from cold
- Personal hygiene problems
- Issues with sanitation

Reportedly, additional covers were provided to residents to improve shelter sustainability.

Fire safety
The KIs reported that fire extinguishers were available on each block and that actors in the camp had provided residents with information on fire safety in the three months prior to data collection.

CAMP COORDINATION AND CAMP MANAGEMENT

Camp management and committees
Committees reported to be present in the camp:
- Camp management
- Women’s committee
- WASH committee
- Health committee
- Youth committee
- Maintenance committee
- Distribution committee

The camp reportedly has a complaint mechanism system.

Flood susceptibility
The KIs reported that 0% of tents are prone to flooding, and that there are no drainage channels between shelters and no trenches to lead water away from shelters.

The main roads in the site are reportedly paved and gravelled, and the paths leading to the shelters are paved.

Shelters reportedly do not have graveling underneath them.
Camp Profile: Al Hol

MOVEMENT

Top household areas of origin (percentages are KI estimates):

<table>
<thead>
<tr>
<th>Country</th>
<th>Governorate</th>
<th>Sub-district</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iraq</td>
<td>Al-Anbar</td>
<td>Al-Ramad</td>
<td>55%</td>
</tr>
<tr>
<td>Syria</td>
<td>Deir-ez-Zor</td>
<td>Al Mayadin</td>
<td>40%</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td>5%</td>
</tr>
</tbody>
</table>

KIs estimated that 80% of the residents who are intending to leave, plan on returning to their area of origin.

PROTECTION

Protection concerns

The following safety/security concerns were reported in the camp in the 30 days prior to data collection:

- Disputes between residents
- Threats from snipers/guns
- Domestic and sexual violence
- Movement restrictions
- Theft
- Violence from non-residents

Freedom of movement

KIs reported that no residents were able to leave the camp at the time of data collection, but that residents could leave for medical emergencies if they disclosed the medical reason for wanting to temporarily leave.

The main barriers reported for residents to leave the camp were general movement restrictions.

Vulnerable groups

At the time of data collection, no interventions targeting elderly populations were reported in the camp. Interventions targeting persons with disabilities were reported specifically for people with difficulties hearing, seeing or walking.

Documentation

Births in the camp were reportedly documented. Lack of documentation was not reported as a main barrier for residents to leave the camp.

EDUCATION

At the time of data collection, there were 22 educational facilities in the camp including 8 early childhood development centres.

Age groups: 3-5 and 6-17 years old

Service providers: NGOs

Certification available: No

Available WASH facilities in educational facilities

- Latrines: Yes (gender-segregated)
- Handwashing facilities: Yes, in all education facilities
- Safe drinking water: Yes, in all education facilities

Barriers to education

The KIs estimated that, 30% of school-aged children between the ages of 3 and 17 years old were receiving education inside or outside the camp. The main reported barriers to education were:

- Safety/security concerns
- The child has to work
- Customs/traditions

Children in the camp were not able to access schools outside the camp.

About REACH’s COVID-19 response

As an initiative deployed in many vulnerable and crisis-affected countries, REACH is deeply concerned by the devastating impact the COVID-19 pandemic has on the millions of affected people we seek to serve. REACH is currently working with Cash Working Groups and partners on its programming in response to the pandemic, with the goal of identifying practical ways to inform humanitarian responses in the countries where we operate. Updates regarding REACH’s response to COVID-19 can be found in a dedicated thread on the REACH website. Contact geneva@impact-initiatives.org for further information.

About REACH Initiative

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).