Key events impacting the humanitarian situation in Northeast Syria

- Ar-Raqqa and Deir-ez-Zor cities fully liberated from ISIL.¹,²
- Forces escalate offensive on ISIL in southeastern Deir-ez-Zor governorate and in southern Al-Hasakeh governorate.³
- Delayed rainfall and deteriorated agricultural infrastructure and input resulted in the lowest annual wheat yield since 1989.⁴
- 244,655 spontaneous returnees in Deir-ez-Zor governorate and 166,305 in Ar-Raqqa city reported by OCHA since November 2017.⁵
- Since November, hostilities in ISIL-held areas of Hajin and Baghouz further intensified.⁶
- More than 63,000 people were displaced from ISIL-held areas in Deir-ez-Zor to Al Hol camp in Al-Hasakeh. Situation stabilises.⁷

People in need (PIN) Demographics

- PIN: 1,088,962
- People in Acute Need: 572,682

Survival Minimum Expenditure Basket (SMEB):¹,²

- Average price in April 2019: 70,934 Syrian pound (SYP)
- One month change: +4.9%
- Six month change: +10.1%

* 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 (OCHA 2018).

The calculated PIN numbers are indicative as they are calculated using the OCHA dataset and coverage varies slightly.
Northeast Syria, April 2019

**CONTEXT**
Severe rainstorms hit NES in April 2019 resulted in the flooding of around 1,000 acres of wheat and barley fields in southern Al-Hasakeh governorate. The affected population is estimated to be around 118,000 individuals, including people living in camps. REACH's satellite image analysis shows how heavy rains have flooded the majority of Areesheh camp, and forced many residents to move to a separate annexe. Although the number of new arrivals to Al Hol has decreased, it remains overcrowded. Some women and children arriving to Al Hol coming from Bagouz require specialised medical attention. Lastly, the Syrian pound depreciated against the US dollar in Al-Hasakeh, Ar-Raqqa and Aleppo governorates. In Deir-ez-Zor governorate many traders closed their shops due to sudden increases in taxes. See the REACH Market Monitoring April 2019 for more information.

**KEY HIGHLIGHTS**

**Education**
Education reported as priority need in Ar-Raqqa and eastern Aleppo governorates, while early marriage and child labour are notable barriers in Deir-ez-Zor governorate.

KIs reported education as a priority need in most assessed communities in Ar-Raqqa governorate (61%) and eastern Aleppo governorate (80%), in contrast to Deir-ez-Zor (15%) and Al-Hasakeh (37%) governorates. In those communities in which not all school-aged children were reportedly accessing school (Ar-Raqqa 69%, eastern Aleppo 77%), main reasons KIs reported were a lack of teaching staff (Ar-Raqqa 79% and eastern Aleppo 91%) and a lack of school supplies (Ar-Raqqa 71% and eastern Aleppo 87%). In Ar-Raqqa, KIs in 27 (13%) of 216 assessed communities reported that challenges affected mainly girls. In Deir-ez-Zor, a lack of school supplies (46%) and a lack of teaching staff (26%) were also mentioned. However, KIs reported most commonly early marriage (72%) and child labour (60%) as reasons why children were not accessing school, highlighting specific protection concerns in Deir-ez-Zor governorate.

**While lack of livelihoods continues, fuel prices increase in NES**

The price of Government of Syria (GoS) refined fuel (petrol) increased in April compared to March. Whereas in March the price was reportedly 188 SYP, the price increased by 60% to 300 SYP in April. The price of manually refined diesel and cooking fuel also rose respectively by 19% and 27%. The petrol crisis can be partially explained by the decline in volume of oil production in Syria. Livelihoods were, after healthcare, the most commonly reported priority need by KIs in 67% of assessed communities. Limited access to livelihoods may reduce populations in NES's ability to withstand such volatile price increases. Increased fuel prices could have far-reaching consequences, by impacting mobility and increasing the cost of water/food delivery.

**Hosting without rent and formalised squatting most often reported in Deir-ez-Zor governorate**

KIs in Deir-ez-Zor governorate reported a wider array of tenancy arrangements than in other governorates in NES. In Deir-ez-Zor, hosting without rent was reported in 37% of assessed communities and formalised squatting was reported in 55% of assessed communities, which was not as frequently reported in other governorates. Deir-ez-Zor governorate was conflict-affected until recently, so likely the wider variety of tenancy arrangements is linked to the presence of more vulnerable IDP populations.

**Displacement**

In comparison to March when approximately 11,000 IDPs arrived in the assessed communities, the number of IDP arrivals across NES in April 2019 was much lower, approximately 800. The main subdistrict of origin for IDP arrivals was Jawadlyah (Al-Hasakeh governorate).

In addition, the estimated number of spontaneous returns in April 2019 was notably higher (25,931 - 28,996) in comparison to March 2019 (around 9,500 spontaneous returns). It was reported that 15,000 people returned to Sosa community in Deir-ez-Zor governorate from Basira (Deir-ez-Zor), Kisreh (Deir-ez-Zor), and Al Hole (Al-Hasakeh) sub-districts, the latter notable for the presence of Al Hole camp. The other spontaneous returnees were distributed throughout NES.

**Food Security and Livelihoods (FSL)**

The most common sources of income through which people in NES covered essential needs during April 2019 were reportedly being an owner of a farm (78% of assessed communities), having unstable daily employment (53%), doing business trade (44%), having salaried stable employment (43%), and receiving remittances from outside of Syria (37%).

In Ar-Raqqa governorate (34%) and Al-Hasakeh governorate (23%), KIs reported that local food production has decreased. Considering that one of the key ways of obtaining food in NES is through own production (77%), and a key source of income is farm ownership (78%), a decrease of local food production could have detrimental effects on FSL in NES.

**Education**

Education was the third most commonly reported priority need by KIs (44%), after healthcare (82%) and livelihoods (67%). The majority of KIs reported that primary schools were functioning in NES, as reported by KIs in 602 (95%) of 635 assessed communities. KIs in only 39% of assessed communities reported that secondary schools were functioning. KIs in only 10% of assessed communities reported that high schools were functioning.

Across NES, KIs in 41% of assessed communities reported that children were not attending school in nearby communities if facilities were not available or functioning. This was particularly seen in Deir-ez-Zor governorate, where children were not attending school in nearby communities in 119 (73%) of 163 assessed communities.

**Water, sanitation and hygiene (WASH)**

KIs in 11 communities reported that people got sick after drinking water; KIs in 8 communities in Ar-Raqqa (Jurneyyeh, Ar-Raqqa and Karama sub-districts) and 3 communities in Deir-ez-Zor governorate (Basira and Kisreh sub-districts). In addition, KIs in 200 communities reported that water tasted or smelled bad. KIs in Deir-ez-Zor mainly reported this (124 or 76% of 163 communities). It was reported by KIs in 28 communities in Kisreh and 19 communities in Deir-ez-Zor sub-districts.

**Health**

Across NES, KIs in 307 (48%) of 635 assessed communities reported that there were no medical items available in the facilities. This was especially high in eastern Aleppo where it was reported in 74% of assessed communities, and Ar-Raqqa, in 64% of assessed communities. KIs in 276 (43%) communities across NES reported people in their communities using low quality medication, and KIs in 265 (42%) assessed communities reported using less than the required amount of medication.

In Deir-ez-Zor governorate, KIs in 161 (99%) of 163 assessed communities reported difficulties in access to healthcare. Of those reporting difficulties, KIs in 66% of assessed communities reported that healthcare services were too expensive. KIs in 29% of assessed communities reported a high cost of transportation to health facilities, and KIs in 27% of assessed communities reported a lack of medical staff and absence of specialised clinics.

**Shelter and non-food items (NFI)**

Of all 635 assessed communities, most returnee households were reported to own a pre-conflict home, as reported by KIs in 76% of assessed communities. This was especially reported in Ar-Raqqa, by KIs in 93% of assessed communities.

The source of electricity most used by the community according to KIs varied slightly between governorates. KIs in Ar-Raqqa and eastern Aleppo reported the main electricity network (respectively 86% and 98% of assessed communities). KIs in Deir-ez-Zor and Al-Hasakeh were found to most commonly making use of generators (respectively 77% and 51% of assessed communities).
Regional areas of influence:

Area of influence
Sourced from Live UA Map, 30 April 2019
- Opposition - (Euphrates Shield/Olive Branch)
- Syrian Democratic Forces (SDF-coalition)
- ISIL-affiliated groups

Assessed Community
**DISPLACEMENT**

- Estimated number of IDP arrivals in assessed communities in April 2019: 752 - 813
- Estimated number of spontaneous returns in assessed communities in April 2019: 25,931 - 28,996

**Communities with the largest estimated number of IDP arrivals:**
- Sweidan Jazira (Thiban, Deir-ez-Zor): 700 - 750
- Hilo Abed (Ar-Raqqa, Ar-Raqqa): 50 - 60
- Mazraet Eljamus (Al-Malikeyyeh, Al-Hasakeh): 2 - 3

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

**Top 1 reported subdistrict of origin for IDP arrivals:**
- Jawadiyah (Al-Hasakeh)

*Reported as sub-district (governorate)

- 634 communities reported no PCP departures.

**Top 1 reason for PCP departures in the remaining 1 assessed community:**
- Protection concerns: 100%

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

- [Map showing displacement patterns in Northeast Syria, April 2019]

**Estimated number of IDP arrivals in assessed communities in April 2019:**
- 752 - 813

**Estimated number of spontaneous returns in assessed communities in April 2019:**
- 25,931 - 28,996

**Communities with the largest estimated number of IDP arrivals:**
- Sweidan Jazira (Thiban, Deir-ez-Zor): 700 - 750
- Hilo Abed (Ar-Raqqa, Ar-Raqqa): 50 - 60
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*Reported as sub-district (governorate)

- 634 communities reported no PCP departures.

**Top 1 reason for PCP departures in the remaining 1 assessed community:**
- Protection concerns: 100%
Northeast Syria, April 2019

 FOOD SECURITY & LIVELIHOODS

Communities reported having received food distributions in the last month.
Communities reported that residents were unable to access shops and markets.
No communities reported that residents used extreme food-based coping strategies to deal with insufficient income.

From 50,000 to 100,000 SYP Most commonly reported household monthly income range.

Communities reported having received food distributions in the last month.

79 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 556 assessed communities were:

- Borrow money from family/friends (91%)
- Children sent to work/beg (36%)
- Reduce meal size (20%)
- Take loans/buy on credit (19%)
- Skip meals (11%)

Most commonly reported main sources of income:

- Income from farm ownership (78%)
- Unstable/daily employment (53%)
- Business or trade (44%)
- Stable/salaried employment (43%)
- Remittances (37%)

Most commonly reported ways of obtaining food:

- Purchased (100%)
- Own production (77%)
- Bartered (24%)
- Food distributions (10%)
- Received from others (7%)

- Insufficient food reported
- Somewhat sufficient food reported
- Sufficient food reported
- Extreme food-based coping strategies used

Governorate capital
Sub-district with assessed communities
Sub-district with no assessed communities
Northeast Syria, April 2019

FOOD SECURITY & LIVELIHOODS

Core food item prices reported (in SYP):

<table>
<thead>
<tr>
<th>Food item</th>
<th>Regional average price in Apr-19</th>
<th>One month change</th>
<th>Six month change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bread (8 pieces)</td>
<td>100</td>
<td>0%</td>
<td>-26%</td>
</tr>
<tr>
<td>Rice (1 kilogram)</td>
<td>500</td>
<td>+18%</td>
<td>+14%</td>
</tr>
<tr>
<td>Lentils (1 kilogram)</td>
<td>350</td>
<td>+17%</td>
<td>+17%</td>
</tr>
<tr>
<td>Sugar (1 kilogram)</td>
<td>325</td>
<td>0%</td>
<td>+8%</td>
</tr>
<tr>
<td>Cooking oil (1 litre)*</td>
<td>4,158</td>
<td>+2%</td>
<td>+9%</td>
</tr>
</tbody>
</table>

*includes the combined vegetable oil and ghee prices

25 communities reported that residents experienced no challenges in accessing food. The most common difficulties experienced in the remaining 610 assessed communities were:

- Some items too expensive: 81%
- Lack of resources to buy food: 74%
- Some food items unavailable from the market: 26%
- Decrease in local food production: 21%
- Lack of access to market: 16%
- Lack of available cooking fuel: 4%
- Inaccessible cooking fuel: 1%

EDUCATION

602/635 communities reported having functioning primary education facilities, while 248 communities reported having functioning secondary education facilities.

185 communities reported that all children were able to access education. The most commonly reported barriers to education in the remaining 450 assessed communities were:

- Lack of school supplies: 49%
- Lack of teaching staff: 48%
- Early marriage: 30%
- Services are too far: 29%
- Child labour: 27%
**WASH**

200/635 Communities reported that water from their primary source tasted and/or smelled bad.

11/635 Communities reported that drinking water from their primary source made people sick.

351 communities reported that residents had no problems with latrines. The most commonly reported problems with latrines in the remaining 284 assessed communities were: ^5,7,9

- Lack of privacy: 46%
- No separation between men and women: 42%
- Not clean: 39%
- No water to flush: 26%
- Blocked connections to sewage: 24%
- Inability to empty septic tanks: 22%
- Not safe: 14%
- Too crowded/not sufficient: 5%

490 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 145 assessed communities were: ^6,7,9

- Spend money usually spent on other things to buy water: 74%
- Modify hygiene practices: 39%
- Drinking water usually used for other purposes: 23%
- Reduce drinking water consumption: 22%

**Primary drinking water source reported:**^7

- Network: 52%
- Water trucking: 25%
- Closed well: 18%
- Bottled water: 2%
- Other: 3%

**Primary method of garbage disposal reported:**^6,7

- Free public collection: 36%
- Disposed of at designated site: 25%
- Buried or burned: 20%
- Left in street/public area: 11%
- Paid private collection: 9%

Northeast Syria, April 2019

Communities that reported insufficient amounts of water to meet household needs:^11

Network
Water trucking
Closed well
Bottled water
Other

Water in one or more assessed communities in sub-district reportedly makes people sick
Water in one or more assessed communities in sub-district reportedly smells/tastes bad, but sickness due to water is not reported
Water is reportedly fine to drink in all assessed communities in sub-district

Insufficient water reported
Sufficient water reported
Governorate capital

Water in one or more assessed communities in sub-district

Informing more effective humanitarian action
Northeast Syria, April 2019

HEALTH

307/635 Communities reported that no assessed medical items were available in their community.14

191/635 Communities reported that the majority of women did not give birth in a formal health facility.

6/635 Communities reported that some individuals had been diagnosed with SAM (Severe Acute Malnutrition).15

19 communities reported that residents experienced no barriers to accessing healthcare services. The most commonly reported barriers in the remaining 616 assessed communities were:6,7,9

- Healthcare services too expensive
- No health facilities available in the area
- High cost of transportation to facilities
- Lack of transportation/long distance to facilities
- Lack of medical staff and absence of specialized clinics
- Security concerns when travelling to facilities

251 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 383 communities were:6,7,9

- Using low quality medication
- Using less than the recommended dose of medication
- Using nonmedical items for treatment

Communities reported that some individuals had been diagnosed with SAM (Severe Acute Malnutrition).15

Top 3 most needed healthcare services reported:6,7
- Antenatal care 56%
- Chronic disease support 69%
- Medicine 60%

Top 3 most common health problems reported:6,7
- Chronic diseases 77%
- Severe diseases affecting those younger than 5 55%
- Acute respiratory infections 42%
Communities that reported insufficient amounts of fuel to meet household needs:11

Most commonly reported shelter type for PCP households:7
- Independent apartment/house: 100%
- Shared apartment/house: 14%
- Tent: 3%
- Unfinished apartment/house: 2%
- No information: 41%

Most commonly reported shelter type for IDP households:7
- Independent apartment/house: 40%
- Shared apartment/house: 14%
- Tent: 3%
- Unfinished apartment/house: 2%
- No information: 41%

Reported fuel prices (in SYP):1,2

<table>
<thead>
<tr>
<th>Fuel type (1L)</th>
<th>Regional average price in April 2019:</th>
<th>One month change:</th>
<th>Six month change:</th>
</tr>
</thead>
<tbody>
<tr>
<td>GoS petrol</td>
<td>300</td>
<td>+60%</td>
<td>+155%</td>
</tr>
<tr>
<td>GoS diesel</td>
<td>55</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Manually refined petrol</td>
<td>200</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Manually refined diesel</td>
<td>155</td>
<td>+19%</td>
<td>+36%</td>
</tr>
<tr>
<td>Cooking fuel</td>
<td>4,375</td>
<td>+27%</td>
<td>+40%</td>
</tr>
</tbody>
</table>

579 communities reported no lack of fuel. Most common strategies to cope with lack of fuel in the remaining 56 assessed communities:6,7,9
- Burning productive assets: 27%
- Cutting trees to burn: 16%
- Burning furniture in use: 16%
- Other: 38%

Primary source of electricity reported:7
- Network: 59%
- Generator: 38%
- Batteries: 3%
HSOS data collection is conducted through an enumerator network in accessible locations throughout Idlib, Aleppo, northern Hama, Deir-ez-Zor, Ar-Raqqa, and Al-Hasakeh 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 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

KEY EVENTS AND DEVELOPMENTS

According to an exchange rate of 1 USD = 540 SYP (see Syria Market Monitoring Dataset April 2019).

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).

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.

For population numbers, KIs were asked to provide the number of resident and IDPs present in the community as of 30 April 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).

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 April 2019 Situation Overview.

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 Idlib, Aleppo, northern Hama, Deir-ez-Zor, Ar-Raqqa and Al-Hasakeh governorates.