



This report is produced by the OCHA Syria Crisis offices with the contribution of all sectors in the hubs and at Whole of Syria level. It covers the period from 1-31 August 2017. The next report will be issued on or around 22 September.

## Highlights

- Up to 15,000 civilians remain trapped in Ar-Raqqa city and face increasingly deteriorating humanitarian conditions and protection concerns. Despite the risks of exposure to mines, snipers and military operations, some civilians have been able to escape through newly established corridors.
- Clashes escalated between the Government of Syria (GoS) forces and ISIL in Deir-ez-Zor city and its surrounding neighborhoods.
- Following a polio outbreak in Syria, UNICEF, WHO and local partners vaccinated some 252,768 children under 5 years old in Deir-ez-Zor and Ar-Raqqa governorates.

**29,936**

people displaced from 1 – 31 August, 51,344 since 1 July 2017



**333,861**

people reached with food assistance from 1 – 31 August



**252,768**

children under 5 vaccinated against polio in Ar-Raqqa and Deir-ez-Zor Governorates



**6,760**

hygiene kits distributed benefiting more than 33,800 people across various IDP sites



## Situation Overview

### Ar-Raqqa Governorate

Throughout the reporting period, civilians in Ar-Raqqa city continued to be significantly impacted by the advance of the Syrian Democratic Forces (SDF) towards the centre of Ar-Raqqa city with the support of US-led Coalition airstrikes. The SDF continue to control approximately 60 per cent of the city. Civilians continue to reside in only five of the 24 neighborhoods and seek support to leave the neighborhoods. Up to 15,000 civilians remain trapped in the city, increasingly exposed to hostilities; at risk of being killed by airstrikes, mortar and artillery shelling, ISIL snipers or mines should they try to flee, or being used as human shields should they remain. The increase in the number of airstrikes conducted in and around Ar-Raqqa city- with public reporting from the Coalition documenting 1,241 airstrikes on or near Ar-Raqqa city in August alone- has resulted in large numbers of civilian casualties, including women and children.

Conditions for civilians trapped in the city continued to further deteriorate due to severe food, water, and medical shortages as well as the highly inflated prices of goods when available. Reports indicate that wounded civilians were dying due to lack of health care and basic commodities. Reaching the few operational trauma units inside the city is becoming increasingly difficult due to the lack of fuel to operate vehicles, as well large amounts of debris blocking the majority of roads. After the national hospital was rendered inoperable in an airstrike and the obstetrics hospital ceased operations due to military activity in the area, only one pharmacy continues to provide basic medicines. The presence of bodies in the streets are reportedly contributing to a further risk of the spread of diseases. Food shortages and shop closures continue to be reported. A general power outage prevails in the city, and it is no longer possible to operate power generators due to lack of fuel. Water supply through the main network continues to be cut forcing civilians to rely on unsafe water extracted from wells resulting in the deadly spread of water borne-diseases, especially among children. Furthermore, due to indiscriminate airstrikes, residents are unable to access the only functioning bakery remaining in the besieged neighborhoods. Dozens of children have reportedly been orphaned and have no alternative caretakers.

On 18-19 August, 78 civilian deaths were reported in residential neighborhoods due to airstrikes, the majority of which were women and children. On 20 August, local sources reported that airstrikes on Ar-Raqqa city hit a residential building in the Al-Badou neighborhood, reportedly killing over 40 civilians and injuring many others. The following day, on 21 August, in the same neighborhood 18 people were reportedly killed by airstrikes. On 20 August, local

sources reported a large number of casualties in the Al-Sakhani neighborhood, where 40 people were reportedly killed due to airstrikes. In the same neighborhood, around 23 people were reportedly killed on 21 August. On 29 August, airstrikes on Ar-Raqqa city reportedly hit the Al-Wahda residential neighborhood, killing 13 people. These reports cannot be independently verified due to lack of access and the limited flow of information from the city.

In the Ar-Raqqa countryside, clashes in Sabka and Maadan Sub-districts resulted in increased displacement. Since 28 August, heavy clashes occurred around Maadan sub-district in the eastern rural areas of Ar-Raqqa between Government of Syria (GoS) forces and ISIL. On 28 August, in the ISIL-controlled areas of the eastern countryside of Ar-Raqqa governorate, ISIL reportedly executed 29 men on allegations of affiliation with GoS and arrested over 50 others.

On 22 August, Ali Al-Za'tari, the Humanitarian Coordinator for Syria, and Ramesh Rajasingham, the Regional Humanitarian Coordinator for Syria a.i, expressed their deep concern over the significant number of civilians reportedly killed due to the use of explosive ordnances, including through Coalition airstrikes, against ISIL targets in densely populated neighborhoods of Ar-Raqqa city. On 31 August, UN High Commissioner for Human Rights Zeid Ra'ad Al Hussein stressed that the battle to regain Al-Raqqa and Deir-ez-Zor from ISIL must not be waged at the expense of the lives of civilians trapped and besieged in these areas.

### Deir-ez-Zor Governorate

Civilians in Deir-ez-Zor governorate continue to be impacted as military operations, airstrikes and clashes intensified with thousands displaced in the past month due to both the increase in airstrikes and fears of further ISIL attacks.

The price of water trucking has reportedly increased as water tanks have been hit/impacted by airstrikes. The eastern countryside has been suffering from water cuts for more than ten months due to power outages, forcing people to use water from the Euphrates River which is deemed unsafe. On 26 August, an airstrike reportedly destroyed Ashara bridge in al Ashara city south of Deir-ez-Zor city after being rehabilitated by the local population for the transportation and dispatch of commodities. People now depend on boats which are expensive and difficult to use. The destruction of this bridge also resulted in high food and NFI commodity prices and difficulty in transporting emergency medical cases. Following the price increases, many merchants have withdrawn food commodities from the market for personal use and stock-piling, further contributing to inflated prices.

Civilians have reportedly been prohibited from moving outside the ISIL-controlled area though some civilians are using informal routes to leave the area. Numerous risks have been reported when attempting to leave ISIL-controlled areas, such as harassment, arrest, landmines, snipers and forced conscription. Women continue to be barred from travelling without a male relative and commonly faced intense questioning or harassment even when accompanied. ISIL has reportedly established 'mobile' checkpoints in the Deir-ez-Zor countryside to prevent people from displacing. Despite these restrictions, over 2,500 families were reportedly displaced from various rural areas of Deir-ez-Zor to Al-Hassakeh governorate between 24-27 August as GoS forces advanced in rural Deir-ez-Zor.

On 15 August, ISIL reportedly carried out a series of arrests, arbitrarily arresting males in its areas of control in Deir-ez-Zor governorate. This comes shortly after ISIL announced a policy of forced conscription, which led to hundreds of men fleeing to the Areeshah IDP camp in Al-Hassakeh governorate. The majority of young men who have reached the legal age for military service have left the area so the arrests reportedly largely affected those who are under the legal age. On 19 August alone, ISIL reportedly captured about 60 men in the eastern countryside of Deir-ez-Zor, including 13 children between 14 and 16 years. On 25 August, ISIL reportedly forcibly conscripted some 30 men from 40 families who were fleeing towards SDF-controlled areas. The remaining family members were forced to return to their places of origin. The same day, ISIL reportedly detained over 40 men for forced conscription from various neighborhoods in Deir-ez-Zor city.

The increased intensity of clashes and airstrikes, by both the Government of Syria (GoS) and allied forces, and the coalition, against ISIL, continue to result in increasing numbers of civilian casualties. On 16 August, three airstrikes on Masrab area in the western countryside of Deir-ez-Zor reportedly resulted in 8 civilian deaths and 11 injuries. Moreover, two men were allegedly killed due to airstrikes on Sbeikhan. On 17 August, a woman and her son reportedly died due to airstrikes on Masrab town and a man also died due to airstrikes in Zbara. On the same day, an airstrike hit the government bakery in Kishkiyeh town and an airstrike in the eastern countryside of Al-Mayadeen resulted in the death of one civilian. On 20 August, three people were killed in airstrikes on an IDP camp in southern AlKharita town, in the western countryside of Deir-ez-Zor. Field reports indicate that two children were killed on 23 August in the Hawayej Thyab Shamiyeh area, while a woman was killed and two people were injured by airstrikes on Kharita town. In addition, on the same day airstrikes on Al-Mayadeen city in rural Deir-ez-Zor reportedly killed six people and injured ten others.

On 3 September, GoS forces advanced from the south and southwest countrysides towards besieged areas in Deir ez Zor city where around 93,500 people live. On 5 September, GoS forces broke the three-year ISIL-enforced siege on the GoS-held parts of Deir Ez-zor city, with the GoS Ministry of Defense officially announcing the lifting of the siege. The situation on the ground remains volatile. Conditions for the population in the city had been increasingly dire due to sub-standard hygiene conditions in the area, due to bodies that have not been properly buried, damaged sewage systems and accumulated waste in open areas. Commercial activity has reportedly re-started with commodities flowing into the city following the lifting of the siege.



## Displacement trends

Displacements in northeast Syria continue to increase. The total number of displaced people from Ar-Raqqa tracked by the CCCM cluster since 1 July has reached 51,344 individuals, many of them displaced multiple times. To date, the total number of internally displaced persons tracked is 289,901 since the onset of the Ar-Raqqa offensive in November 2016. The total number of displaced people from Deir-ez-Zor tracked by the CCCM cluster since 1 August has reached 2,234 individuals.

Although people fleeing Ar-Raqqa city risk exposure to mines, snipers and military operations, 90 people escaped Ar-Raqqa city using boats to cross the river to the Al-Kesrat area, south to the river, on 17 August. Another 600 persons displaced from Ar-Raqqa city in late August using a newly established corridor. On 26 August, landmines reportedly killed four people and injured five individuals including women and children, all of whom were part of a group of 40 families attempting to flee Ar-Raqqa city.

Displacement from Deir-ez-Zor governorate continues to be hazardous and vulnerable populations (women, children, elderly) are most at risk during displacement. On 16 August, a man and a child reportedly died due to a mine explosion in Upper Baqras during their displacement to SDF areas. On the same day, eight people were reportedly shot while trying to cross the checkpoint and 13 were injured (majority are women and children) after ISIL established many checkpoints in the western countryside of Deir-ez-Zor to prevent people fleeing to SDF areas. On 19 August, five civilians were reportedly shot by ISIL during their attempt to displace to areas under SDF control. On 27 August, landmines on the road connecting Deir-ez-Zor with Al-Hassakeh reportedly injured at least twelve people. On 28 August, during their displacement to SDF controlled areas, two families from Kasra were reportedly affected by a mine explosion which resulted in the death of one woman and 5 serious injuries. On 30 August, landmine explosions in Abu Khashab village (in Al-Hasakeh) reportedly killed 12 people and injured 28 others who were fleeing Bou Kamal city in Deir-ez-Zor governorate towards Al-Hasakeh governorate. On 31 August, a man from Abu Hamam reportedly died due to mine explosion in the Abu Khashab area while trying to displace to SDF controlled areas.

Ongoing clashes across northeast Syria continue to result in displacement, and IDPs from Raqqa, Deir-ez-Zor and Maskana (south of Menbij in Aleppo governorate) are being accommodated in a number of camps in Ar-Raqqa and Al-Hassakeh governorates. The situation remains fluid and the number of IDPs fluctuate from day to day. The humanitarian community continues to raise protection concerns and to advocate for the freedom of movement of IDPs with respective local authorities.

### Main IDP sites:

#### Areesh (Bahra) transit site

The Areesh IDP transit site was established by local authorities in Areesh sub-district in June 2017. Conditions in the site remain difficult. Temperatures can reach upwards of 55 degrees celsius during the day. The site is located in an area contaminated by residue from informal fuel refineries. Additionally, accumulated waste constitutes potential safety and environmental health hazards for the IDP population.

During the reporting period, the situation on the ground remained very fluid due to both the sudden increase in new arrivals and site decongestion. As a result, IDP numbers changed on a daily basis. As of August 19, estimates indicated a population of approximately 9,000 IDPs at the site. On 22 August, more than 11,000 people were living in the site with an average of 1,000 – 1,500 additional individuals arriving daily. Most of the site population originated from the ISIL-held country sides of Deir-ez-Zor governorate. As of 22 August, more than 55 per cent of IDPs in the camp were estimated to be children, including more than 12 per cent that are unaccompanied children.

On 22 August, the site decongestion plan was implemented to increase capacity from 8,700 to 19,200 people. Camp management partners are clearing land for use as roads, installing household tents and more than 60 communal kitchens, as well as erecting solar lighting throughout the site. Between 21 and 23 August, approximately 1,200 IDPs or 340 households were temporarily relocated to Mabrouka site, with more relocations which occurred in the subsequent days. At the same time, IDPs from both Ar-Raqqa and Deir-ez-Zor continued to arrive and as of 24

August an estimated 14,000 IDPs were residing at the site. Following the re-direction of new arrivals to Mabrouka site as well as increased departures from the camp, the number has decreased to an estimated 5,500 individuals as of 29 August. As of 6 September, approximately 3,725 individuals remain in Areeshah site. Recent reports estimate that around 50 families are arriving to the site each day.

Additional tents to accommodate new IDP arrivals are needed. Additionally, the site has limited latrines and lacks a solid waste management system. The availability of bread in the site is reportedly insufficient to meet the population's needs, and IDPs report limited diversity of food supplies in the site. Although the distribution of safe drinking water is ongoing, the quantity is reportedly insufficient to meet current needs. Other key gaps identified include health, evacuation of critical medical cases and delays in establishing WASH facilities.

### **Al Hole camp**

As of end of August, the estimated population of Al Hole camp is approximately 21,800 people (18,900 Iraqi refugees and 2,900 Syrian IDPs). The majority of camp residents are women and children. Approximately 2,000 IDPs arrived from Deir-ez-Zor governorate to the camp during the reporting period. With hostilities in Deir-ez-Zor governorate intensifying, more displacement from Deir-ez-Zor into Al-Hasakeh governorate is anticipated. Camp expansion is ongoing including the installation of emergency latrines, but not quickly enough to meet demands.

### **Ain Issa site**

As of end of August, the estimated population of the Ain Issa camp is 9,136 persons, or 1,746 households. The camp capacity is 7,200, however camp expansion plans intended to relieve the current congestion and expand capacity. If approved, expansion work will increase current capacity up to 4,500 IDPs, for a total capacity of 11,700 persons. The planned extension is needed to accommodate IDPs who were asked to vacate schools in the Ain Issa area in preparation for the start of the school year in September. If the expansion is not approved by local authorities, an alternative location for these IDPs will be an urgent priority. Population flows in and out of the camp remain relatively fluid with an estimated 15-20 new households arriving to the camp daily from both Ar-Raqqa and Deir-ez-Zor governorates. Approximately 30-40 households are transiting daily through the camp for one night before heading towards Azaz and Jarablus sub-districts. Camp departures amount to about ten households per day.

### **Al Karama transit site**

In late August, the Karama site was totally evacuated as local authorities allowed IDPs to return to their own homes and the current population in the camp is estimated to be approximately 90 families or roughly 500 people. The camp is close to frontlines and access to the area is a main concern. Furthermore, protection concerns remain due to freedom of movement limitations for the IDPs remaining in the camp due to perceived ISIL affiliations. Since the camp population has decreased, humanitarian assistance has also been scaled down.

### **Al Twehne transit site**

Approximately 2,000 to 3,000 IDPs from rural Homs and Hama are seeking shelter in the Al Twehne transit site. Reports indicate that key response gaps are latrines, showers, waste management, rubble collection and child friendly spaces. IDPs currently sheltered in schools in the Tabqa area may be relocated to Al Twehne transit site before the school year commences. A joint needs assessment is planned for mid-September.

### **Mabrouka site**

As of end of August, the estimated population of Mabrouka site is 14,700 people, of which approximately 90 per cent are from Deir-ez-Zor governorate. The site has exceeded its capacity due to the decongestion of Areesha site. As a result, new arrivals to the Mabrouka site are being temporarily relocated to Al-Hole camp. The large numbers of IDPs gathering around the camp administration office daily in an attempt to be allowed to depart the site has raised security concerns. Large demonstrations have been reported. On average, 250 individuals are allowed to leave the camp each day but long delays are reported. Since 22 August, more than 1,800 individuals have left the camp. Health and nutrition services are available in the camp, however ambulance service continue to be a gap. Food and bread distributions are ongoing, but are not sufficient. Daily water trucking is ongoing and water storage capacity is being increased. Emergency latrines and showers are available, however cleaning is needed. Solid waste management and sanitation continue to be major gaps.

### **Tabqa and Mansoura**

A few IDP families have also arrived on a daily basis to Al-Tabqa and Al Mansoura from both southeastern Ar-Raqqa and rural Deir-ez-Zor. In these areas, the presence of protection partners has so far been extremely limited, including for basic activities such as risk education (MRE) and psychological first aid (PFA).





## Access

In August, UN agencies delivered humanitarian supplies via 109 trucks (UNHCR 18, WHO 3, UNICEF 3, WFP 79, and UNFPA 6) in 33 batches by road from Damascus, Lattakia, Tartous, Homs and Aleppo to Qamishli. Minor delays were experienced while transiting through Menbij.

The UN was informed on 7 September by the Government of Syria that road access to Deir Ez-Zor City has been reopened, areas that were previously only reachable by WFP airdrops. Commercial trucks and some assistance began to arrive into the newly-cleared areas. For the first time in 3 years, SARC reached Deir ez Zor with food and medicines provided by ICRC for 80,000 people in need on 8 September. The UN is currently working with SARC and humanitarian partners to respond to those in need of assistance in Deir-ez-Zor, as soon as security conditions allow. *(At the time of release of this sitrep, UNHCR dispatched 5 trucks loaded with life-saving assistance for 30,000 people, including plastic sheets, solar lamps, kitchen sets and hygiene kits to reach Deir Ez-Zor from Homs)*

In early September, the airdrop operation to Deir-ez-Zor city was discontinued after road access reopened. A total of 309 airdrop rotations delivered more than 6,000 MT of humanitarian supplies to the area between April 2016 and August 2017.

## Humanitarian Response



### Protection

#### Key Developments and Needs

Ongoing military offensives both on Ar-Raqqa and Deir-ez-Zor continue to raise concerns for the protection of civilians, while capacity to monitor and verify first-hand information in affected areas remains extremely limited. In both locations, increasingly poor living conditions due to direct exposure to active hostilities is described as a central trigger for displacement. Through consultations with IDPs who have fled Ar-Raqqa city, information was collected indicating that civilians trapped in the city are confined to their homes, with limited or no access to basic services in ISIL-controlled areas while also suffering from shortages of basic commodities such as bread, potable water and limited access to medical services and livelihood opportunities. As hostilities continued, reports have indicated that the population have resorted to skipping meals, drinking unsafe water or exposed to the risk of being hit by aerial and ground fire while fetching water or moving inside the city.

In Deir-ez-Zor, the conscription campaign launched by ISIL in late July for males aged between 20 and 30 (and more recently even beyond this age), is described as another driver of displacement over the last month. This is in addition to indiscriminate shelling, often without warning, forcing civilians to flee their houses without their belongings.

Smuggling fees, even to reach the nearest SDF checkpoints, are reportedly very high and unaffordable to most, which in turn triggers family separation. Reports of abusive behavior by smugglers, demanding additional fees during the journey while threatening to either abandon IDPs or accuse them of affiliation with ISIL to the local authorities, has also been mentioned. Resorting to smuggling rings, IDPs face an arduous and long journey in the desert, through ever changing exit routes that involves walking long distances with no water or food before reaching checkpoints, while under the constant threat of extortion by the smugglers.

During the month of August, leaving Ar-Raqqa city became increasingly difficult according to IDP reports, due to the encirclement of the area; the absence of safe exit routes (with explosive hazards planted by ISIL to impede the flight, causing multiples injuries and death); and punitive measures implemented by ISIL, such as the announcement that attempted escape would result in the execution of family members, sparing only children under 5, and other reprisals such as physical punishment, confiscation or destruction of assets from families attempting to flee. There were also confirmed reports of casualties among civilians trying to escape as a result of groundstrikes and airstrikes. Despite the risks, some civilians have been able to escape through newly established corridors.

In this context, different factors have a direct influence on the pattern of IDP movements, including the presence of ongoing hostilities, shifting areas of control, ISIL tactics of blocking exit movements and security measures adopted by security forces in SDF-controlled areas.

#### Freedom of movement

In IDP sites in Ar-Raqqa governorate, such as Ain Issa, the fluidity of movements reportedly improved during the month, and many IDP families were seen departing the sites or staying voluntarily so to remain close to their areas

of origin. Despite the distance, IDPs from Deir-ez-Zor reportedly travelled to Ain Issa to access humanitarian assistance. Nonetheless, some IDPs still struggled to access these areas, amidst movement restrictions faced in areas under the control of the Kurdish Self-Administration. In these areas, IDPs were not permitted to proceed unless sponsorship by family members was provided or there was a critical health condition. In Areesheh (Bahra) IDP site prolonged security screenings and restrictions on freedom of movement continued to hamper the referral of urgent medical cases, with serious consequences for the safety of the concerned population. Despite continuous advocacy and support provided by protection teams on the ground to properly sort out and preserve civil documentation, confiscation of personal documentation, when available, persisted and raised concerns about potential loss or destruction. This highlights the need for specific interventions in this area. Cases of smuggling and bribery to leave the site have also been flagged in addition to reported cases of detention and punishment of IDPs attempting to leave the sites in breach of the imposed sponsorship system. The exact circumstances of these incidents needs to be further documented.

According to reports received, IDPs heading for Al Tabqa and Mansoura (retaken from ISIL) were still required to present a sponsorship guarantee to be able to stay in those locations, or were alternatively obliged to go back to their location of origin or to access the Al Touhena site.

### Living conditions in IDP sites

In addition to challenges related to freedom of movement, concerns regarding living conditions in IDP sites have continued to be reported by protection actors, particularly regarding the need to improve gender-sensitive measures in planning, layout and provision of facilities (e.g. gender-segregated WASH facilities, reception areas, distribution points etc.). In addition, protection actors have noted the need to strengthen services for persons with specific needs. In the Areesheh site, OHCHR has reported 5 cases of civilians dying due to a lack of waterharsh conditions and poor access to health care (four civilians including two girls reportedly died in August).

In the Ain Issa site, the presence of a relatively high number of female-headed households requires specific protection interventions, including through the set-up of proper shelter and WASH facilities, and gender-sensitive assistance distribution procedures.

In Al Tabqa and Mansoura, both local communities and IDPs continue to struggle to meet their basic needs, which have not yet been adequately covered by humanitarian partners or the authorities. In these areas, IDPs were reported to live in makeshift housing, drink unsafe water and lack medical support. In addition the widespread contamination of the area with explosive hazards has further exposed IDPs to physical security risks.

Overall, the situation for IDPs in sites remains challenging and requires the continuous presence and attention of protection partners. The extreme poverty of newly arrived IDP families, their lack of self-reliance and the involuntary nature of their stay in sites while waiting for security procedures to be completed, has contributed to the emergence of various negative coping mechanisms. Recruitment of youth and children, as well as cases of child labour and early marriages in exchange for financial resources have been reported.

### Response

Protection actors based in Qamishli and operating in northeast Syria continued to scale up their response with the aim of expanding presence and activities in IDP sites, host communities in Raqqa and Hassakeh governorates, as well as in former ISIL-controlled areas<sup>1</sup>. The main interventions foreseen include: 1) expanding the presence of protection teams, for consultations, analysis, identification of needs, including through mobile activities in newly accessible areas; 2) establishing and strengthening existing static facilities (Community Centres, Satellite Centres, Child Friendly Spaces, Women and Girls Safe Spaces); 3) activities and services for the provision of comprehensive child protection and gender-based violence (GBV) response; 4) support to the conservation and retrieval of personal documentation as well as general awareness raising.

Over the reporting period, protection actors operating both from Qamishli and northeast Syria conducted rapid protection assessments, in particular in Taqba, Mansoura, Rejim Sleby and Al Bahra, on top of the regular monitoring and consultations in Ein Issa, Mabrouka and Areesha sites. A total of 137 protection assessments were conducted in August by one protection partner, with 370 individuals (52 per cent male, 48 per cent female and 39 per cent adult, 61 per cent children) in the sub-districts of Tal Abyad, Ar-Raqqa, Al-Thawra and Ein Issa. These assessments were used to develop a total of four products to inform programming and the response by improving the overall understanding of the protection environment among humanitarian partners operating in the area.

UNHCR and local partners continued to provide a protective presence and support family identification and population records. In addition, UNHCR and local partners continued the sustained advocacy with the site administration to allow the movement of persons with specific and urgent needs who required referral to health facilities and other services, including those run in the Community Centres already operating in Hassakeh governorate. UNHCR and partners further supported the site administration through the sorting and preservation of

<sup>1</sup>The Protection Sector has included those plans in the last update of the Inter-Sector Preparedness and response plan for the Northeast Syria—United Nations Office for the Coordination of Humanitarian Affairs (OCHA)  
Coordination Saves Lives | [www.unocha.org](http://www.unocha.org)

the personal documentation of IDPs retained in the sites. While not endorsing the practice of confiscation of personal documentation, this measure is seen as a critical support to the legal safety of IDPs, including during onwards movement after leaving the sites.

The current child protection response by the UN and other partners has reinforced the network of Child Friendly Spaces (CFS) and mobile teams in Hassakeh and Ar-Raqqa governorate, both in IDP sites and host communities (Tal Abyad- Suluk- Ain Issa and Aljurniyah). This has enabled the provision of structured Psycho Social Support (PSS), case management/referral to specialized services/follow up services to UASC, and Mine Risk Education Awareness. Meanwhile, the child protection response capacity of northeast Syria NGO partners is expanding (child protection case management, PSS and parenting intervention) and is intended to cover Ain Issa cotton centre, Ain Issa village, Suluk and Al Hole camp in September. During August, UNICEF partners operating in Hassakeh and Ar-Raqqa provided structured psychosocial support to 3,205 children through CFS and mobile teams in Selouk, Tal Abyadh, Aljerniah, Ain Issa (city) and in Ain Issa camp and provided mine risk education to 3,288 children and caregivers. NGO case managers, supported by UNICEF, have documented 48 separated and unaccompanied children until August. The child protection response capacity of northeast Syria NGOs partners is also expanding (child protection case management, PSS and parenting intervention).

With regards to gender-based violence(GBV), UNFPA and partners have conducted dedicated missions from Damascus to better ascertain the magnitude of the risks and needs in the IDP sites to stepping up GBV preventive and responsive action. A protection partner was identified to start access negotiations to set-up a women's listening centre in Ain Issa site (cotton centre) to provide GBV, CP case management, PSS and recreational activities. Integrated Protection Mobile teams in Suluk and Ain Issa.

Regarding advocacy, the Protection sector developed Standard Operating Procedures(SOPs) for security screenings and issued a statement on the sponsorship system, calling for its immediate discontinuation. These initiatives complement multiple efforts that were conducted by the Protection sector, on multiple levels, to address restrictions of movement. The SOPs provided practical suggestions that included protection sensitive measures and due process during security screenings and was designed for a military audience. The statement on the sponsorship system reflects the position of the Protection sector on the sponsorship system which leads to unjustified restrictions of movement and has determined the involuntary and prolonged presence of IDPs in sites with the above-mentioned humanitarian consequences. Support from the humanitarian leadership on these advocacy initiatives will be instrumental.

### Key Gaps and Challenges

The operational context for protection actors in the northeast remains challenging and is characterized by active hostilities, fluid and unpredictable displacements of population, the vast geographic areas to cover; and contamination of areas with explosive hazards. The capacity and presence of competent protection partners remains limited.

It is anticipated that these constraints will further increase as areas such as Ar-Raqqa city and areas in its vicinity as well as Deir-ez-Zor become more accessible to humanitarian actors. Bureaucratic requirements remain a major impediment, both in terms of the geographic expansion of protection activities and their concrete implementation, which sometimes trigger additional constraints imposed by the local authorities.



## Food Security and Agriculture

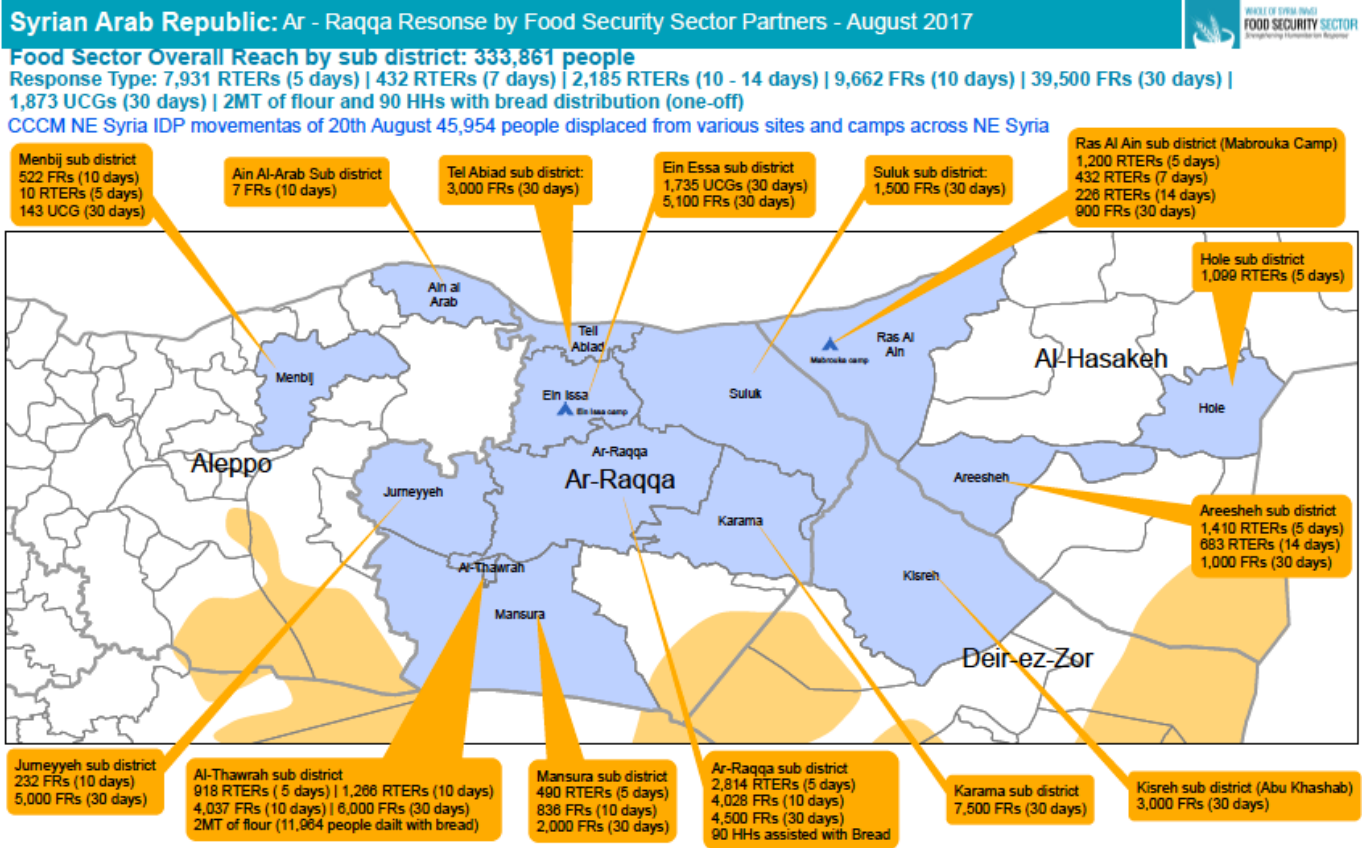
### Response

In total throughout August 2017, the Food Security sector through eight of its partners from Syria (WFP) and NES/Iraq Cross-Border Hub (7 INGOs) have distributed various types of food assistance (food baskets, ready to eat rations, food vouchers, cash grants bread) to an estimated 333,861 beneficiaries across the North-East Syria region affected by the ongoing Ar-Raqqa displacements. Assistance has reached IDPs and host communities located in the governorates of Ar-Raqqa, Aleppo, Al- Hasakeh and Deir-ez-Zor as follows:

- 7,931 ready-to-eat-rations (RTERs) covering food needs for 5 days for a family of 5 were distributed to 39,655 beneficiaries.
- 432 RTERs covering food needs for 7 for 10 days for a family of 6 were distributed to 2,592 beneficiaries.
- 1,276 RTERs covering food needs for 10 days for a family of 6 were distributed to 7,596 beneficiaries.
- 9,662 dry food rations covering food needs for 10 days for a family of 6 were distributed to 55,322 beneficiaries.
- 909 RTERs covering food needs for 14 days for a family of 6 were distributed to 5,454 beneficiaries.
- 39,500 regular food baskets covering food needs for a month for a family of 5 or 6 were distributed to at nearly 200,000 beneficiaries.

- 1,873 unconditional cash grants covering food needs for a month for a family of 6 to 11,268 beneficiaries.
- A total of 2MT of flour was used to distribute bread to an average of 11,964 individuals every day and 90 households (HHs) benefitted through one-off bread distribution.

A total of 2778,678 beneficiaries were reached in August in Ar-Raqqa Governorate, in Tall Abyad, Suluk, Ein Issa, Jurneyyeh, Ath-Thawrah, Karama and Ar-Raqqa sub-districts with food assistance. A total of 37,091 beneficiaries were reached in August in Al-Hasakeh Governorate, in Ras Al-Ayn Al-Hol and Areesheh sub-districts respectively in Mabruka, Al-Hol and Areesheh (Bahara) Camps, and Areesheh surrounding areas. A total of 4,092 beneficiaries were reached in August in Aleppo Governorate, in Menbij and Abu Qalqal sub-districts with food assistance. A total of 15,000 beneficiaries were reached in August in Der ez-Zor Governorate, in Kisreh sub-districts in Abu Khashab and Mkman with food assistance.



**Legend**

- camp
- FRs - Food rations
- RTERs - Ready to Eat Rations
- sub districts reached
- Areas with no or limited population

**Disclaimers:** The boundaries and names shown and the designations used on this map do not imply official endorsement.

**September Plan**

- 10 FSS partners (WFP from Syria Hub and 9 INGOs from NES/Iraq cross-border (XB hub) have prepositioned various types of food assistance modalities across the North East Syria Region (RTERs covering food needs between 5 to 14 days; general food rations (GFRs) covering food needs for a month; Food Vouchers; and Cash Grants) to cover food needs for a total of 486,618 beneficiaries.
- Additionally, two “micro plans” for both Areesheh and Twehina Transit Camps have been established to ensure maximum and regular coverage of IDPs arriving and residing in these camps with specific allocations, including back-up responders for new influxes of IDPs. These micro plans are also being established for Ein Issa and Mabroukra given the recent substantial influxes of IDPs in these two sites.
- Similar close field coordination mechanisms are being put in place for Tabqa and Mansoura City and surroundings.
- Regarding ar-Raqqa city and potential food assistance availability, four partners (3 XB+WFP) have expressed intention to cover ar-Raqqa City - providing security measures are in place and safe and consistent access is guaranteed. The XB partners reported a stock of 10,000 Dry Food Rations to cover food needs for 10 days for a family of 6. This demonstrates that the sector has readiness to provide immediate access to food for up to 60,000 people. WFP stands ready to provide RTERs to cover food needs for 5 days for a HH of 5 as immediate response (after needs assessments conducted – e.g. to cover the estimated range of 20,000 to 50,000 people).



## Gaps

- The September plan shows that the sector through its partners is able to address some of the gaps identified in August in relation to flour and geographical areas (such as inclusion of Areeshah Camp and expansion in some critical villages around ar-Raqqa City).
- The plans for September as submitted by partners are sufficient to meet the projected caseload, but efforts will be ongoing as new areas for responding will emerge.
- The use of Cash-Based Response Modality, such as Food Vouchers and Cash Grants continues to be used in the September Response Plan by some partners. In addition, local procurement and market-based approaches - wherever feasible - are increasing in the North East Syria region and are well handled by partners.
- Some of the main gaps identified by the Food Security Sector are:
  - Coverage of Menbij District – in camps, informal settlements and host communities.
  - Coverage of increasing needs in Tabqa City and surroundings due to large IDPs influxes and heavy strain on host communities already greatly affected by the conflict.
  - Coverage of villages around Raqqa City (north, south, east and west), that have not been either sufficiently or regularly covered or reached at all, due to security risks and large presence of IEDs, UXO and ERWs.



## Health

### Key Developments and response

#### 1) Polio outbreak:

As of 29 August, the total number of cVDPV2 cases is 39. All confirmed cases to date have had onset of paralysis before 14 July 2017. Final lab results are pending for an additional 5 poliovirus type-2 (PV2) isolates (3 from Mayadeen and 1 from Boukamal districts, Deir Ez-Zor governorate, and 1 from Thawra district, Raqqa governorate). The total number of AFP cases detected in Deir Ez-Zor governorate since the beginning of 2017 is 127 (94 from Mayadeen, 10 from Deir Ez-Zor, and 23 from Boukamal districts). Raqqa governorate has reported 16 AFP cases (5 from Raqqa, 10 from Tell Abyad, and 1 from Thawra districts).

The second round of immunization in Deir Ez-Zor started on 22 August and concluded on 28 August. WHO has organized the redistribution of vaccines and mapping of population movements to increase reach. An additional 90,000 mOPV2 doses are being transported from Damascus to Deir Ez-Zor, to cater for population influxes from As-Sukhnah, Homs governorate, and Al-Qa'im in Iraq. According to administrative data, a total of 252,768 children under 5 years of age were vaccinated with mOPV2, representing 77% of the target number. A total of 81,002 children between 2-23 months of age were vaccinated with IPV representing 71% of the target. Preparations for the second immunization round for Raqqa are underway.

#### 2) Health surveillance:

Actions taken to date to the strengthen diseases surveillance in Raqqa governorate included:

- 30 staff from DoH and NGOs from Ar Raqqa governorate underwent a training on polio surveillance, cVDPV2, immediate reporting.
- Collect EWARS weekly reports from 12 sentinel site in Tal Abiad, and Tabqa in Raqqa, 55 sentinel sites in Deir-ez-Zor, and 48 in Hassakeh.
- As a preparedness measure to potential Cholera outbreak, WHO provided EWARS reporting sites with rapid diagnosis tests, WHO provided 2 IDD kits to Al-Mayadin in Deir-ez-Zor, 2 IDD kits and 5 ORS kits to Qamishly.
- WHO focal point and EWARS assistant in Raqqa collaborated with UNICEF in the distribution of aqua tabs among IDPs camps in Raqqa;
- WHO recruited second EWARS assistant to facilitate the collection of EWARS weekly reports from all targeted areas in Raqqa governorate. Efforts are still going on to increase the number of reporting sites in the northern areas of Raqqa.
- In terms of WASH, WHO developed a protocol for water quality monitoring at camps in the NES area and coordinated with UNICEF and UNHCR to conduct field water quality testing on drinking water distributed in camp reservoirs. WHO also provided the field monitoring instruments and necessary probes to implement the developed protocol for water quality testing and disinfecting to all agencies.

#### 3) Mabrouka Camp:

Reports from Mabrouka camp in the last week of August included:

- Many cases of Acute Watery Diarrhea (AWD) with high temperatures

- Kids Malnutrition and dehydration
- Typhoid cases
- Acute Flaccid Paralysis cases
- No ambulance service at night and people suffer especially after working hours.
- Shortage of pediatric drugs including anti vomiting- Anti diarrhea- Urinary infections- Painkilling drugs- Overall infections

Two mobile teams supported by UNICEF were sent to Mabrouka camp for surveillance regarding suspected polio and acute diarrhoea cases. Both teams did not find any suspected polio or cholera cases. Al Hassakeh DoH was informed about AWD and AFP cases. The communicable disease surveillance team conducted a field visit to the camp to fill the investigation forms and collect stool samples from suspected cases. UNICEF, UNFPA, WHO and NGO partners are providing health and nutrition services in the camp and first aid after working hours

#### 4) Al Areesha transit site:

- NGO partners are setting up 2 primary health care centers: one is providing general / pediatric consultations: 2 GPs, 2 pediatricians, 4 nurses, 2 pharmacists, 6 paramedics, 6 drivers, 2 guards and 2 cleaners and one providing BEmOC (Basic Emergency Obstetric Care): 2 doctors, 4 midwives/nurses, 2 paramedics and 2 guards and three musicalized ambulances to ensure referrals.
- Service provision started on August 28<sup>th</sup> : 206 consultations were provided in the maternity, most of them were Ante Natal Consultations and 1598 general consultations, including 31 trauma cases.
- To respond to reported cases of scabies in Al Areesha transit camp, WHO supported mobile teams identified 27 scabies; 98 leishmaniasis cases and a spread of lice among IDPs. The teams screened the whole site; provided the necessary treatment for scabies with the required registration; provided awareness information; distributed lice shampoo and monitors the situation on a daily basis.

#### 5) Trauma Response / support to referral hospitals:

WHO's recent assessment of trauma response capacity in Ar-Raqqa governorate shows an urgent need to establish referral pathways and scale up ambulance services for injured patients from the outskirts of Ar-Raqqa city to hospitals and health care facilities to the north, east and west. The establishment of trauma stabilization points close to the frontline, supported by ambulance services, is key to improving critically wounded patients' chances of survival.

Hospitals need to be supported to handle the increased workloads. Hospitals that previously provided good tertiary care are located in Ar-Raqqa city, and are no longer available. Other hospitals in the area lack power supplies and face critical shortages in essential medicines and supplies. Many X-ray machines – a critical requirement for trauma care – are out of order. Large numbers of civilians are fleeing to the town of Tabqa, north-west of Ar Raqqa city. Preliminary findings of the inter-agency assessment in Tabqa indicate: the national hospital functions partially and it receives only critical cases; provides limited emergency services, transfers cases to hospitals in Tal Abyad and Ain Arab. 96 doctors are currently in Tabqa city, with many of them opening private practices. There are 41 functioning pharmacies, of which only 10 are officially registered. 1 private hospital (Al Rahman) is functional and two radiology centers (no MRI and CT scan services). There are 29 private laboratories and 20 drugs warehouses. There is a general lack of non communicable diseases medicines. Most of services are fee based. The NES health working group is coordinating the establishment of a trauma sub working group to scale up the response.

Partners in NES, continue to support Tal Abyad and Ras El Ain hospitals (HR and medical supplies). WHO delivered 12 tons of health supplies to Tal Abyad public hospital in Ar Raqqa governorate (Wheelchairs; Fresenius Dialysis Machine; Microscope; Baby incubator; 3 Convection Incubators; Electrocardiograph; nebulizer; Centrifuge; Monitor Device; Infant Ventilator; Antibiotics (oral, injectable and topical); Psychiatric medications; IV fluids (Glucose and Normal saline); anesthetics; Therapeutic; 1 Family doctor kit; 1 Interagency Emergency Health kit; 450 Hemodialysis sessions.



## Nutrition

### Key Developments

Nutrition partners together with UNICEF conducted MUAC screenings for children under five years old in the Areesha, Mabrouka and Al Hole camps. Of the 1,210 children screened, 100 (8.2 per cent) were identified with acute malnutrition and treated. 36 children (2.9 per cent) presented with severe acute malnutrition (SAM) and 64 children (5.2 per cent) presented with moderate acute malnutrition (MAM).

UNICEF established new CMAM centres in Al Hole, Mabrouka and Areesha camps, as a result of increasing numbers of children presenting with malnutrition in those camps.

## Response

In August, 3,433 children between 6 and 59 months, and pregnant and lactating women received lipid based nutrient supplements (LNS) in Suluk, Tell Abyad, Al-Jurniyyeh, Ar-Raqqa farms and Abu Khashab. 31,993 women and children in Al-Karamah, Mabrouka, Areesheh Transit Camp, Ein Issa Camp, Al-Thawrah and Ar-Raqqa received LNS, micronutrient supplements and/or high energy biscuits.

The sector partners together with the UNICEF focal point in Qamishli made several visits during August to Mabrouka, Areesha, Al Hole and Ein Issa camps in order to assess the ongoing nutrition activities and also identify gaps in the nutrition response. In addition to the ongoing emergency nutrition activities in these four camps, the Qamishli sub-sector has put together a plan to carry out regular nutritional screening for new arrivals at camp reception with management of malnutrition cases, provision of nutrient supplements among children under five and pregnant and lactating women and follow-up on promotion and counselling of optimal breastfeeding and control of unsolicited distribution of infant formula.

## Key Gaps and Challenges

Access to Raqqa city and Karama IDP camp remains a challenge for partners to deliver and maintain regular and comprehensive nutrition services including prevention of under-nutrition and micronutrient deficiencies, promotion of optimal feeding practices as well as identification and treatment of acute malnutrition.

The high in/out fluctuations of the population in IDP camps (particularly in Areesha camp) is challenging for the management of acute malnutrition and follow up.



## Shelter NFI

### Response

#### Ain Issa camp

During the reporting period, construction of communal kitchens and road lighting works were completed. UNHCR is awaiting permission to begin construction on the expansion of the site to increase capacity for an additional 3,300 individuals. Cooking fuel for communal kitchens is needed.

#### Mabrouka camp

During the reporting period, construction communal kitchens, perimeter fence, reception area and road lighting was completed. In terms of response gaps, cooking fuel for the communal kitchens is needed.

#### Areesha camp

During the reporting period, UNHCR completed the second phase of site preparation for the camp. Phase one work continues to progress with an estimated 30 per cent of road lighting completed. 850 tents were relocated and organised as per the site plan. To date, five emergency latrine blocks have been installed. Construction of the reception area and 87 communal tented kitchens will be completed in September. Site cleaning is ongoing.

### September Plans

- Cash transfer for 1,000 households to support basic needs planned for Ras Al Ain; and
- Emergency cash to support purchase of NFIs in 10 locations in the Raqqa Farms villages area. Distribution will support both IDPs and host communities.

## WASH



### Key Developments

The WASH Working Group Monthly Meeting took place in Tell Abiad on 29 August 2017 and was attended by most northeast Syria WASH actors, with the exception of UNICEF. IMAPs/NES NGO Forum also attended. The main goal of the meeting was to agree on a common response matrix incorporating UN and INGO information, with agreement that the INGO information would be anonymized.

### Response

#### Mabrouka camp

Despite an increase in overall water provisions to account for the increase in the camp's population, the water provision per person/day has decreased from 35-40 litres during the first half of the month to 25-30 litres per person/day in the second half of the month. The network to support and ultimately relieve water trucking will be up and running by the end of September. There are approximately 150 showers and 200 functional latrines in the camp. Improvements to WASH infrastructure in the camp is ongoing, with construction of 100 concrete latrines and 100 concrete showers roughly 60 per cent complete, while the installation of 25 1m<sup>3</sup> and 25 2m<sup>3</sup> water tanks 90 per cent complete. A sewage system network covering 8km is also under construction and estimated to be 85 per cent complete as of beginning of September. Regular cleaning of WASH facilities and hygiene promotion campaigns are ongoing in the camp, with a total of 2,894 hygiene kits distributed in the camp as of the last week of August.

### Ein Issa camp

Water tankers continue to deliver approximately 200m<sup>3</sup> of water per day. On average, the water network provides 150 - 200m<sup>3</sup> of water a day, or 40 to 50 liters of water per person/day, depending upon the number of new arrivals on any given day. The plan is for INGOs to alternate on water trucking. There is also ongoing chlorination of water and water quality monitoring. An additional borehole has been drilled, with the ongoing extension of the existing network intended to keep pace with the increasing influx of new arrivals. Paid cleaning of sanitation facilities continues through a team of 70 cleaners and four supervisors. An additional 100 latrines and 100 concrete showers are 75 per cent complete. During the period of August 300-400 m<sup>3</sup> of solid waste has been removed from the camp, with desludging of latrines ongoing. The 8,000 metre sewage system network is 75 per cent complete. The distribution of hygiene kits is ongoing with a total of 1,700 kits distributed as of the last week of August.

### Karama Site

During the reporting period, UNICEF continued to provide water trucking, delivering approximately 300,000 litres of water to the camp per day, or 17-20 litres per person/day. The distribution of hygiene kits is ongoing, with a total of 14,300 hygiene kits distributed, 1,500 of which were distributed in August. The population of the site is declining.

### Areesheh (Bahra) site

As the number of IDPs increased, the water trucking was increased from 200,000 liters per day as of 15th August to approaching 300,000 litres per day as of the end of the month. The installation of 180 emergency latrines and 48 emergency showers has been completed. The distribution of hygiene supplies is ongoing, with a total of 2,000 hygiene kits distributed over the month. Garbage collection campaigns started on 16 August and will continue on a weekly basis.

### Al-Hole camp:

Water trucking is ongoing, with approximately 350,000 litres delivered to the camp per day. Improvements to the WASH infrastructure in the camp are ongoing, with the installation of 264 concrete toilets and 264 concrete showers is almost complete, while the installation of 66 water tanks with 1m<sup>3</sup> capacity and 66 water tanks with 2m<sup>3</sup> capacity stands to be completed by beginning of September. In addition, the installation of 100 emergency toilet and 48 emergency showers has been completed. The construction of a 7.3 km sewage networks is ongoing, with approximately 80 percent complete. This distribution of hygiene kits is ongoing, with some 5,359 hygiene kits and 4,792 baby diapers distributed in August.

### Tabqa:

In August some 1,475 hygiene kits were distributed in Tabqa city. Rehabilitation on the the main water treatment facility in Tabqa has commenced, in collaboration with the Water Authority and MoWR. In addition, liquid chlorine has been delivered to support this water treatment facility. Partners continue to support city cleaning and waste removal through the provision of hygiene promotion sessions.

### Gaps and Challenges

Maintaining the regular operation and maintenance of installed WASH facilities has proved challenging due to the lack of clear accountability mechanism for camp coordination and camp management in all temporary IDP settings.

The northeast Syria WASH Working Group Coordination meeting on the 29 August agreed to address this, and duly nominated organisation focal points for WASH input on camp coordination.



## Education

### Response

As a part of Back to Learning (BTL) campaign, UNICEF and an NGO supported school age IDP/returnee children through the provision of school bags and stationery. During the month of August, a total of 8,160 school-age IDP/returnee children (4,427 boys and 3,733 girls) have benefited from the support in the sub-districts of Al-Thawrah, Mansura, Jurneyyeh, and Karama as well as Ein Issa and Mabrouka camps. In addition, more than 700 children



attending Child Friendly Space (CFS) in Ein Issa and Mabrouka camps benefited from 100 comic books with which youth volunteers organize reading/recreational sessions.

## September Plan

- UNICEF and Directorate of Education (DoE) Ar-Raqqa are planning to commence the rehabilitation work for 10 schools in Tell Abiad sub-district in September to provide safe and protective learning environment for children in both IDP and host communities.
- UNICEF and GOPA are planning to open temporary learning spaces for school age children in Ein Issa and Mabrouka camps. Age coverage is to be determined in coordination with other education partners operating in the camps.
- UNICEF and Al Birr wa Al Ihsan continues BTL campaign in Ar-Raqqa along with a nation-wide campaign across Syria on the occasion of the opening of 2017-2018 school year.

## Gaps

Access to education opportunities is a primary concern for school age IDP children, whether they are in transit camps, in unofficial settlements, or hosted by communities. Majority of children who have returned to their home towns in newly accessible areas of Ar-Raqqa neither have access to schools/learning opportunities to date. The situation has been aggravated by the additional influx of civilians including school age children daily arriving from Deir-ez-Zor to Al Hasakeh.

While the number of IDP/returnee school age children in dire need of education support is ever increasing, the limited capacity of education partners in the region poses a great challenge on the education sector. The capacity of education partners in Al Hasakeh, which has been playing a major role in response, has been already stretched out.



## Logistics

### Response

During the month of August, UN agencies managed to transport humanitarian supplies via 109 trucks (UNHCR 18, WHO 3, UNICEF 3, WFP 79, and UNFPA 6) in 33 batches by road from Damascus, Lattakia, Tartous, Homs and Aleppo to Qamishli. The Logistics Cluster will continue providing free-to-user land transport to Qamishli for humanitarian supplies during the month of September.

The Logistics Cluster continues to provide logistics coordination and information management to identify gaps and bottlenecks and avoid duplication of efforts and facilitates 'no cost to user' land transport for UN food and non-food humanitarian supplies. In early September, the airdrop operation to Deir-ez-Zor city was discontinued after road access reopened. A total of 309 airdrop rotations delivered more than 6,000 MT of humanitarian supplies to the area between April 2016 and August 2017.

### Gaps and Constraints

Minor delays have been experienced at Menbij on the way to Qamishli.



## Cross-Cutting Operational Challenges

Humanitarian actors face significant challenges in responding to needs in North-East Syria. Key challenges include:

- **Access and insecurity:** access to vulnerable communities, particularly in and around Raqqa city, remain challenging due to insecurity and active hostilities.
- **High levels of explosive hazards contamination:** the contamination level in newly-seized areas is considered very high, particularly in Ar-Raqqa City and in Deir-ez-Zor roads, towns and large population centers. This poses a threat both to civilian populations as well as to humanitarian actors aiming to assist them. A mechanism to demarcate and declare areas cleared and safe for humanitarian actors and the population continues to be necessary.
- **Policy environment:** humanitarian actors also face challenges related to the policies being implemented by local authorities with regards to IDP management particularly those affecting freedom of movement. These policies are contributing to the deteriorating humanitarian situation and hampering humanitarian actors' ability to engage beyond life-saving support in certain settings.

- **Scalability:** The scalability of the supply line remains limited and unpredictable. Increasing population displacements and humanitarian needs will further strain current capacities and require a scale up of supplies, humanitarian partners and reach. The availability of certain supplies – such as life-saving trauma kits -has been particularly hard hit because of access problems.
- **Funding limitations:** additional funding is still required to increase reception capacities in key sites and the number of people that can be assisted monthly with basic goods and services.

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