

## Highlights

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- Insecurity and fierce hostilities continue to endanger people in east Ghouta raising serious concerns for the protection of civilians in the area. Between 15 and 16 March, aerial bombardment on Kafr Batna, Saqba, Zamalka, Arbin and Hezzeh reportedly resulted in scores of civilian deaths and injuries.
- Since 11 March, at least 20,000 people reportedly left east Ghouta. The majority of those leaving are from the Hamouriyeh area. Those who left include at least 51 medical evacuations being treated in hospitals.
- Most of the people interviewed at the Dweir shelter had some health conditions (intestinal infections, hepatitis, skin disease, trauma) likely due to years of lack of access to medicine and health care.
- UN teams have been visiting the three collective shelters (Dweir, Adra and Herjelleh) in Rural Damascus where people who have left East Ghouta are staying.
- The UN has delivered emergency items such as food and nutrition items, NFIs, shelter, medical supplies and is supporting health and nutrition, WASH, education, protection and children protection services.
- SARC responded to the unexpected large number of arrivals and the UN is supporting with additional supplies as requested by SARC. Many supplies have already been delivered and distributed at the shelters, although more is needed given the scale of displacement.
- On 15 March, a UN/SARC/ICRC convoy delivered food assistance for 26,100 people in need in Duma. However, far more humanitarian assistance is needed in terms of other sectoral assistance and to other areas of the enclave. Most importantly, it is imperative a cessation of hostilities, as mandated by UNSC 2401 be implemented without delay.

## Situation Overview

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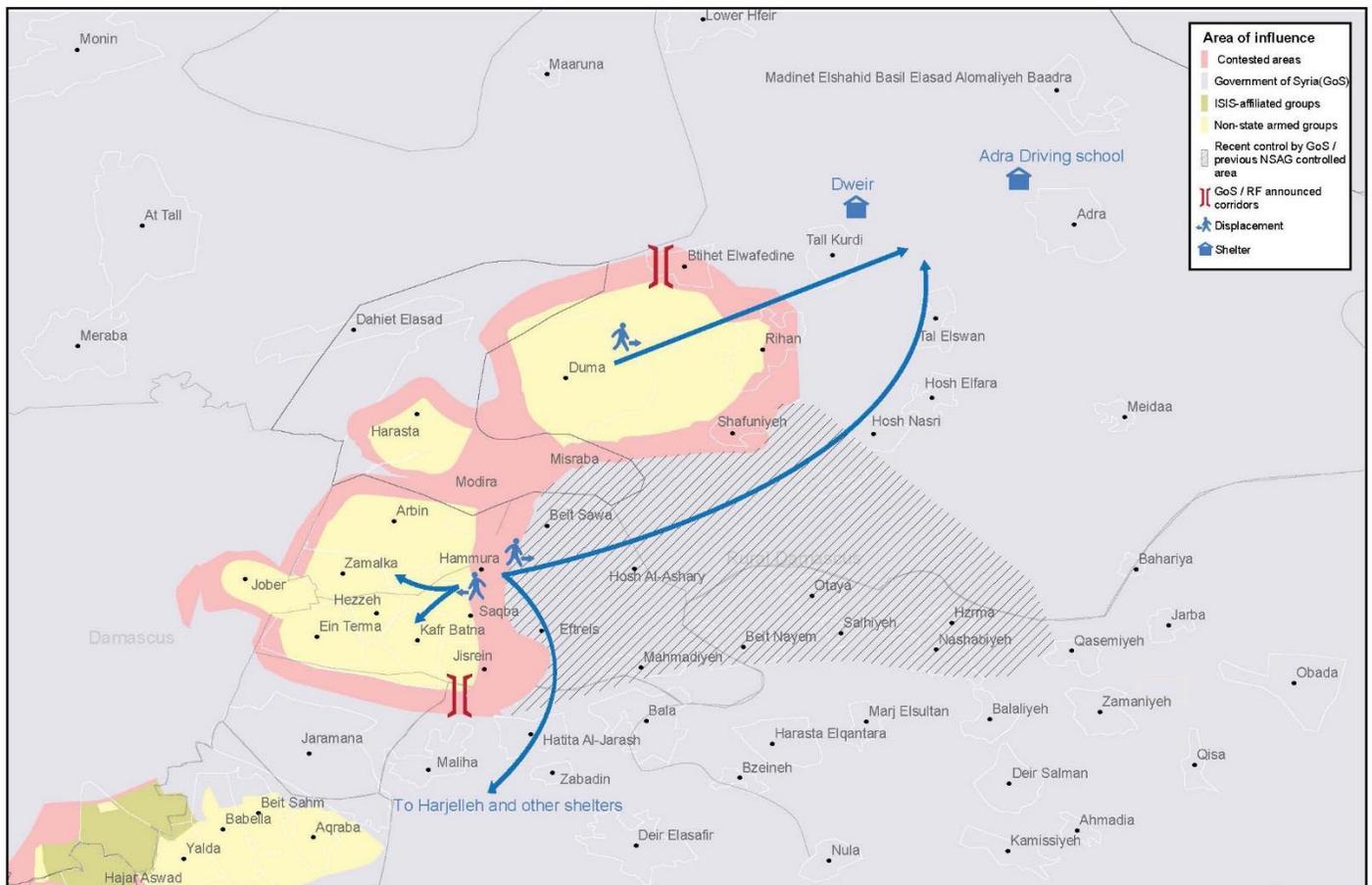
Insecurity and fierce hostilities continue to endanger people in East Ghouta raising serious concerns for the protection of civilians in the area. Clashes between Government of Syria (GoS) and Non-State Armed Groups (NSAG) were reported, with GoS forces reportedly taking full control over Hamouriyeh (or Hammura) town, as well as parts of Saqba town. In the northern part of the enclave, GoS forces reportedly advanced to the frontline into Al-Reyhan village, east of Duma city. Aerial bombardments on Arbin, Zamalka and Hezzeh were reported between 15 and 17 March. Zamalka was particularly affected by ground and air strikes reportedly killing 20 people, according to local sources. On 16 March, air strikes on Kafr Batna and Sabqa reportedly resulted in scores of civilian deaths and injuries.

Since 11 March, an estimated 20,000 people left East Ghouta. The majority of those leaving are from the Hamouriyeh (or Hammura) area, given the fierce fighting and damage to civilian infrastructure. An estimated 600 to 700 people were evacuated from Duma, among them 51 patients who were admitted to Al Mujtahed Hospital and Al Hilal Al Ahmar Hospital as of 16 March. Two patients, children aged 1.5 and 7 years old, were initially without companions, so UNICEF received approvals to send adult focal points to the hospital. Family unity for medical evacuees should be maintained. On 17 March, people exited from East Harasta; according to media sources the number of displaced is over 300 people. SARC is collecting and tracking patient information, but it is not known at this stage how many of the patients are part of the list of 77 priority medical evacuation cases put together by East Ghouta health actors. The exact number of people who have exited East Ghouta is not known, nor are the destinations of all evacuees, as registration in collective shelters is ongoing. The UN is not involved in registration.

While the number of people evacuating East Ghouta is expected to increase, the UN reiterates that mass evacuations of civilians should remain a last resort as per international humanitarian law. Moreover, protection concerns remain regarding the conditions around the evacuation of civilians in terms of the existence of guarantees that ensure a safe and voluntary exit of civilians, including freedom of movement and their ability to return to their homes. Civilians who choose to remain must also be assisted and protected in accordance to international humanitarian law, including access to humanitarian assistance and services.

Internally displaced people are currently being hosted at three main collective shelters: Dweir, Herjelleh, and Adra. Most of the people interviewed at the Dweir collective shelter had some health conditions (intestinal infections, hepatitis, skin disease, trauma) due to years of lack of access to medicine and healthcare. Most children and women suffered from scabies and lice and many are suffering from severe and moderate malnutrition. Immediate priorities include conducting a comprehensive health screening for all the people in collective shelters to prevent the spread of disease, and provide mental health support, and reproductive health and nutrition services.

For people who remain in each of the three enclaved areas of East Ghouta, their situation is dire. There is limited food, with reports of the usual ration of bread for one day being consumed over the period of a week to ten days; insufficient sanitation and hygiene support for those living in basements, and increased risk of communicable disease given these conditions. On 16 March, OCHA received reports of a continuing desperate situation in East Ghouta where surgical interventions are taking place without anesthesia, suturing is being done with household items, and patients are reportedly recovering in basements, as medical facilities are unsafe. The conditions in underground shelters are unsanitary and are worsening as they seek to accommodate many of the internally displaced.



East Ghouta recent developments as of 16 March 2018. All changes may not be reflected due to fluidity of developments,

## Humanitarian Needs and Response

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On 15 March, a UN/SARC/ICRC convoy delivered food assistance for 26,100 people in need Duma in East Ghouta. However, far more is needed, including medical, health and WASH supplies, for people in need in Duma and for those living in other areas of East Ghouta such as Arbin, Kafr Batna and East Harasta. The 15 March convoy follows a convoy last week that delivered food assistance for 27,500 people, as well as limited health and nutrition items. Most importantly, it is imperative a cessation of hostilities, as mandated by UNSC Resolution 2401 be immediately implemented and that further humanitarian assistance is delivered without delay. The UN stands ready to deliver humanitarian assistance throughout East Ghouta.

While the UN did not observe the large wave of evacuations from Hamouriyeh between 14 and 16 March, UN teams have been visiting the three collective shelters. The UN is supporting SARC with the response, and has delivered emergency items such as food and nutrition items, NFIs, WASH, and medical supplies and is supporting health and nutrition, WASH, education, protection and children protection services.

### **Dweir collective shelter**

The people who displaced are accommodated in a space that were previously rehabilitated and partitioned by UNHCR and IOM. The rooms were assessed as being in relatively good condition, and water and electricity are available. Minor rehabilitation is needed to ensure protection and privacy. An open area has been identified by SARC in which UNHCR shelter kits can be used to install more than 100 additional rooms.

In terms of health, the site is served with two SARC mobile clinics, an ambulance, and a doctor and nurses on site. WHO has provided medical equipment and medicine to support health needs in the Dweir collective center. The displaced have also received some shelter and non-food items from UNHCR, WASH and nutrition items from UNICEF, and WFP has sent 2,500 Ready To Eat food rations. Mobile clinics and Ministry of Health clinics were treating evacuees and vaccinating children under five. In total, the number of IDPs at Dweir are estimated at 3,700.

### **Herjelleh collective shelter**

The Herjelleh collective shelter was set-up by UNHCR to respond to earlier evacuations a few years ago. Each unit has two rooms, a bathroom and a kitchen. It is reportedly currently hosting 7,500 people from East Ghouta, which is above its estimated capacity of 6,000 people. Thus, many of the displaced are currently sleeping in the open. Urgent efforts are ongoing to find a shelter solution at the centre to accommodate additional displaced people.

WFP has provided 2,000 Ready To Eat food rations and UNHCR has provided NFIs, such as plastic sheets, mattresses, blankets, kitchen sets, winter clothes and solar lamps. UNICEF is undertaking light rehabilitation of water fixtures in units where needed and is providing water through water trucking. Water tanks for each unit are being installed and toilets in the accommodation units are in good working order. 250 cleaning kits have been provided.

Herjelleh has a health centre and UNICEF has provided supplies sufficient to cover till the end of the March to respond to the needs of displaced people. A health and nutrition team is deployed to provide services inside the shelter.

### **Adra Reception Center**

Displaced people were brought to this location on the evening of 15 March. The site was estimated to have the capacity to host up to 5,000 people, however, an estimated 8,000 people have arrived at the shelter. The Adra

reception center, which comprises of three schools, are in poor condition with an urgent need for rehabilitation to bring it up to standard. Generators are needed as there is no electricity.

UNICEF is delivering small water tanks for existing toilets and is installing a number of prefab toilets. A water tank has reached the shelter to be installed by 17 March. Reparation of water systems and pipes/taps began on 16 March. Water trucking has started and will continue and 3,000 cleaning kits have been delivered.

WFP has delivered 5,500 Ready To Eat rations and UNHCR has provided NFIs, including blankets, mattresses, plastic sheets, kitchen sets, winter clothes and solar lamps among others and 500 hygiene kits.

The Department of Health and an NGO partner sent one health and nutrition team to the site with support from UNICEF. A partner child protection mobile team was dispatched to the location jointly with UNICEF to carry out assessments and case management. Brochures on prevention of family separation are being delivered.

A fourth collective shelter at Adra, the Electricity Institution Reception Center, was identified where there are currently no IDPs, but is being prepared for future new arrivals. It has a capacity to host 5,000 people once rehabilitation work has been completed.

**For further information, please contact:**

**Kristele Younes**, Head of Office, OCHA Syria, [younes4@un.org](mailto:younes4@un.org)

**Linda Tom**, Public Information Officer, OCHA Syria, [toml@un.org](mailto:toml@un.org)

For more information, please visit [www.unocha.org/syria](http://www.unocha.org/syria) [www.reliefweb.int](http://www.reliefweb.int)