

Situation Overview: Deir-ez-Zor Governorate

NORTHEAST SYRIA, JUNE 2020

OVERVIEW

Significant information gaps on the humanitarian situation across Deir-ez-Zor governorate remain. This report seeks to provide an overview of the humanitarian situation and needs of residents and internally displaced persons (IDPs) living in communities, sites and settlements across non-government-held areas of the governorate. The report brings together findings from three REACH assessments all undertaken in June 2020: the **Humanitarian Situation Overview in Syria (HSOS)** (data collected between 1-16 June); the **Market Monitoring exercise** (8-16 June); and an **Informal settlements & COVID-19 vulnerability assessment** (15-24 June). Please refer to the **last page** of this report for an overview of the Situation Overview objectives, as well as methodologies of the multiple assessments that contributed to the analysis. Due to the key informant (KI) methodology used, findings are not statistically representative and should only be considered as indicative of the situation in assessed locations.

KEY HIGHLIGHTS

Deir-ez-Zor governorate faces a continued volatile security situation¹ that reduces humanitarian access and hinders optimal deployment of aid. The economic downturn and threat of a potential COVID-19 outbreak interact to increase community vulnerabilities and needs.

General and widespread difficulties to meet basic needs were reported by KIs across the governorate in relation to resident populations as well as IDPs living in host communities and informal settlements.² Unaffordability of basic items and services such as soap, water, healthcare and food were reported by KIs in both communities and settlements. Findings relating to household financial strain were confirmed by market monitoring data, which highlighted a 35% increase in the cost of the survival minimum expenditure basket (SMEB) in the governorate since May 2020 only, mainly due to the Syrian Pound depreciation.

The difficulties reportedly faced by all populations in meeting basic needs in an unstable economic context are resulting in heightened risk of resorting to negative coping strategies. Across assessed locations, KIs in both communities and informal settlements all reported child labour and early marriage as protection risks for residents and IDPs. Household economic pressure likely increases child protection risks, as child labour and early or forced marriage were listed as a coping strategy for lack of income in more than 80% of communities.

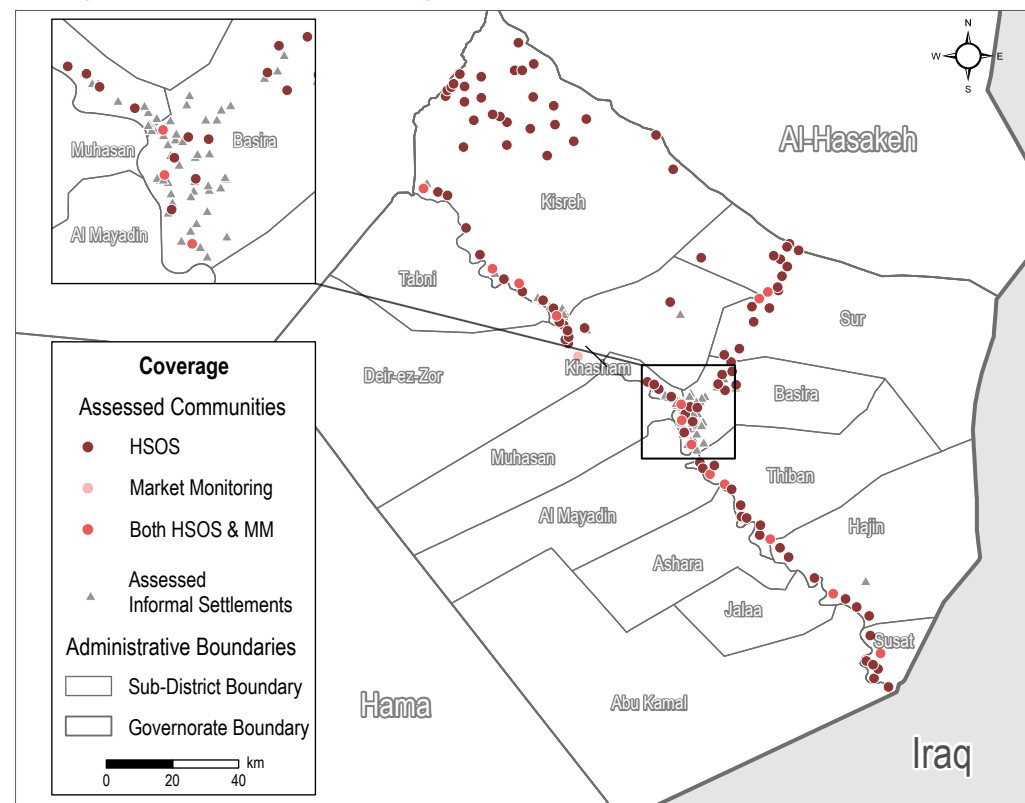
Priority needs for residents as reported by KIs were livelihoods, health, and water, sanitation and hygiene (WASH). However, priority needs for IDPs in sites and settlements as well as in host communities were food, livelihoods, and shelter. The differences in priority needs likely reflect each population groups' respective divergent living conditions; food listed as the highest priority need likely indicates increased levels of vulnerability overall.

Finally, significant barriers to accessing healthcare, water and key hygiene items were reported, which is of concern in light of a potential COVID-19 outbreak. In informal settlements, low levels of awareness and knowledge about COVID-19 were reported, as well as insufficient access to soap and handwashing facilities.

SECTOR SPECIFIC FINDINGS

Food: Findings revealed widespread food needs for populations in both communities and sites and settlements. Unaffordability of food items in a context of prices inflation was reported as the main barrier to accessing sufficient food.

Coverage map (for HSOS, market monitoring and assessment in informal site settlements):



Livelihoods: Insufficient income to meet basic needs was highlighted as a major constraint for both residents and IDPs in Deir-ez-Zor. Enhancing livelihoods support would help supporting households' resilience in securing sufficient, stable and non-harmful sources of income.

Health: Healthcare facilities were reportedly accessible in all assessed sites and settlements, while populations in communities could access facilities either in their community or in nearby communities. However, unaffordability of health services and/or of transportation were highly reported in communities, while the lack of medicines for chronic diseases was a noted gap among KIs in sites and settlements.

Shelter: Shelter support remains a key priority for IDPs across assessed locations, with KIs in 80% of IDP-hosting communities and 31% of assessed settlements reporting it as a priority need.

WASH: Access to water was reportedly not guaranteed for all households in both communities and sites and settlements. While access to hygiene items in communities was reportedly limited by high prices, a lack of access to soap and handwashing facilities were also reported for IDPs in sites and settlements.

Protection: Child labour and early or forced marriage were reported in all assessed communities and sites and settlements as protection risks for both IDPs and residents.

1. International Crisis Group (October 2019). Averting an ISIS Resurgence in Iraq and Syria. Retrieved from <https://www.crisisgroup.org/>

2. Informal settlements are defined by the Sites and Settlements Working Group (SSWG) as a spontaneous grouping of tents or other housing units (5+ HHs). Settlements are usually without the presence of a dedicated Camp Administration and do not have static Camp Management, though mobile camp management activities may cover the settlement.

PRIORITY NEEDS AND HUMANITARIAN ASSISTANCE

Top four most reported priority needs for residents and IDPs in assessed communities:

Residents (by proportion of assessed communities where reported) ³			IDPs (by proportion of assessed IDP-hosting communities where reported) ³		
1	Livelihoods	94%	1	Food	86%
2	Health	79%	2	Livelihoods	80%
3	WASH	45%	2	Shelter	80%
4	Food	43%	3	Health	30%

83%

Proportion of assessed communities where it was reported that humanitarian assistance was received in the 30 days prior to data collection.

KIs in 90 assessed communities (83%) reported that households were able to access humanitarian assistance in the community in the month prior to data collection. The most commonly reported types of assistance provided to households was food and nutrition (90 assessed communities, 100%), with WASH and cash assistance each reported in only one community (1%³). Despite the relatively high coverage of humanitarian assistance, the reported modalities of support do not seem to reflect the multi-sectoral challenges faced by communities, as shown by the selection of priority needs.

In the 90 assessed communities where assistance was reportedly accessible, the main barriers to accessing humanitarian assistance were reportedly insufficient aid (90 communities, 100%³), perceived discrimination in aid provision (37, 41%³), and poor targeting of beneficiaries (37, 41%³).

SECTORAL FINDINGS (1)



KIs in **100%** of communities reported that households were **able to access markets** within their own communities or in nearby communities (109 of 109).



Child labour and **early or forced marriage** were widely reported across assessed communities, either as protection risks for children, as common coping strategies for lack of income, and as barriers to access education (residents and IDPs).



KIs in **41%** of communities reported **damaged residential buildings** as one of the most common shelter types for IDPs.



Even though reportedly available, **soap, cooking fuel and sources of light** were reported as **unaffordable** for the majority of people in 63%, 84% and 84% of assessed communities, respectively.

Food Security and Livelihoods (FSL) Communities were largely shown to have access to markets, as purchasing from stores was reported by KIs in 90% of communities as the most common source of food (whether in immediate or neighbouring communities). However, unaffordability of items was widely reported as a barrier to accessing sufficient food for both residents and IDPs.⁴ Household production and farming were reported as one of the main sources of food in 77% of assessed communities. In addition, agriculture and livestock were also reported by 78% of KIs as the main source of livelihoods for residents. IDPs rely more on livelihood sources such as daily waged labour (reported in 99% of IDP-hosting communities) and loans and remittances (60% of IDP-hosting communities³). Lack of adequate employment opportunities was reported as a common barrier to accessing livelihoods for both residents (reported in 95% of communities) and IDPs (94% of IDP-hosting communities).

Protection Across the 72 assessed communities where protection risks were reported, KIs in all communities (100%) reported child labour and early or forced marriage as protection risks for both resident and IDP children. In addition, domestic violence or abuse was reported as a risk by KIs in 29%³ of communities for residents and 22%³ for IDPs. IDPs reportedly faced additional protection risks such as exploitation, reported as a risk by KIs in 38% of IDP-hosting communities. Exploitation was reported as affecting all population groups, but most frequently women and girls (reported for 58% and 54% of communities reporting exploitation, respectively).

Shelter Damage to shelters was reported as a concern, with KIs in almost half of assessed communities reporting complete destruction of up to 20 percent of shelters (45, 48%). Shelter inadequacy issues reported for both IDPs and residents revolved around lack of privacy and of lighting inside and around shelters, posing protection concerns.

Electricity & Non-food items (NFI) Community generators were reported as the main source of electricity in 58% of assessed communities, while the main network was reported in 42% of the communities. Constant access to electricity was not guaranteed in all communities, with KIs in 64 communities (59%) reporting 5 to 8 hours of electricity a day. Findings show that the lack of electricity results from non-functionality of main electric network and lack or unaffordability of fuel to operate generators (reported by KIs as barriers in 80%, 64% and 42%³ of assessed communities, respectively).

3. KIs could select multiple answer options, thus findings might exceed 100%

4. Please refer to market monitoring section of this situation overview ([page 6](#)) for more details on prices.

SECTORAL FINDINGS (2)



KIs in **67%** of communities reported that **not all households had access to sufficient water** (74 of 109 communities).



Health KIs⁵ reported **chronic disease** (reported in **80%** of communities), **diarrhoea** (**58%**), **leishmaniasis** (**51%**) and **acute respiratory infections** (**44%**) as the **most common health problems**³ across assessed communities.



Closure of schools by local authorities was a key barrier preventing access to education for both residents and IDPs, as reported in all (100%) of communities.

WASH The most commonly reported barrier to access sufficient water was the price of water trucking, while water trucking was also the most commonly reported source of drinking water. Two types of water trucking were reported, either private (reported in 41 assessed communities, 38%) or operated by authorities or non-governmental organisations (17 assessed communities, 16%). Regarding sanitation issues, open defecation was reported in 14 assessed communities (13%). The lack of toilets inside shelters was reported as a shelter issue for residents in 36%³ of assessed communities, and for IDPs in 44%³ of IDP-hosting communities.

Health Relatively high access to healthcare was reported across communities, with KIs in 96% of communities reporting that households were able to access health services in their own communities, and 94% in nearby communities. However, major barriers to access healthcare in the 30 days prior to data collection were reported by KIs relating to unaffordability of services or transportation (stated in 75% and 62%³ of communities, respectively). A lack of medicines at facilities was reported in 66%³ of the assessed communities.

Education While KIs in all 109 assessed communities (100%) reported schools closed as a result of COVID-19 preventive measures from local authorities, KIs in 17%³ of communities reported lack of teachers as another reason schools were not in session the whole month prior to data collection. Moreover, further barriers were stated such as education not being provided after a certain age (reported in 26%³ of assessed communities for residents and for IDPs), early or forced marriage (18%³ for residents, 16%³ for IDPs) and child labour (18%³ for residents, 16%³ for IDPs). Missing personal documentation to enrol was also reported as a specific barrier for IDP children in 17% of communities.



COVID-19 - KEY FINDINGS

Even though no specific COVID-19 related indicators are regularly collected via REACH's HSOS assessment, key findings can be highlighted regarding access to basic services that are key for COVID-19 preparedness and response, such as healthcare and WASH.

Health and WASH were both reported as top priority needs for residents across assessed communities, with KIs in 79% of communities reporting health as a priority need and 45% reporting WASH as a priority need.

In terms of health, KIs in all 109 assessed communities reported healthcare to be accessible, whether in the community or in other nearby communities. However, the unaffordability of services, a lack of medicines at facilities and the high cost of transportation were all largely reported by KIs as barriers to accessing healthcare. Moreover, overcrowding of health facilities and shortage of health




workers were also reported as barriers in 54% and 50%³ of assessed communities, respectively, which could impede facilities' capacity to respond to a COVID-19 outbreak. The presence of vulnerable population groups more at risk of complications if infected with the virus was reported in a significant proportion of assessed communities, with chronic diseases reported as a health problem in 80% of the assessed communities, and acute respiratory infections were reported by KIs in 44%³ of the assessed communities.

Regarding WASH, difficulties accessing sufficient water and key hygiene items can heighten the risk of COVID-19 contamination if an outbreak was to arise in the area. Access to sufficient water for all households was reportedly not guaranteed in 67% of assessed communities. The price of water trucking – which KIs report as the most common source of drinking water – constituted the most commonly

reported barrier to accessing sufficient water. Similarly, while key items such as water containers and soap were reportedly available in all assessed communities, KIs reported that they were not affordable for the majority of people in 84 assessed communities (77%) for water containers and 69 communities (63%) for soap. Washing hands less frequently was however not reported as a coping strategy for lack of water by KIs in any of the assessed communities.

Overcrowding may cause difficulties to social distancing and increase the risk of potential COVID-19 transmission between individuals sharing a shelter. KIs in 84% of assessed communities reported at least some residents to be living in overcrowded shelters, with 80% of KIs reporting up to 20% of residents in overcrowded shelters. Of even greater concern, KIs in all assessed IDP-hosting communities reported at least some IDPs to be living in overcrowded shelters.

SITES OVERVIEW

SETTLEMENT TYPOLOGY			
	School buildings	31	
	Tents	45	
	Other buildings	5	
ESTIMATED IDP POPULATION		DEMOGRAPHICS	
	Smallest settlement	Children (<18)	45.5%
	Largest settlement	Adults (18-59)	44.5%
	Average	Elderly (60+)	10%
		Female	60%

SECTORAL FINDINGS

Shelter The most commonly reported shelter adequacy issues were lack of lighting (75% of assessed settlements), lack of insulation from heat (68%), lack of electricity (60%) and lack of privacy inside shelters (54%³). The most commonly reported shelter needs were tools (75% of assessed settlements), followed by new tents and plastic sheeting (49%³ for each).

WASH The most commonly reported drinking water sources were tanker truck (94%) and bottled water (15%³). In 86% of settlements KIs reported not everyone had enough water to meet their needs, and KIs reported issues with water quality in 75% of settlements. For both indicators, proportions were higher than in assessed settlements in other governorates, as detailed in the graphs below.

% of assessed settlements reportedly without enough water for everyone to meet their needs		% of assessed settlements with water quality issues reported	
Deir-ez-Zor	86%	Deir-ez-Zor	75%
Al-Hasakeh	66%	Al-Hasakeh	51%
Ar-Raqqa	47%	Ar-Raqqa	27%
Menbij	44%	Menbij	11%

KIs reported that communal latrines were the most widely available type of latrine (80% of assessed settlements). There were reportedly no latrines available in 12% of assessed settlements, accounting for an estimated population of 4,045 people.

Bathing inside shelters was the most commonly reported bathing practice, while communal showers were reportedly available in 22% of settlements and 1% of settlements reportedly had no showers or bathing places.

Health All assessed settlements in Deir-ez-Zor reportedly had access to at least one health facility. However, in 26% of settlements there was reportedly no access to medicine to treat chronic diseases (either free or for sale).

Camp Coordination/Camp Management (CCCM) KIs reported that 64% of assessed settlements in Deir-ez-Zor had benefited from an aid distribution in the 30 days prior to data collection. The most commonly reported information needs were where to find job opportunities, how to access assistance, and how to access information on sponsorship programmes.

Food KIs reported that IDPs in assessed settlements did not have enough food to meet their needs in 74% of assessed settlements, with an estimated population of 18,036 people.

% of assessed settlements that had received an aid distribution in the 30 days prior to data collection		% of assessed settlements where reportedly not all IDPs have enough food	
Menbij	100%	Menbij	83%
Al-Hasakeh	86%	Al-Hasakeh	80%
Deir-ez-Zor	64%	Deir-ez-Zor	74%
Ar-Raqqa	62%	Ar-Raqqa	70%

Livelihoods KIs reported that in 23% of assessed settlements, IDPs had no access to income.

Protection Child labour was reported in 100% of assessed settlements in Deir-ez-Zor in the two weeks prior to data collection. Early marriage (70%), child-headed households (43%) and domestic violence (36%³) were also commonly-reported issues.

Non-food items The most commonly reported priority NFI needs were sources of light, cooking stoves, cooking fuel and cooking utensils.

Top three priority needs reported in assessed settlements:³

1	Food	83%
2	Employment	54%
3	Shelter support	31%

COVID-19 VULNERABILITY - KEY FINDINGS



Not everyone was reportedly aware of COVID-19 in 80% of settlements. KIs reported that in the majority of assessed settlements in Deir-ez-Zor (72%), only around 25% of IDPs considered COVID-19 important. In 43% of assessed settlements, half or fewer of the IDPs had reportedly **received information about COVID-19**.

In 80% of assessed settlements, around 25% or lower proportions of IDPs were reportedly aware of **social distancing**. In all assessed settlements in Deir-ez-Zor, it was reported that only a few (around 25%) or no IDPs were engaging in social distancing. The most frequently cited reason was that living conditions do not allow it (90% of assessed settlements), with KIs in 51%³ of settlements also reporting that IDPs are unsure of the reasons why they should practice social distancing.

	Reported awareness of social distancing	Reported engagement with social distancing
Everyone (around 100%)	1%	0%
Most people (around 75%)	5%	0%
About half (around 50%)	14%	0%
A few (around 25%)	65%	59%
Nobody (around 0%)	15%	41%

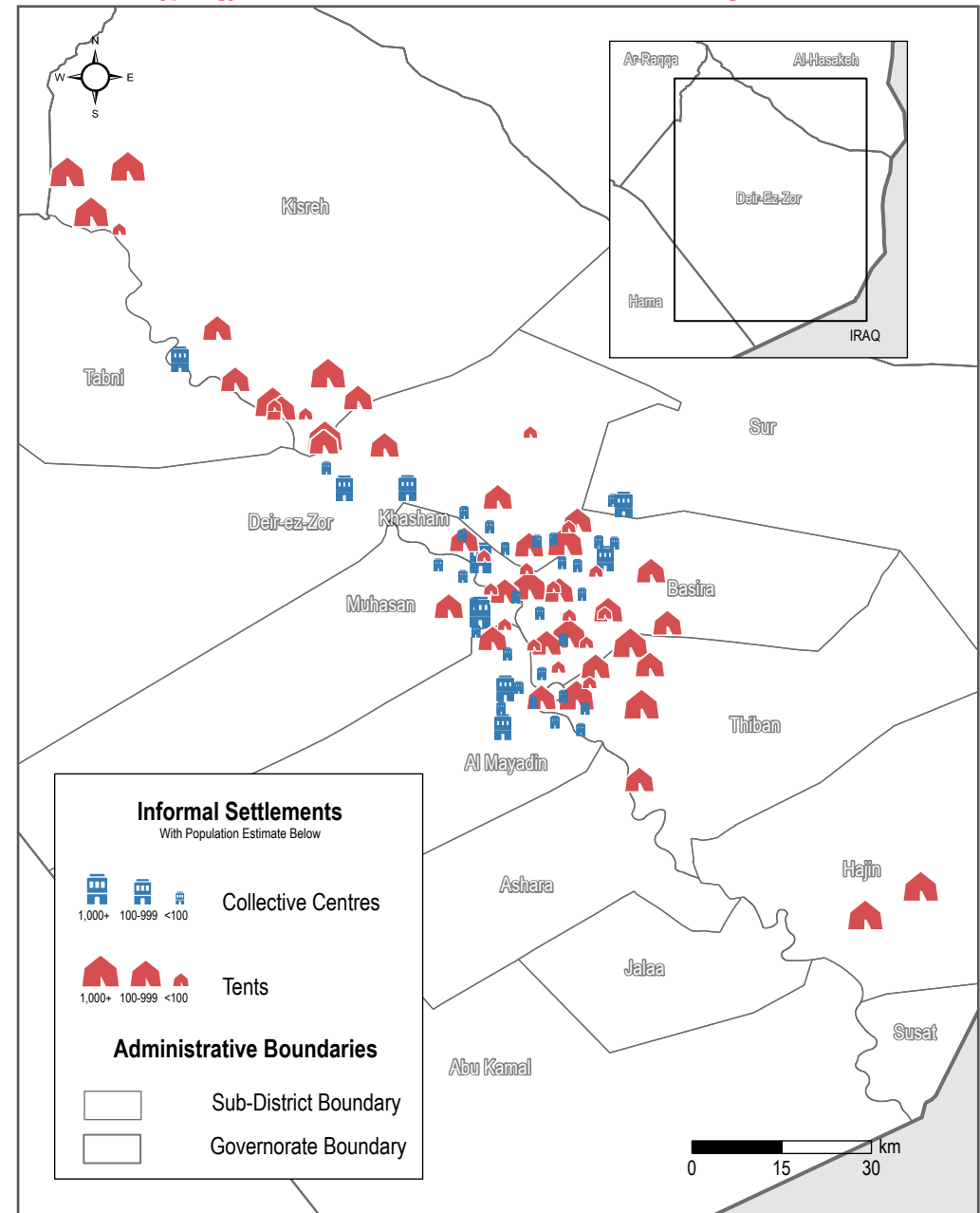
In 22% of assessed settlements, KIs reported that no-one has access to **handwashing facilities**. In only 31% of assessed settlements did all IDPs reportedly have **access to soap**.

	Reported access to handwashing facilities	Reported access to soap
Everyone (around 100%)	4%	31%
Most people (around 75%)	46%	56%
About half (around 50%)	17%	2%
A few (around 25%)	11%	10%
Nobody (around 0%)	22%	1%



Across all assessed informal settlements in Deir-ez-Zor, an estimated 10% of settlement IDPs are over 60 years old.

Location and typology of sites and settlements assessed in Deir-ez-Zor governorate:



KEY DEVELOPMENTS IN MARKETS

The SMEB value continues to increase

In June, the cost of the SMEB in Deir-ez-Zor governorate reached 207,928 SYP / 90 USD, increasing by 35% since May. While the cost of the SMEB continued to rise in SYP, the USD SMEB value decreased from 93 to 90 USD due to continued depreciation of the SYP (see below).

Continued sharp depreciation of the SYP

During data collection in Deir-ez-Zor governorate in June 2020, the informal SYP/

USD exchange rate continued to sharply increase. The median informal exchange rate for the governorate was recorded at 2,300 SYP/USD, a 35% increase from the month prior. The highest exchange rate was recorded at 2,850 SYP for 1 USD in Moezleh community. The reported main causes for the sharp increase include the continued financial crisis in Lebanon, international economic sanctions on Syria, COVID-19 mitigation measures, a decline in remittances into Syria, and internal disputes between actors in Syria.⁶

Food and hygiene items prices sharply increased

The cost of the SMEB food component in Deir-ez-Zor increased by 36% from May to June, reaching a median of 154,563 SYP. The price of rice, for example, has increased by 80% since May 2020. Moreover, the cost of the SMEB hygiene component for Deir-ez-Zor governorate increased by 64%, reaching a median of 21,474 SYP. Supply challenges combined with the collapsing currency may be contributing factors to the sharp increase in food and hygiene prices in markets in Deir-ez-Zor.

SMEB COMPONENTS MEDIANS

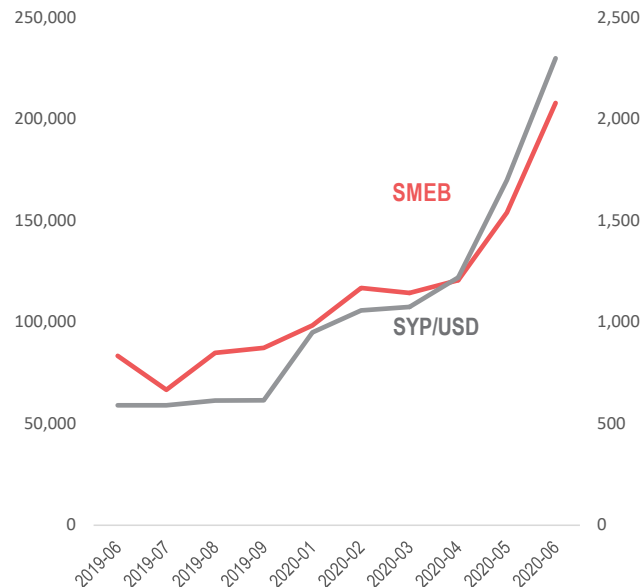
SMEB Food:	154,563 SYP
SMEB Cooking fuel:	6,250 SYP
SMEB Hygiene:	21,474 SYP
SMEB Cellphone data:	2,000 SYP
SMEB Water:	7,200 SYP

MEDIAN SMEB COST IN SYP (USD)

207,928 SYP
(90 USD) DEIR-EZ-ZOR GOVERNORATE

SMEB COST (SYP) AND EXCHANGE RATE (SYP/USD)

Deir-ez-Zor governorate

MARKET FUNCTIONALITY
Deir-ez-Zor

73% of surveyed vendors reported **price inflation as a supply challenge**



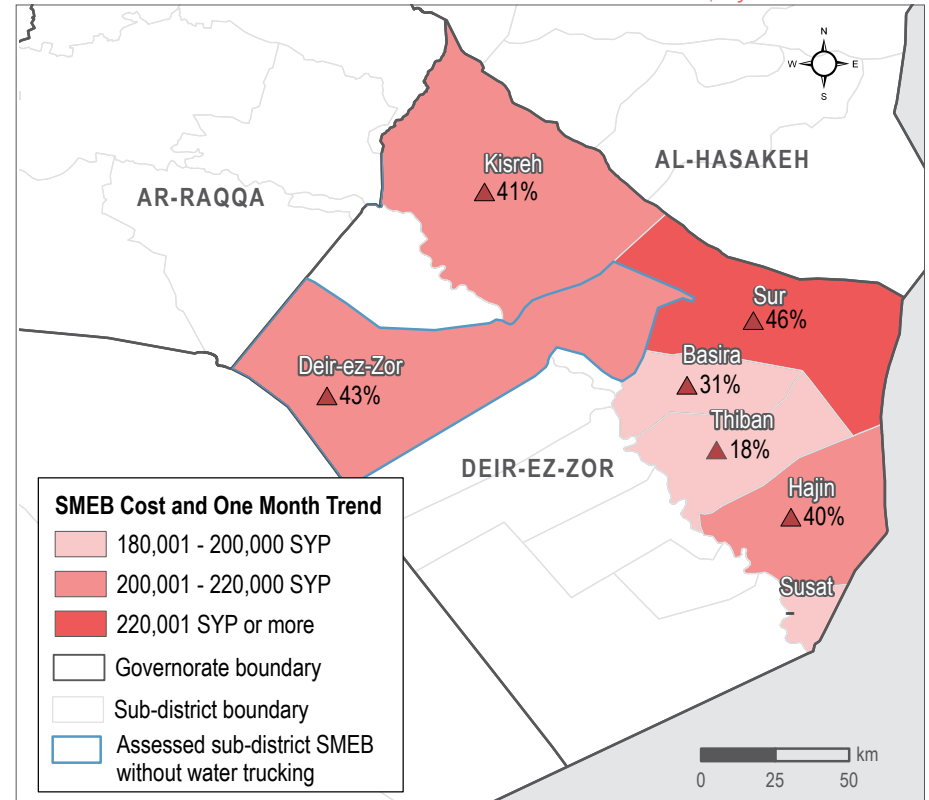
Inability to restock was primarily reported by **gas and fuel vendors**



83% of surveyed vendors reported having **limited stock of at least one type of dollar denomination**

No surveyed vendors in Deir-ez-zor reported having **closed their shop**

SMEB COST & ONE MONTH CHANGE Deir-ez-Zor sub-districts, Syrian Pounds



Methodology

This Situation overview is a response to an information gap on the specific humanitarian situation of IDPs and residents across Deir-ez-Zor governorate in northeast Syria. The aim of the report is to inform the overall humanitarian response specifically for populations living in the area of interest through synthesising data regularly collected by REACH via multiple different assessments.

Specific objectives:

1. Identify sector-specific needs for residents and IDPs in both communities and sites and settlements across Deir-ez-Zor governorate and across the following sectors: shelter, food, livelihoods, NFIs, WASH, healthcare, education and protection.
2. Identify overall priority needs for residents and IDPs in both communities and sites and settlements across assessed locations.
3. Provide consumer prices of key commodities, information on the availability of key commodities and vendor conditions, and information on the cost of the SMEB in assessed markets.

HSOS and informal sites and settlements profiling both utilise key informant interviews to determine the humanitarian context in their respective target areas (including population needs and access to services). The Market Monitoring monthly assessment provides consumer price and vendor-side information for key commodities and key seasonal items in assessed markets in order to inform humanitarian cash-based programming in Syria and to provide indications of the economic pressures faced by households.

More details on the methodology for each assessment included in this report can be found below.

REACH HUMANITARIAN SITUATION OVERVIEW IN SYRIA (HSOS):

HSOS is a monthly assessment that provides comprehensive, multi-sectoral information about the humanitarian conditions and priority needs inside Syria. Data is collected for the HSOS through an enumerator network in accessible locations throughout Idleb, Aleppo, and Hama governorates. Data for this assessment is collected over a 10 day period at the beginning of the month, and refers to the situation in the previous month.

REACH enumerators are based inside Syria and interview, either directly or remotely (via phone) depending on security, KIs located in the communities that they are reporting on. KIs are chosen based on their community-level and sector-specific knowledge. The HSOS project has monitored the situation in Syria since 2013, and its methodology and procedures have evolved significantly since that time.

In June, data was collected between 1-16 of June 2020, in 109 communities in Deir-ez-Zor governorate. All indicators quoted in this report refer to the situation in the 30 days prior to data collection (May/June 2020). Findings are indicative rather than representative, and should not be generalized across the region.

[March 2020](#); [April 2020](#); [May 2020](#); [June 2020](#)

REACH AND NORTHEAST SYRIA (NES) CASH WORKING GROUP (CWG) MARKET MONITORING (MM):

To inform humanitarian cash programming, REACH, in partnership with the Cash Working Group (CWG) in NES, conducts monthly MM exercises in northern Syria to assess the availability and prices of 36 basic commodities that comprise of the SMEB, that are typically sold in markets and consumed by average Syrian households, including food and non-food items, water, fuel, and cell phone data. Information on market functionality is also collected, including delivery and supply challenges, restocking and availability of USD banknotes. Each enumerator aims to assess three to five shops of each type in the main market in their assigned sub-district, using surveys to collect information about the three cheapest prices of each item. In sub-districts where direct surveying by enumerators is not possible, data collection is conducted remotely through KIs such as shop owners, suppliers and consumers.

In June, REACH and partners covered 7 sub-districts (15 communities) in Deir-ez-Zor governorate for the Market Monitoring exercise. Prices should be seen as representative only of the dates when information was collected (8-16 June).

[March 2020](#); [April 2020](#); [May 2020](#); [June 2020](#)

REACH INFORMAL SITES AND SETTLEMENT PROFILING:

REACH's informal settlement profiling in NES consists of KI interviews with community members with knowledge of settlements. KIs were sought for each of the informal settlements and collective centres verified by the NES Sites and Settlements Working Group (SSWG).

For the most recent assessment, data collection took place between 15-24 June 2020, with 253 key informants interviewed in Deir-ez-Zor, Al-Hasakeh and Ar-Raqqa governorates and Menbij sub-district in Aleppo governorate. In Deir-ez-Zor, 83 informal settlements were assessed.

Due to the KI methodology used, findings are not statistically representative and should only be considered as indicative of the situation. The assessment was carried out at the settlement level and data is relevant only for the assessed settlements and not the communities they are in or near.

This assessment follows a previous assessment that was carried out in Menbij sub-district and Ar-Raqqa and Deir-ez-Zor governorates. This full set of profiles can be found [here](#).

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](https://twitter.com/REACH_info).