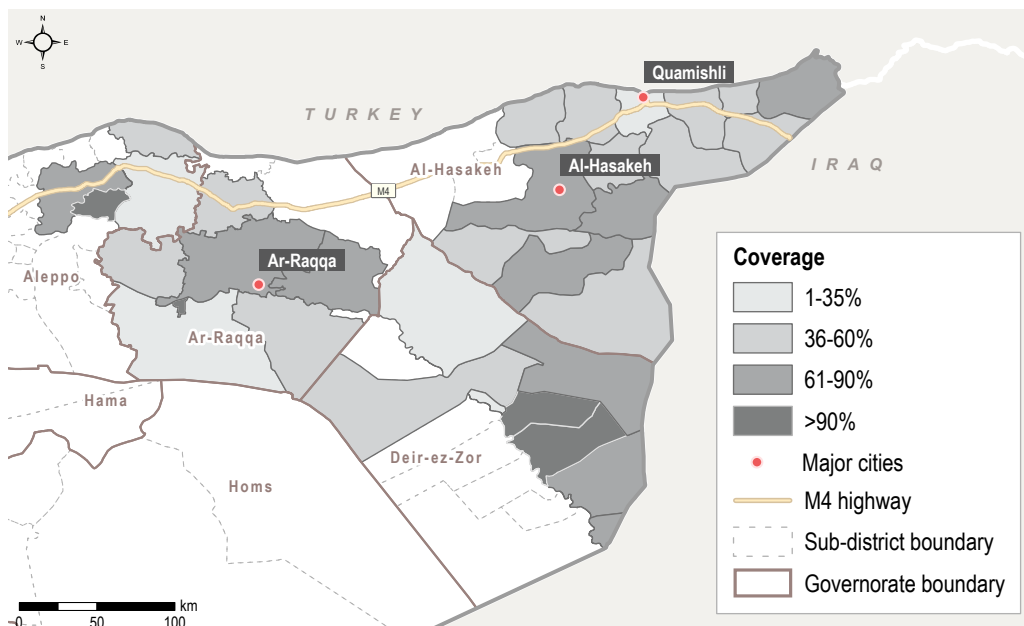


Introduction and Methodology

HSOS is a monthly assessment that provides comprehensive, multi-sectoral information about the humanitarian conditions and priority needs inside Syria. This factsheet presents a thematic review based on the HSOS assessment of the priority needs and humanitarian assistance, economic conditions, living conditions, access to basic services, COVID-19 situation, and the security and protection situation in Northeast Syria (NES). **Sector-specific indicator findings by location can be found on the [HSOS dashboard](#).**

The assessment is conducted using a key informant (KI) methodology at the community level. REACH enumerators are based inside Syria and interview three to five KIs per assessed location, either directly or remotely (via phone). KIs are chosen based on their community-level and sector-specific knowledge. This factsheet presents information gathered in **1,267** communities in NES. **Data was collected between 2-18 March 2022** from **4,828 KIs** (18% female). Unless specified by an endnote, all indicators refer to the situation in the 30 days prior to data collection. Findings are indicative rather than representative, and should not be generalized across the population and region. Findings that are calculated based on a subset of the community are indicated by the following footnote ♦, with each subset specified in the endnotes.

The **complete monthly HSOS dataset** is available on the [REACH Resource Centre](#).



Key Highlights

In March, findings suggest that the economic crisis, coupled with the triple water crisis, compounded humanitarian needs for populations across northeast Syria (NES). Households particularly struggled with the high cost of food, leading them to incur more debt. The rise in the prices of most commodities led both residents and IDPs to adopt negative coping strategies. Furthermore, reliable access to sufficient water remained challenging. Finally, the impact of feed/fodder shortage escalated with a high number of reported sudden livestock deaths.

- **The existing economic crisis, coupled with the Ukraine crisis' knock-on effect in NES, further impacted populations across the region.** The instability exacerbated shortages, increased prices, reduced affordability, and led to currency depreciation. As of 31 March, the pound reached around 3,865 SYP per USD in the region, which contributed to the increase in prices of basic goods and commodities throughout the month.^a Households particularly struggled with the high cost of foods paired with low purchasing power; as KIs in 82% of communities reported that households were unable to afford essential food items. The continued erosion of purchasing power likely pushed households to incur more debt, as purchasing food on credit/borrowing money to buy food was the most commonly reported coping strategy for a lack of food, reported by KIs in 79% of assessed communities.

- **As a result of financial stressors, households in NES adopted negative coping mechanisms, including child labour and early marriage, to meet basic needs.** KIs indicated that a proportion of children were sent to work in more than half of the communities (53% for residents and 62% for IDPs). Early marriage to meet basic needs was also reported in 12% of assessed communities for residents, and 15% of assessed communities for IDPs.

- **Reliable access to sufficient and safe water across the region remained a major challenge.** According to HSOS data, KIs in 60% of assessed communities reported that not all households in their community had sufficient access to water. As the water network became less reliable, households reportedly relied more on private boreholes or wells, and water trucking.^b However, the high cost of water trucking was the most cited barrier to water access, reported by KIs in almost 40% of communities. These costs meant that households had to spend money on water at the expense of other necessities.

- **In March, the impact of feed/fodder shortage escalated with a high number of reported sudden livestock deaths.** This forced farmers to resort to extreme measures, such as selling their livestock for lower prices.^c According to HSOS data, KIs in 38% of assessed communities reported a high rate of livestock deaths as a barrier to agricultural livelihoods. This is a marked increase from 33% in February. Livestock deaths are likely a result of malnutrition as fodder has become unaffordable for livestock keepers.^d This is due to the drought which began in late 2020 and led to the failure of green fodder crops in 2021, as well as the high cost of fodder imports.^e

HSOS Dashboard

For a breakdown of sector-specific indicators by location, please see the [HSOS dashboard](#). The interactive HSOS dashboard provides a monthly sectoral overview of key indicators disaggregated at the sub-district and community level.



Priority Needs and Humanitarian Assistance



Most commonly reported **first, second, and third** and **overall** priority needs for residents (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL	
1	Livelihoods	Livelihoods	Livelihoods	Livelihoods	83%
2	Healthcare	Healthcare	Infrastructure	Healthcare	61%
3	WASH [▲]	WASH	Healthcare	WASH	46%

% of assessed communities where some of the resident households were able to access humanitarian assistance



Yes: 20%
No: 80%

% of assessed communities where KIs reported the presence of the following **types of assistance for residents** ⁴

2% | Livelihoods
1% | Healthcare
>1% WASH

Most commonly reported barriers that resident households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,♦}

In communities where access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people **75%** **1** **94%**
- Quantity of assistance provided to households was insufficient **51%** **2** **4%**
- Assistance provided was not relevant to all needs **48%** **3** **1%**

In communities where no access to humanitarian assistance was reported

- No humanitarian assistance was available **94%**
- Not aware if assistance was available **4%**
- Perceived discrimination in provision of humanitarian **1%**



Most commonly reported **first, second, and third** and **overall** priority needs for IDPs (by % of assessed communities) ^{2,3}

	FIRST	SECOND	THIRD	OVERALL	
1	Livelihoods	Livelihoods	Healthcare	Livelihoods	80%
2	Food	Food	Livelihoods	Food	65%
3	Healthcare	Healthcare	Food	Healthcare	56%

% of assessed communities where some of the IDP households were able to access humanitarian assistance



Yes: 35%
No: 65%

% of assessed communities where KIs reported the presence of the following **types of assistance for IDPs** ⁴

2% | Livelihoods
30% | Food
2% | Healthcare

Most commonly reported barriers that IDP households faced in accessing humanitarian assistance (by % of assessed communities) ^{4,♦}

In communities where access to humanitarian assistance was reported

- Assistance provided was insufficient to cover all people in need **61%** **1** **98%**
- Assistance provided was not relevant to all needs **54%** **2** **1%**
- Quantity of assistance provided to households was insufficient **49%** **3** **1%**

In communities where no access to humanitarian assistance was reported

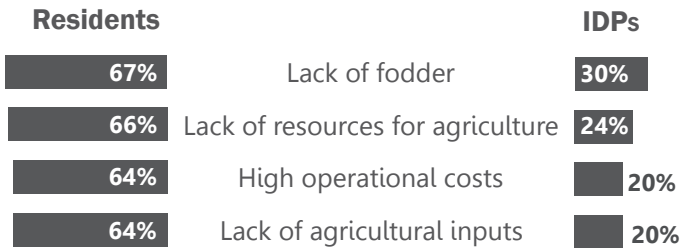
- No humanitarian assistance was available **98%**
- Perceived discrimination in provision of humanitarian **1%**
- Not aware if assistance was available **1%**



Economic Conditions

Region	Median estimated monthly household expense for water for a household of six ^{5,6}	Median estimated monthly rent price for a two bedroom apartment ^{5,6}	Median estimated daily wage for unskilled labour ^{5,7,8}
Northeast Syria	15,000 SYP	40,000 SYP	6,000 SYP
Aleppo	6,000 SYP	25,000 SYP	6,000 SYP
Al-Hasakeh	25,000 SYP	80,000 SYP	6,000 SYP
Ar-Raqqa	2,000 SYP	40,000 SYP	7,000 SYP
Deir-ez-Zor	25,000 SYP	40,000 SYP	6,000 SYP

Most commonly reported barriers to accessing livelihoods related to agriculture (by % of assessed communities) ⁴



79% and 91%

% of assessed communities where KIs reported daily waged labour as a common source of income for residents and IDPs

89 days

Number of days the average day labourer would need to work to earn the monthly cost of basic SMEB[▲] items ^{5,9}

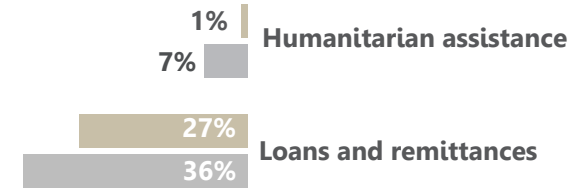
92% and 66%

% of assessed communities where KIs reported the insufficient income of households and lack of employment opportunities that match people's skills as barriers to meeting basic needs ⁸

% of assessed communities where common livelihood sources from agriculture were reported ⁴

Livelihood source	Residents	IDPs
Food crop production	38%	22%
Cash crop production	56%	6%
Livestock products	59%	29%
Sale of livestock	58%	26%

% of assessed communities where KIs reported the presence of residents and IDP households relying on non-productive sources of livelihoods to meet their basic needs ⁴



Intersectoral findings on unaffordability hindering access to goods and services



KIs in 26% of assessed communities cited that rent was unaffordable for the majority of people



KIs in 61% of assessed communities cited the high cost of fuel for generators as a common challenge



KIs in 72% of assessed communities cited the high cost of solar panels as a common challenge



KIs in 38% of assessed communities cited the high cost of water trucking as a common challenge



KIs in 82% of assessed communities cited the high cost of food as a common challenge ⁸



KIs in 89% of assessed communities cited the high cost of health services as a common challenge



Living Conditions

In **93%** of assessed communities at least **80%** of the resident population reportedly **owned their shelter**

In **80%** of assessed communities reportedly **none** of the IDP households owned their shelter

In **9%** of assessed communities at least one fifth of the IDP population reportedly lived in unfinished or abandoned residential buildings

In **8%** of assessed communities at least one fifth of the IDP population reportedly lived in tents



A lack of toilets was reported as a shelter issue for IDPs in **15%** of assessed communities



A lack of bathing facilities was reported as a shelter issue for IDPs in **13%** of assessed communities



Problems with the drinking water were reported in **35%** of assessed communities



However, KIs in 65% of assessed communities reported **no problems, water was safe to drink.**



98%

% of assessed communities where KIs reported that households experienced barriers to accessing sufficient food⁸



In **21%** of these communities, KIs reported that the **unavailability of certain food items** was a challenge to accessing sufficient food⁸

Most commonly reported coping strategies for a lack of food (by % of assessed communities)⁴

- 1** Borrowing money to buy food **79%**
- 2** Relying on less preferred food / lower food quality **76%**
- 3** Buying food with money usually used for other things **67%**

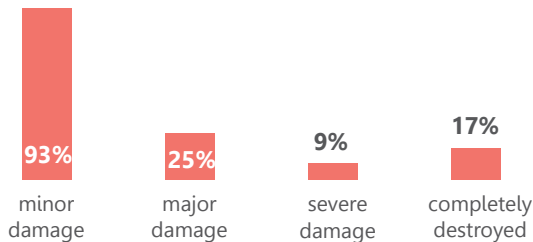


High price of suitable foods formula was the most commonly reported challenge to feeding young children (reported by KIs in 97% of assessed communities)^{4,11}

Commonly reported sources of food for households other than markets (by % of assessed communities)⁴

- 1** Own production or farming **39%**
- 2** Relying on food stored previously **37%**
- 3** Food gifts from friends and family **7%**

Reported presence of occupied shelters with damage across communities where damages were reported (by % of assessed communities)^{5,10}



Shelter and repair materials being too expensive was the most commonly reported challenge for households to repair their shelter (reported by KIs in 93% of assessed communities)⁴

Reported sanitation issues affecting public space in the community (by % of assessed communities)⁴

Rodents and/or pests are frequently visible

15%

Solid waste in the streets

24%

Sewage system pollutes public areas

10%

Stagnant water

9%

Flooding in the streets

4%



Access to Basic Services



Access to Electricity

5-6 hrs per day

was the most commonly reported range for hours of electricity accessible to households (reported by KIs in 41% of assessed communities)

Main network

was the most commonly reported main source of electricity (reported by KIs in 72% of assessed communities)

78%

% of assessed communities where KIs reported **local authorities rationing electricity** as a barrier for electricity access



Access to Water

60%

% of assessed communities where KIs reported that not all households had access to sufficient water



7 days	38%
5-6 days	15%
3-4 days	18%
1-2 days	8%
0 days	21%

Days per week where water from the network was available (by % of 805 communities connected to a water network)

Piped water network

was the most commonly reported source of drinking water (reported by KIs in 39% of assessed communities)

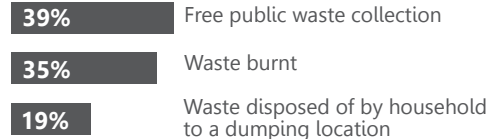


Access to Sanitation

80%

% of assessed communities where KIs reported that **no sewage system was present**

Most commonly reported ways people disposed of solid waste (by % of assessed communities)



27%

% of assessed communities where KIs reported waste removal services as a WASH priority need⁸



Access to Markets

32%

% of assessed communities in which households reportedly were **unable to access markets in the assessed location**

People lack financial means to open shop/market

was the most commonly reported **reason for why markets were not functioning** (reported by KIs in 83% of assessed communities where markets were not functioning)

75%

% of assessed communities where KIs reported that the **lack of transportation to markets** was a barrier to physically accessing food markets

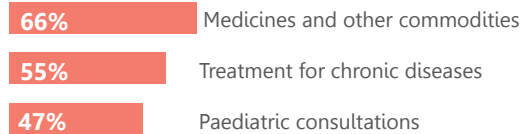


Access to Health Services

70%

% of assessed communities where KIs reported that the households did not have access to health services in the assessed location

Most commonly reported health priority needs (by % of assessed communities)⁸



Going to the pharmacy instead of a clinic

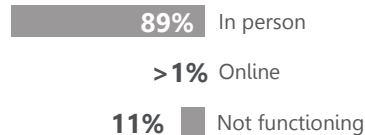
was the most commonly reported coping strategy for a lack of healthcare (reported by KIs in 95% of assessed communities)



Access to Education Services

31%
55%

% of communities in which half or less of the school aged-children accessed school in the last 30 days for **residents** and IDPs



% of assessed communities where KIs reported on the functioning of education services in the assessed location⁴

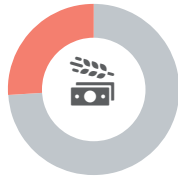
57%

% of assessed communities where KIs reported that the **high cost of transportation to school** was a barrier to accessing education services⁸



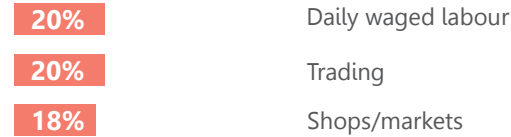
COVID-19

Effects of COVID-19 on livelihoods sectors in the community (by % of assessed communities)

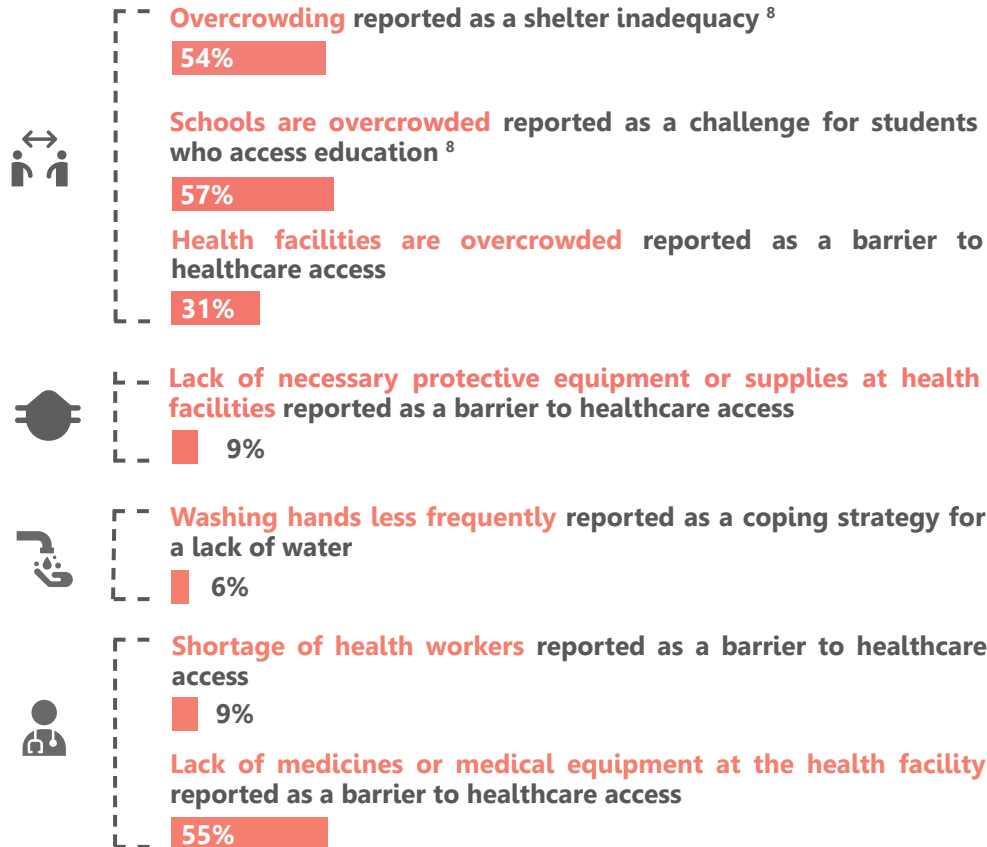


None of the available livelihood sectors were affected 74%
At least one of the available livelihood sectors was partially or totally affected 26%

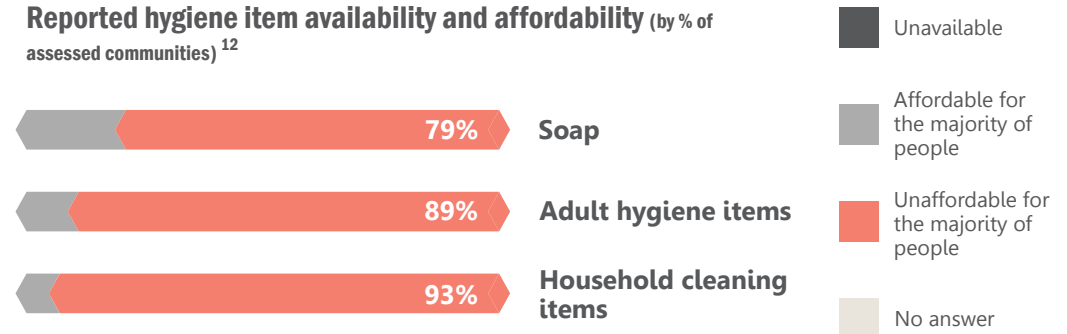
Most commonly reported sectors affected by COVID-19 (by % of assessed communities)



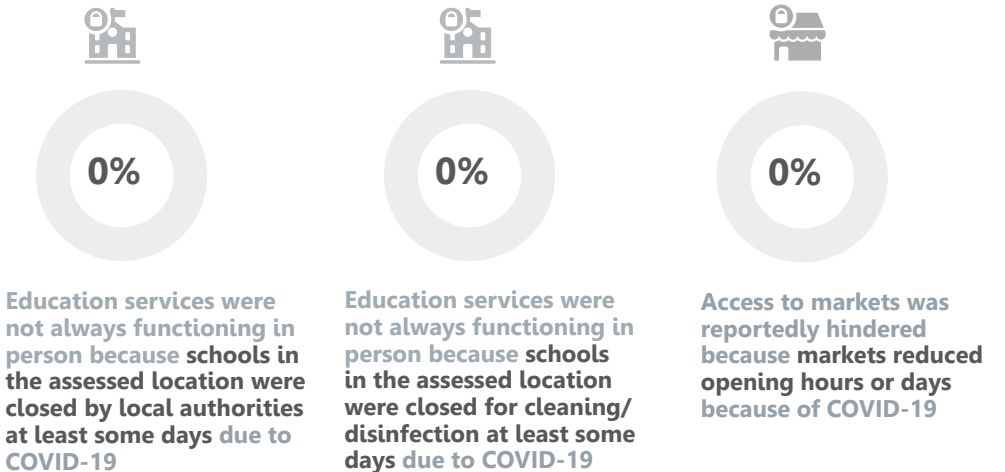
% of assessed communities where COVID-19 risk indicators were reported by KIs



Reported hygiene item availability and affordability (by % of assessed communities) ¹²



% of assessed communities where COVID-19 related barriers to access services were reported





Security and Protection

Intersectoral findings on security



General safety and security concerns restricting movement to markets was a reported barrier to market access in **45** communities

General safety and security concerns at markets was a reported barrier to market access in **2** communities

Movement restrictions was reported as a protection risk in **40** communities⁸



Tribal disputes were reported as a protection risk in **23** communities⁸

Threat from shelling was reported as a protection risk in **5** communities⁸

Fear from imminent conflict was reported as a protection risk in **101** communities⁸



The inability to lock homes securely was reported as a shelter inadequacy in **38%** of assessed communities⁸

Lack of privacy inside the shelter was reported as a shelter inadequacy in **58%** of assessed communities⁸

Lack of lighting around the shelter was reported as a shelter inadequacy in **85%** of assessed communities⁸

The security situation was reported as a barrier to shelter repairs in **5%** of assessed communities



Safety and security concerns travelling to health facilities was reported as a barrier to healthcare in **38** communities

Most commonly reported protection priority needs

(by % of assessed communities)^{3,8}

- 1 **79%** Special assistance for vulnerable groups
- 2 **50%** Specialised child protection services
- 3 **30%** Psychosocial support

% of assessed communities where the lack of civil documentation for residents and IDPs was reported

- 16%** Lack or loss of civil documentation as a protection risk
- 14%** Some people did not have the necessary personal documents as a barrier to accessing humanitarian assistance[†]
- 9%** Lack of personal documentation required to enrol in school as a barrier to education access
- 7%**
- 1%**
- 0%**

% of assessed communities where extreme coping strategies used by residents and IDPs to meet basic needs were reported⁴

Residents

- 12%** Early marriage
- 2%** Forced marriage
- 3%** High risk work
- 2%** Sending family members to beg
- 53%** Sending children (15 or below) to work

IDPs

- 15%**
- 4%**
- 4%**
- 4%**
- 62%**

Age, Gender, and Diversity

KIs in **29%** of assessed communities reported a **lack of employment opportunities for women** as a barrier to meeting basic needs⁸

KIs in **21%** of assessed communities reported a **lack of employment opportunities for persons with a disability** as a barrier to meeting basic needs⁸

KIs in **11%** of assessed communities reported a **lack of privacy for women and girls at health facilities** as a barrier to healthcare access

KIs in **22%** of assessed communities reported a **lack of market access for people with restricted mobility**

KIs in **5%** of assessed communities reported that **women and girls feel unsafe when traveling to markets**

Children below the age of 12 were reported as a group affected by child labour in **10%** of assessed communities⁸

Hazardous child labour was reported as a protection risk in **32** communities⁸

Endnotes

1. Aleppo governorate includes Menbij and Ain Al Arab districts.
2. KIs were asked to select a first, second, and third highest priority needs in their communities. The ranking shows the sectors most frequently chosen as either first, second or third highest priority. The overall priority need refers to the frequency a sector was selected across all three categories (first, second or third highest priority).
3. KIs could select three answers, thus findings might exceed 100%.
4. KIs could select multiple answers, thus findings might exceed 100%.
5. KIs were asked about the situation at the time of data collection, instead of the last 30 days.
6. KIs had the option to select the price in United States Dollars (USD), Turkish Lira (TRY), or Syrian Pounds (SYP). When the price was not reported in SYP, the NES [Joint Market Monitoring Initiative \(JMMI\)](#) exchange rate was used to calculate the amount in SYP. According to the REACH Market Monitoring March 2022, 1 USD = 3,873 SYP; 1TRY= 265 SYP.
7. According to the NES [JMMI](#) March 2022, 1 USD = 3,873 SYP.
8. Findings for residents and IDPs were merged. The merge was calculated as follows: (option was selected for either residents or IDPs) / (communities reporting challenges/barriers/coping strategies for either residents or IDPs).
9. According to the NES [JMMI](#) March 2022, the Survival Minimum Expenditure Basket (SMEB) = 536,989 SYP.
10. Minor damage (cracks in walls, leaking roof, need of new doors and window repairs, etc.); Major damage (buildings with extensive damage to window frames and doors, but no structural damage to columns, slabs, or loadbearing walls); Severe damage (buildings with significant structural damage to column slabs, or loadbearing walls, cracking, steel elements and deformations visible in concrete; the building would require extensive repairs); Completely destroyed (buildings with structural damage so significant that rehabilitation is not possible).
11. KIs were asked about the situation in the last two months, instead of the last 30 days.
12. Adult hygiene items include: shampoo, toothbrush, and toothpaste. Household cleaning items include: washing powder, liquid, and dish detergent.

◆ By number of communities where KIs reported the relevant indicator (access/barriers/inadequacies/damages/coping strategies/risks etc.) for the relevant population group(s)

<i>Indicator</i>	<i>Subset</i>	<i>Indicator</i>	<i>Subset</i>
<i>N.o of communities reporting on:</i>		<i>N.o of communities reporting on:</i>	
Residents	1266	Barriers to assistance access (IDPs)	425
IDPs	655	Barriers to accessing sufficient food (merge)	1245
Challenges to assistance access (resident)	248	Days when water is available from network	805
Barriers to assistance access (resident)	1015	Barriers to markets functioning	402
Challenges to assistance access (IDPs)	223		

Sources

- a. Joint Market Monitoring Initiative (JMMI). (March 2022). Cash Working Group dataset - Northeast Syria. Retrieved from: <https://www.reachresourcecentre.info/>
- b. REACH. (2022). Briefing Note: Humanitarian Impact of Water Shortages in Northeast Syria – April 2022. Retrieved from: <https://www.impact-repository.org/>
- c. iMMAP. (2022). Northeast Syria Flash Report - Deterioration of the Livestock Feed and Fodder Market. Retrieved from: <https://reliefweb.int/>
- d. Ibid.
- e. REACH. (2022). Briefing Note: Humanitarian Impact of Water Shortages in Northeast Syria – April 2022. Retrieved from: <https://www.impact-repository.org/>

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.