

# 2015

## HUMANITARIAN NEEDS OVERVIEW

Syrian Arab Republic

November 2014



Credit: PABLO TOSCO/AFP/Getty Images

Prepared by OCHA on behalf of humanitarian partners working on the Syria Response



**Humanitarian needs have increased twelve fold since the beginning of the crisis, with 12.2 million people now in need of humanitarian assistance, including more than 5 million children**

6.8 million people are severely food insecure and 11.6 million people require urgent access to water and sanitation. Over 1 million people will have been injured by the end of 2014, requiring access to health services, including emergency trauma care. Only 43% of hospitals are fully functioning. In addition, 24.5% of schools have been damaged, destroyed or are used as shelters, leaving almost 2 million children not attending school. 2.4 million children under five are at risk of under nutrition. 12.2 million people require livelihoods support.



**12.2** Million PIN



**7.6** Million IDPs

**As the conflict enters its fourth year, the crisis in Syria is the largest protection crisis on the global stage**

Over 191,000 people have been killed since the start of the conflict. Flagrant human rights violations, use of sieges as a weapon of war, indiscriminate attacks against densely populated areas and targeting of civilian infrastructure continue to occur in violation of International Humanitarian Law (IHL) and Human Rights Law (HRL). 560 medical personnel have been killed since 2011, and 200 health facilities attacked. Over 1,200 grave violations have been committed against children, including 80 attacks on schools.

**10.8 million people have been displaced by the conflict, including 7.6 million internally, making Syria the biggest displacement crisis worldwide**

IDPs and other vulnerable groups are in urgent need NFI and protection assistance, including durable solutions. With an estimated 1.2 million houses have damaged or destroyed, more than 1.6 million people are in urgent need of shelter. The conflict has negatively impacted upon the effectiveness of protection institutions and family protection network structures, increasing the vulnerability of the displaced and host communities.

Assessment registry:

[www.humanitarianresponse.info/operations/syria](http://www.humanitarianresponse.info/operations/syria)

**Palestine refugees are being disproportionately affected by the conflict, with 64% of registered Palestine refugees now displaced**

280,000 Palestine refugees are internally displaced and a further 80,000 have sought refuge abroad. 460,000 Palestine refugees in Syria are dependent on UNRWA to meet their minimum humanitarian needs as a result of the conflict, representing approximately 94 percent of the registered Palestine refugee population remaining in Syria.

# IMPACT OF THE CRISIS

## Introduction

After nearly four years of conflict, Syria is the largest humanitarian and protection crisis globally. Syrians continue to bear the brunt of the conflict, as all parties continue to disregard the Security Council demands for respect of International Humanitarian Law (IHL) and Human Rights Law (HRL). Flagrant human rights violations, use of sieges as a weapon of war, indiscriminate attacks against densely populated area, targeting of civilian infrastructure (schools, hospitals, water networks, and places of worship), as well as attacks against humanitarian workers and humanitarian facilities have continued unabated. The UN estimates that over 191,000 people have lost their lives as a result of indiscriminate military assaults and extra-judicial executions as of April 2014<sup>1</sup>, while almost one million people have been injured.

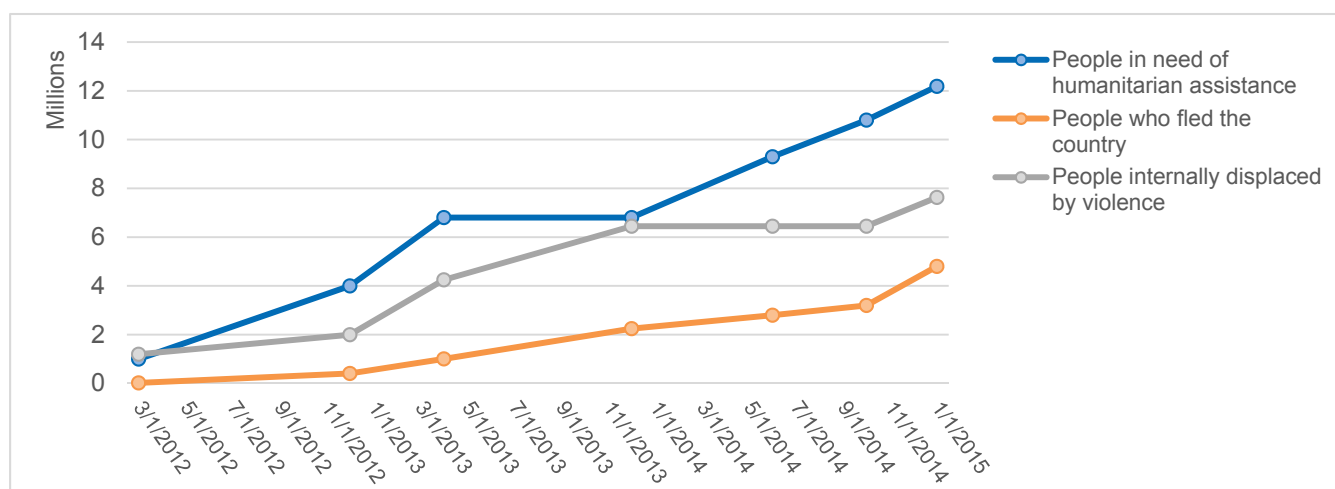
**191,369** persons  
killed since the  
beginning of the crisis

The Independent International Commission of Inquiry for Syria reported that tens of thousands have been arbitrarily arrested, held in unknown locations, and subjected to systematic torture and ill-treatment. Women and girls are at particular at risk of sexual violence due to forced displacement as well as early/forced marriage, and incidents of SGBV are on the rise.

As of November 2014, almost half of all Syrians had been forced to leave their homes, often multiple times, making Syria the largest displacement crisis globally. As of the end of October 2014, over 7.6 million people are internally displaced within Syria and over three million, including 720,000 in 2014 alone<sup>2</sup>, have sought refuge in neighboring countries and beyond. In 2013, an estimated 1.2 million houses had been damaged, including 400,000 which have been completely destroyed. As of September 2014, approximately 2 million houses had been damaged, including approximately 680,000 completely destroyed.<sup>3</sup>

An estimated  
**1.2 million** houses  
have been damaged

Figure 1: People in need, IDPs, and Refugees



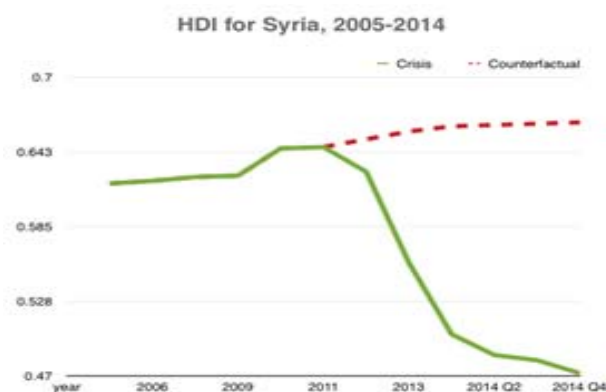
1 OHCHCR, August 2014

2 UNHCR, 2014

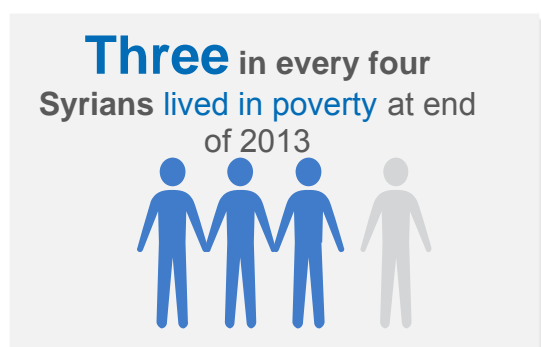
3 The conflict in Syria: Implications on the Macro-economy and MDGs. ESCWA 2014.

The crisis in Syria and, in particular, its negative impact on income, health and education, has seen the country's development situation regress almost four decades. By 2014-Q4, with a Human Development Index (HDI) measure of 0.472, down from 0.646 in 2011, Syria had fallen from the "medium human development" cluster of nations into the "low human development" category. Since the onset of the conflict in 2011, life expectancy is estimated to have fallen back more than 12.77 years (2013-Q4) and school attendance dropped more than 50 percent.<sup>4</sup>

Against this backdrop, Syria has also seen reversals in all 12 recorded Millennium Development Goal (MDG) indicators. In 2013, according to the MDG Index, Somalia was the only country in the Middle East and North Africa below Syria in terms of progress toward the MDGs.



Source: UNDP



The Syrian economy has contracted by an estimated 40 percent since 2011, leading to an enormous number of people losing their livelihoods. By the end of 2013, an estimated three in four Syrians were living in poverty, and 54 percent were living in extreme poverty<sup>5</sup>. At the same time, infrastructural damage, 'brain drain' in critical sectors, and shortages of equipment and supplies, among other issues, have left healthcare facilities, schools and other essential services operating at a reduced capacity or closed altogether, despite ever-growing demand, while the conflict has impeded access to those which continue to function.

Some 12.2 million people, including 5.1 million children,<sup>6</sup> are in need of humanitarian assistance. Humanitarian needs in Syria have reached a record high, and the coping mechanisms of Internally Displaced persons (IDPs) and host communities are all but exhausted. Humanitarian access to people in need remains constrained by the closure of many key border points, shifting frontlines, bureaucratic hurdles, active conflict along access routes, safety and security concerns, and the takeover of vast swaths of territory by Islamic State of Iraq and the Levant (ISIL) and continued territorial control by Al-Nusra Front (ANF) and all other individuals, groups, and entities associated with Al-Qaida.<sup>7</sup> These access challenges were only somewhat offset by effort to scale up cross-line and cross border assistance, including the passage of UN Security Council resolution (UNSCR) 2139 and 2165.

In this context, in the absence of a viable peace and reconciliation process, humanitarian and protection needs for civilians in Syria are likely to continue growing in 2015 and humanitarian action will take place in a context of increased conflict and in a more complex and demanding operational environment. The political and humanitarian ripple effects of the Syria crisis may also further destabilize neighboring countries, possibly leading to a further reduction in asylum space and increased instability in the region.

<sup>4</sup> Syria Squandering Humanity – Socio-economic Monitoring Report on Syria, Syria Centre for Policy Research, May 2014.

<sup>5</sup> Syria Squandering Humanity – Socio-economic Monitoring Report on Syria, Syria Centre for Policy Research, May 2014

<sup>6</sup> UNICEF, 2014

<sup>7</sup> UNSCR 2170 (August 2014)

## SITUATION OVERVIEW

### Drivers of the humanitarian crisis

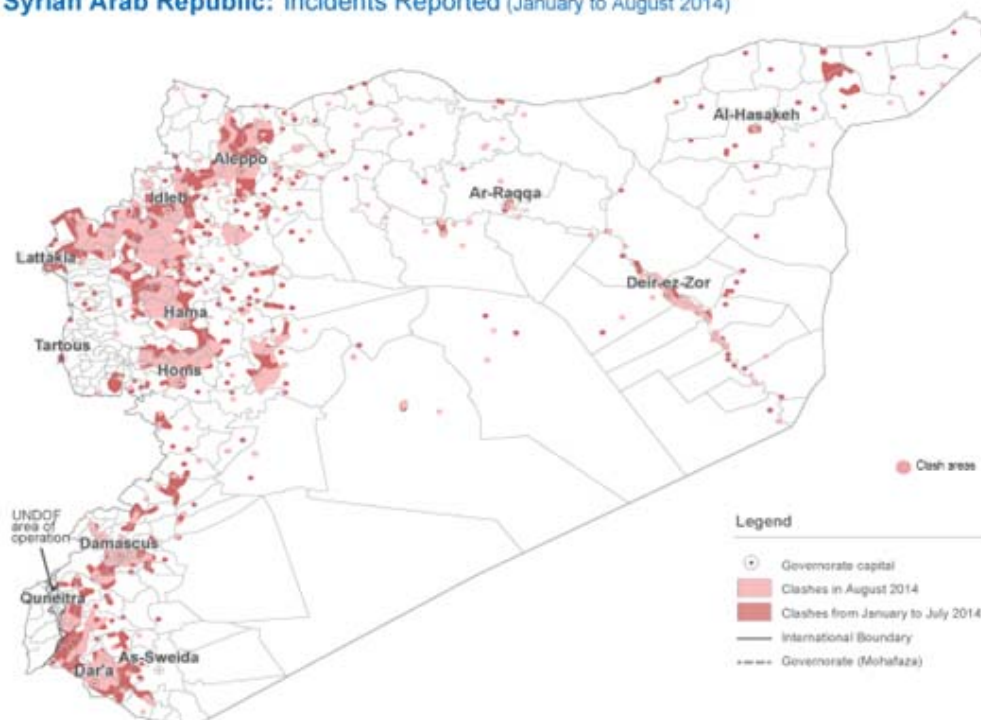
The humanitarian situation in Syria continues to deteriorate at an alarming pace, with fierce fighting prompting increasing level of civilian casualties, massive internal displacement, increased violation of IHL and HRL, and mounting refugee flows. Sustained and escalating violence, the unraveling of public services, deepening recession, and bilateral and financial sanctions, among other factors, further drive and exacerbate the crisis.

### Escalating conflict

Throughout 2014, armed conflict in Syria continued unabated, with warring parties, including government forces, non-state armed groups (NSAGs) and listed terrorist groups, fighting aggressively to maintain and expand their areas of influence and/or gain control of main and strategic roads, large settlements and administrative centers and critical resources, including energy. In 2014, ISIL had almost completely taken over the governorate of Deir ez Zor, gained influence over large swathes of territory in north-eastern Syria (Al Hassakeh, Al Raqqa, and areas of Aleppo), and commenced an advance toward eastern Homs, Ain Al Arab, and Salamiyeh in Hama.

Since 2011, regional and international powers have continued to influence the conflict through the provision of financial and material support to warring parties. In late September 2014, rapid ISIL gains brought international engagement to a new level with the US leading an international coalition to carry out airstrikes against ISIL targets in Iraq and Syria. Coalition airstrikes have since hit hundreds of ISIL targets, as well as the Al Qaeda affiliated Kurasan group. ISIL continues to gain ground however, inflicting extreme violence against civilians, fuelling internal displacement, ethnic and religious strife and inhibiting humanitarian access.

**Syrian Arab Republic: Incidents Reported (January to August 2014)**



Creation date: 29 October 2014 Source: Various Feedback: [ochasyria@un.org](mailto:ochasyria@un.org)  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.





## Sustained and escalating violence and IHL violations lead to a protection crisis

Throughout 2014, IHL and HRL violations by all parties to the conflict continued at scale, resulting in widespread civilian deaths, casualties, and displacement. Government forces, ISIL, ANF and other individuals, groups, and entities associated with Al-Qaida were reported to have committed crimes against humanity, including murder, torture, rape, enforced disappearances and other inhumane acts. Children have not been exempt from the conflict. Grave violations against children have occurred, including killing and maiming, child recruitment and use by armed groups; abduction, arbitrary detention, and ill treatment/torture, and sexual violence against girls and boys.

The constantly fluctuating frontlines, increased use of force and regionalization of the conflict, as well as significant changes in areas of control have not only contributed to a worsening of the humanitarian situation but have further complicated protection monitoring and protection service delivery.



**212,000**  
people remained trapped in  
**11** besieged locations

Defying UNSCR 2139 and 2165, the government continued to use heavy weapons and drop barrel bombs in densely populated areas, killing and injuring thousands of civilians and indiscriminately destroying civilian property and infrastructure. NSAGs also indiscriminately shelled civilian neighborhoods. Indiscriminate and disproportionate aerial bombardment and shelling led to mass civilian casualties and spread terror.<sup>8</sup>

2014 saw continued reports of the use of sieges as a weapon of war by parties to the conflict, exacerbating Syria's already grave humanitarian situation. By the end of October, it was estimated that some 212,000 people remained trapped in 11 besieged locations<sup>9</sup>. Food insecurity, widespread across the country, remains profound in besieged areas. Hundreds of thousands of people continue to suffer from hunger, malnutrition and in the most extreme cases, starvation and are unable to access critical life-saving medicines and supplies. Other locations, such as the opposition held areas of Aleppo city and the government held parts of Deir-ez Zor city, are at risk of becoming besieged due to current conflict dynamics.

The unabated continuation of the armed conflict, without any concerted effort to prioritize the rights of civilians to effective protection threatens to undermine the neutrality of humanitarian activities, damages the integrity and credibility of humanitarian actors and renders legitimate protection interventions vulnerable to politicization and manipulation.

It has been estimated that, as of August 2013, some 560 medical personnel have been killed<sup>10</sup>, and 200 medical facilities attacked, and attacks on humanitarian workers and civilian infrastructure continue unabated.

Extensive human rights violations by ISIL and ANF have been reported such as killings, kidnapping, and indiscriminate targeting of minority communities (such as Christians, and Kurds). Executions in public spaces have also become common on Fridays in Al Raqqah and Aleppo governorate, with victims usually accused of being affiliated with other armed groups, including the Syrian National Coalition (SNC), spying for the government, or violating the ISIL criminal code<sup>11</sup>. There have also been cases of lapidation for alleged adultery. In addition, ISIL has destroyed religious shrines and heritage sites deemed incompatible with its strict interpretation of Islam.

<sup>8</sup> 8th report of the Independent International Commission of Inquiry on The Syrian Arab Republic (13 Aug 2014) OHCHCR

<sup>9</sup> For the purposes of the Syrian conflict, OCHA defines a 'besieged area' as an area surrounded by armed actors with the sustained effect that humanitarian assistance cannot regularly enter, and civilians, the sick, and the wounded cannot regularly exit the area.

<sup>10</sup> Anatomy of a crisis, A map of attacks on healthcare in Syria (Aug 2014), Physicians for Human Rights

<sup>11</sup> 8th Report of the Independent International commission of Inquiry on the Syrian Arab Republic, UN General Assembly, August 2014

## Mass forced displacement

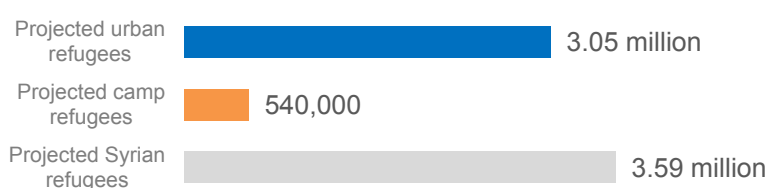
As violence prevails and escalates in many heavily populated areas, large population displacement continues to occur, increasing vulnerability among affected populations, including both IDPs and host communities. There are also growing concerns about the ability of people to reach Syria's borders and to access protection in host countries in the region and beyond. Cases of access denials and admissions are reportedly on the increase.

An increasing number of IDPs have been displaced multiple times and left with depleted or no assets. Only a small percentage of IDPs, usually the most vulnerable, moved to informal or formal settlements or shelters, which are often overcrowded and unsanitary. Normally, IDPs prefer other preferable solution, i.e. living with hosting community, rented accommodation or in collective centres before moving to settlements.

All nine Palestine refugee camps in Syria have been severely affected by the conflict, causing extreme hardship and widespread displacement. As of August 2014, out of 560,000 Palestinian refugees registered with UNRWA in Syria, it was estimated that over 50 percent, or 280,000 people, were internally displaced and some 80,000 had sought refuge in neighboring countries<sup>12</sup>. With their social structures and support networks severely disrupted and their coping mechanisms all but exhausted, the vast majority are now unable to meet their daily needs. The humanitarian situation in Yarmouk, where 18,000 civilians remain besieged, is particularly desperate.

Out of **560,000** Palestinian refugees registered with UNRWA in Syria, it was estimated that **over 50%**, or **280,000** people, were internally displaced and some **80,000** had sought refuge in neighboring countries.

Despite difficulties reaching Syria's borders and accessing host countries. As of 22 October 2014, UNHCR reports that 3.2 million Syrian refugees and people of concern have fled to neighbouring countries and the rest of North



Africa,<sup>13</sup> of which 3.02 million have been registered and 80,000 are awaiting registration, an increase of approximately 720,000 people in 2014 alone. In addition, the government of Turkey reports that an additional 744,000 unregistered Syrians have fled to Turkey<sup>14</sup>.

On average, more than 100,000 new arrivals have been registered each month since the beginning of 2014 and, by the end of the year, it is estimated that countries in the region will be hosting 3.59 million Syrian refugees, including 540,000 camp refugees and a projected 3.05 million urban refugees.<sup>15</sup> As their situation grows ever more protracted, durable solutions - local integration, third country resettlement, or repatriation – remain realistic options for only a few in the short- to medium-term, while strain on systems, infrastructure, and resources in host countries continued to increase.

Asylum space for those seeking to find refuge outside of Syria is shrinking, with neighbouring countries, such as Lebanon and Jordan, having closed their borders a number of times in 2014 to prospective Syrian refugees or limited the number of refugees permitted to enter.<sup>16</sup>

<sup>12</sup> UNRWA, September 2014

<sup>13</sup> UNHCR, 22 October 2014, Syria Regional Refugee Response-Inter-agency Information Sharing Portal, <http://data.unhcr.org/syrianrefugees/regional.php>

<sup>14</sup> UNHCR Turkey data factsheet, September 2014

<sup>15</sup> 2014 Strategic Response Plan: Strategic Overview, Mid-Year Update, UNHCR, July 2014.

<sup>16</sup> Hypocrisy and Syrian Refugees, Human Rights Watch, 28 October 2014

## Reduced availability, quality and access to essential service



Water has now decreased to less than **50%** of its pre-crisis level

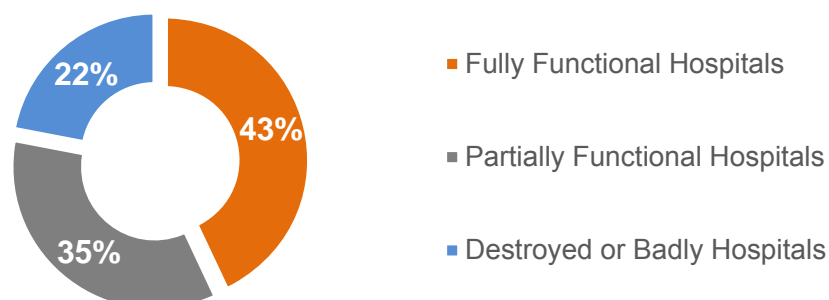


**1,480** women give birth in dire conditions every day due to the breakdown of the health-care system



By the end of 2013, **over half** of Syria's children were reported not to be attending school

Access to basic social services continued to deteriorate due to infrastructural damage, lack of maintenance, and insecurity. Healthcare services, including hospitals and local health centers, have closed or are operating at reduced capacity due to a collapsed healthcare infrastructure and severe shortages of medicines, supplies, and healthcare professionals. It has been estimated that, as of December 2013, almost 50 percent of Syria's physicians have fled the country. More than half of Syria's hospitals have been destroyed or badly damaged and, today, it is estimated that only 43 percent of hospitals are fully functional.<sup>17</sup>



With an acute shortage of adequate reproductive health services, breakdown of healthcare systems, scarcity of health personnel, and interruption of reproductive health supplies, an estimated 1,480 women gave birth in dire conditions every day.<sup>18</sup>

Vaccination coverage has also dropped sharply since the onset of conflict, due to destruction of health facilities, attrition of health staff, damaged cold chain equipment, and shortages of vaccines, among other factors. In 2013, Syria witnessed its first outbreak of polio since 1999 and, in 2014, a decrease in the routine vaccination in hard to reach areas saw continued measles and pertussis outbreaks occur there. In addition, patients who were previously reliant on the private health system and were able to cover their medical fees in 2010 are progressively becoming dependent on an overburdened public health system.

At the same time, water borne diseases are on the rise throughout Syria as per capita availability of safe drinking water has now decreased to less than 50 percent of its pre-crisis level, sewerage systems are damaged, and garbage is not collected systematically. Access to basic education has continued to deteriorate with the Ministry of Education estimating that, since 2011, it has lost some 52,000 teachers from its ranks (the true number, including those from opposition-held areas, is thought to be much higher).<sup>19</sup> More than 24 percent of Syrian schools have been damaged,

<sup>17</sup> UNICEF, 2014.

<sup>18</sup> UNFPA, 2014.

<sup>19</sup> Futures under threat: The impact of the education crisis on Syria's Children, Save the Children, 2014.

destroyed, or occupied by displaced people<sup>20</sup>. By the end of 2013, over half of Syria's children were reported not to be attending school.<sup>21</sup>

## Deepening economic crisis

A confluence of factors have contributed to Syria's economic decline, including destruction of assets, rising fuel prices, widespread insecurity, power shortages and unilateral economic and financial sanctions.

A deep economic recession, fluctuating national currency, sanctions, vastly increased food and fuel prices, and disruption of markets have contributed to extreme vulnerability of Syrians across the country. Increasing poverty, economic disparity, and rising unemployment, now estimated at 54.3 percent of the labor force, 79 percent of whom lost their jobs since the onset of the crisis, have left a large proportion of youth unemployed and disillusioned. As more and more people seek refuge abroad, the country is facing a critical 'brain drain' of professionals, including teachers, healthcare professionals, and skilled laborers.

By May 2014, tens of thousands of businesses had been closed across the country and it was estimated that 2.67 million people, who supported some 11 million dependents, had been laid off.<sup>22</sup> The value of the Syrian pound has dropped from trading at 47 pounds per US dollar in 2011 to 157 pounds per US dollar in May 2014.<sup>23</sup>

Purchasing power has further declined as food, fuel, and medicine prices have skyrocketed; by the end of 2013, it was estimated that the Consumer Price Index had increased 178.7 percent since the conflict commenced.<sup>24</sup> The price of bread and cereals, important staples in Syria, are reported to have increased, on average, some 300 percent, with prices in specific areas reported to have risen to as much as 1,000 percent from their pre-conflict equivalents.<sup>25</sup> On 30 September, the Syrian parliament voted to raise the price of gasoline from 120 to 140 Syrian pounds; in 2011, one liter of gasoline cost 40 Syrian pounds.<sup>26</sup>

Figure 3: January 2013 to October 2014 Fuel Price Tracking (Syrian Pounds)



20 Futures under threat: The impact of the education crisis on Syria's Children, Save the Children, 2014.

21 World Bank, 2014.

22 Syria Squandering Humanity – Socio-economic Monitoring Report on Syria, Syria Centre for Policy Research, May 2014.

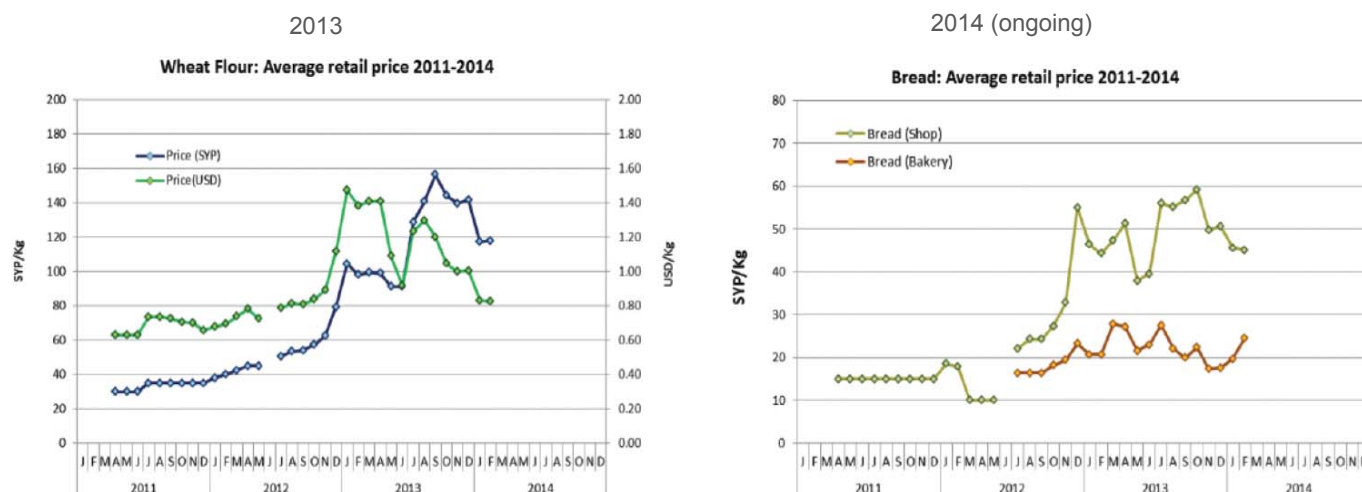
23 Cold Winter Coming: Syria's Fuel Crisis, Carnegie Endowment, October 2014.

24 Syria Squandering Humanity – Socio-economic Monitoring Report on Syria, Syria Centre for Policy Research, May 2014.

25 Assessment on the needs and humanitarian situation within Syria: Thematic Situational Analysis, REACH, May 2014;

26 Cold Winter Coming: Syria's Fuel Crisis, Carnegie Endowment, October 2014.





Source: WFP/OSZA(VAM) Food and Commodity Prices Data Store.

## Humanitarian impact of sanctions

Sanctions imposed on Syria by a number of countries and organizations since 2011 have also contributed to heightened vulnerability among the Syrian population. Although sanctioning parties have recognized the need for exceptions to enable the provision of humanitarian aid, the sanctions have nonetheless had a negative impact on all the critical humanitarian sectors.

For example, the health sector in Syria, although not directly targeted by sanctions, has been severely affected due to the negative impacts on local production of pharmaceuticals, shortages of blood testing products/kits and medical equipment and supplies, which are not produced locally and can no longer be imported, and difficulties in maintaining requisite supplies of reproductive health medicines, supplies and commodities.

Similarly, although food and other humanitarian goods are nominally exempt from sanctions, the decline in local production, the increase in imports and difficulties in import transactions created price inflation for those commodities once available on the Syrian market. This in turn has intensified hardships and increased humanitarian needs in the food sector through commodity shortages, high prices of food, agricultural inputs, fuel and deteriorating public services.

Food security is further undermined by a significant drop in agricultural production. Sanctions on imports have exacerbated the shortages of agricultural inputs, crop-protection materials, diesel, spare parts for machinery, fertilisers, as well as led to an increase in the transportation costs of assistance throughout the country. Furthermore, with vaccines for livestock no longer produced in the country and sanctions hindering imports, veterinary services have deteriorated.

Difficulties were also reported by the WASH Sector with regards to the purchasing of raw materials for rehabilitation purposes and importation of chlorine.

Educational services in Syria have also been severely impacted. Printing of books, for example, is no longer done locally due to damages to the infrastructure and difficulty of importing new equipment for such books printing.

## Drought

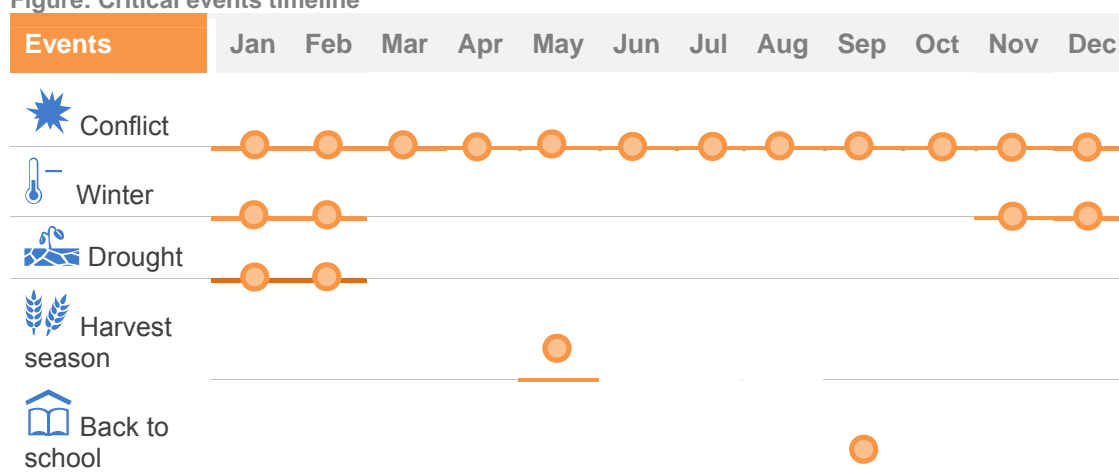
In 2014, severe drought conditions compounded the impact of conflict on local food production capacities which, prior to the conflict, had left Syria with an exportable agricultural surplus. Combined with the cumulative effects of conflict, this saw the 2014 cereal harvest reduced to some 2.4 million tons, a 31 percent reduction compared to the 2012/13 harvest, which was already below average.

The drought also severely depleted groundwater sources in Syria, where it is estimated that 38 percent of drinking water supplies is derived from wells and 20 percent from springs. For example, the average discharge of Fijeh Spring, which is located on the outskirts of Damascus and supplies water for over 2 million people in Damascus and Rural Damascus, decreased over 70 percent in the summer of 2014 against its long term average.

The drought also affected shallow aquifers and wells, important backup solutions now that the supply of piped water is disrupted and trucked water is unaffordable. In Rural Damascus, 37 percent of wells are reported to be out of service due to drought and power shortages.

<sup>27</sup>	Pre/start-Crisis	Current
Average rural water consumption <sup>28</sup> (l/c/d)	129	30
Average urban water consumption <sup>29</sup> (l/c/d)	150	100
Hours of water supply	20	6
Governorates most susceptible to water scarcity	Hassakeh (60-90% displacement), Raqqa, Dier Az Zour in 2008/9)	Potentially all those reliant on groundwater sources
Governorates most reliant on groundwater	Hassakeh, Rural Damascus, Dara'a	Hama, Damascus, Homs, Tartous, Sweida, Daraa, Quinetra, Hassakeh, Lattakia
Governorates most reliant on surface water	Raqqa, Dier Az Zour, Homs	Raqqa, idleb, Dier Az Zour, Aleppo
Wastewater system coverage (estimated)	70%	30%

Figure: Critical events timeline



Source: OCHA

<sup>27</sup> National WASH sector workshop, Damascus, April 2014

<sup>28</sup> Ranging between 50 to 3 l/c/d

<sup>29</sup> Ranging between 125 to 50 l/c/d

## DEMOGRAPHIC PROFILE AND AFFECTED POPULATION

### HIGHLIGHTS (AS OF 27 OCTOBER 2014)

10.8 million Displaced (inside and outside the country)

7.6 million IDPs, including 3.5 million children

3.2 million refugees and people of concern in neighboring countries and beyond

560,000 registered Palestine refugees, of whom 280,000 are displaced

40,000 non-Palestine refugees inside Syria

6,500 foreign migrant workers

3.4 million pregnant women

### Demographic profile

Prior to the conflict, Syria experienced sustained population growth, however since the onset of hostilities in 2011, population growth has slowed considerably as reported by ESCWA in September 2014.

As of 2013, in the absence of official statistics on the number of people remaining in the country, the total population of Syria was estimated to be 18.18 million<sup>30</sup>. In 2013, the World Bank estimated that the urban / rural population ratio 56.9 percent / 43.1 percent.

With the continuous escalation of the conflict and outflow of refugees, UNHCR estimates that countries in the region will be hosting 3.59 million Syrian refugees, including 540,000 camp refugees and a projected 3.05 million urban refugees by the end of 2014.<sup>31</sup>

If the conflict persists, UNHCR estimates that a further 900,000 Syrian refugees will flee to the five main host countries in the region in 2015, bringing the total refugee planning figure to around 4.6 million.

### Affected Population

The protracted conflict and insecurity has severely impacted the lives of ordinary Syrians. The highest numbers of 191,000 documented killings were recorded in the governorates of Rural Damascus, Aleppo, Homs, Idleb, Dar'a, and Hama, with some 85.1 percent (162,925 people) of victims reported to be male, and 9.3 percent (17,795 people) female.<sup>32</sup>

As the conflict enters its fourth year, the 7.6 million IDPs are particularly affected by the crisis, and are in urgent need of both immediate assistance as well as durable solutions.

The conflict directly impacts IDPs, host communities and other populations alike. As the violence lingers and escalates in areas that are heavily populated, large-scale population movements

30 UN-ESCWA, 2014 New York, 'Conflict in the Syrian Arab Republic-Implications on macroeconomic and challenges for meeting the Millennium Development Goals', p7

31 2014 Strategic Response Plan: Strategic Overview, Mid-Year Update, UNHCR, July 2014.

32 Updated Statistical Analysis of Documentation of Killings in the Syrian Arab Republic - Commissioned by the Office of the UN High Commissioner for Human Rights

continues to occur, both at intra and inter-governorate levels,<sup>33</sup> while areas hosting IDPs suffer increased strain on already overburdened public services and resources.

Many Syrians have been displaced several times throughout the conflict. Displacements have principally taken place from rural to urban areas, creating large concentrations of IDPs in major cities, with important instances of urban to rural displacement in other areas, including Aleppo and Deir-ez-Zor. Conflict related displacement is also reported within cities themselves (i.e.: from one neighbourhood to another).

In 2014, both host communities and displaced persons continued to resort to negative coping mechanisms, including removing children from school, reducing quality and quantity of foods consumed, residing in crowded and unclean shelters, sending their children to work and other risky income-generating activities. Given the declining capacity of host communities to cope with the crisis themselves, let alone support displaced people, continued displacement is expected in 2015.

Sharp increases in fuel prices and shortage of basic supplies also exacerbated pre-existing vulnerabilities in areas, which had comparatively low development indicators prior to the conflict such as Al Raqqa, which witnessed an increase of 51 percent or 251,000 people in need since May 2014, and Deir-ez-Zour, where needs increased an estimated 12 percent since May 2014. In Idlib, despite improved humanitarian access and coverage of needs by both cross-border and cross-line actors, the number of people in need has increased by 28 percent, or 311,000 people since May 2014.

As of 26 October 2014, over 175,000 IDPs were residing in 139 informal IDP camps and settlements in areas bordering Turkey and Jordan, including some 53 percent women, 48 percent men, 60 percent adults and 40 percent children<sup>34</sup>. Accordingly, most IDPs remained heavily reliant on host community support, increasing their vulnerability. As of the end September, the Syrian Ministry of Local Administration (MoLA) reported that 183,270 individuals are residing in 997 public collective shelters across all 14 governorates. However, the data has some limitations as it only covers areas accessible by MoLA staff.

Of approximately 560,000 Palestine refugees registered in Syria, over 280,000 (50 percent) are now internally displaced and a further 80,000 are externally displaced, primarily in Lebanon, Jordan, Egypt and European countries.

The situation of Palestine refugees in Syria is of particular concern. UNRWA reports that 460,000 Palestine refugees in Syria are dependent on UNRWA to meet their minimum humanitarian needs as a result of the conflict, representing approximately 94 percent of the registered Palestine refugee population remaining in Syria. Tens of thousands of Palestinian refugees continue to live in areas of active conflict, such as Yarmouk, Khan Eshieh and Qudsaya in Damascus governorate, Dar'a Camp and surrounding villages in Dar'a governorate, and Neirab Camp in Aleppo governorate. These communities live in a state of profound vulnerability, with civilians frequently exposed to life-threatening levels of deprivation.

There are 40,000 refugees and asylum-seekers registered with UNHCR, predominantly Iraqis. The main challenges and concerns for refugees and asylum-seekers in Syria include their exposure to conflict and violence and the lack of valid documentation. The latter hinders their freedom of movement, as well as contributes to limited access to basic services, such as health and education and increasing serious risks of arrest, detention and deportation. Securing safe

<sup>33</sup> Squandering Humanity May 2014.

<sup>34</sup> According to Camp Coordination and Camp Management (CCCM) Cluster estimates (September 2014)

shelters for these refugees continue to be a serious challenge, as they are caught in areas of ongoing armed conflict between warring parties.

IOM estimates that more than 6,500 vulnerable foreign migrant workers remain in Syria, with over 300 stranded migrants in hard to reach areas in Aleppo governorate. Typically, migrant foreign workers faced additional risks and challenges in areas of extreme social and civil unrest. These migrants are particularly vulnerable due to absence of consular assistance, loss of documentation, exposure to exploitation physical, verbal and sexual abuse and limited access to healthcare. Under the current circumstances, migrant workers are at high risk of labour exploitation and human trafficking. Supporting the return of these migrant workers has also been increasingly problematic with required departure taxes, documentation and insecurity along key migration routes are major challenges.

In a pre-departure survey conducted for departing third country national (TCNs) assisted by IOM, to which stranded migrants belong, 82 percent expressed that they faced difficulties in accessing food and 80 percent faced difficulties in accessing health services before repatriation. 73 percent of assisted TCNs were female migrants.

Women and children and youths are also particularly affected by the conflict. In 2014, UNFPA estimated that 200,000 pregnant women in Syria continued to suffer multiple challenges, such as psychological difficulties, nutritional shortages and complications due to early pregnancies.

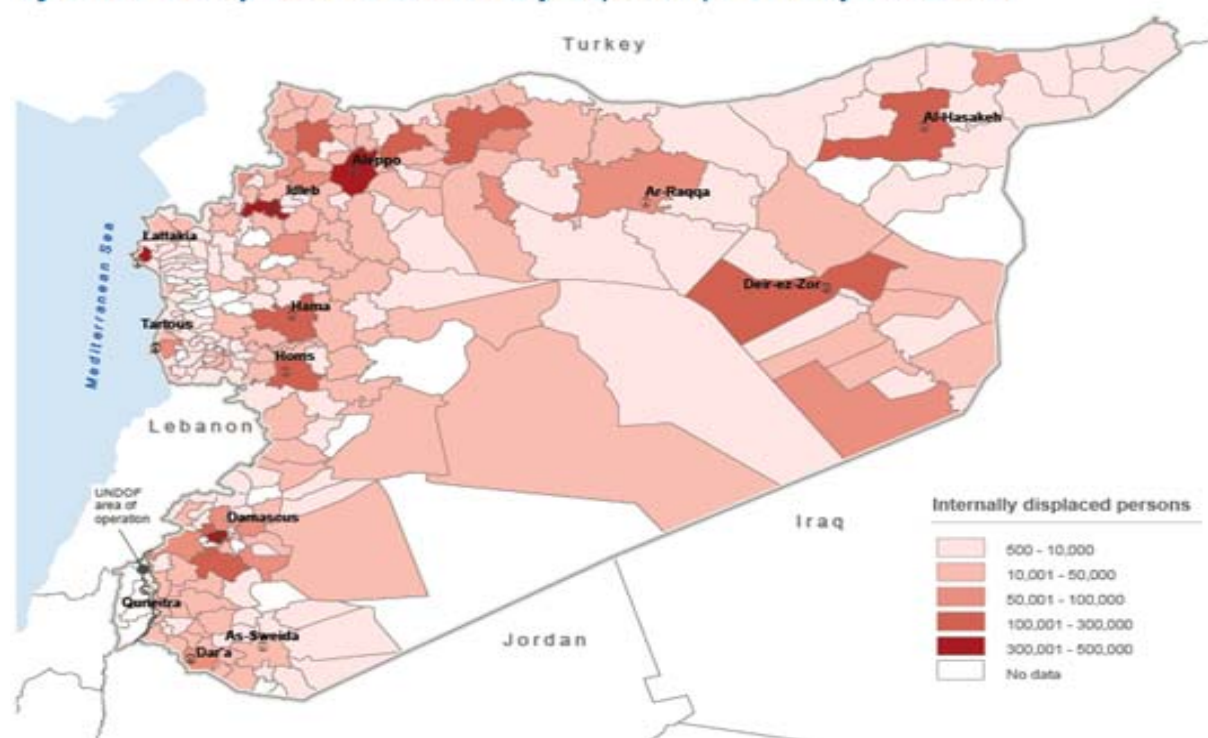
Incidents of sexual and gender based violence (SGBV) are also on the rise<sup>35</sup>. Women and girls are at particular at risk of sexual violence due to forced displacement, family separation, lack of basic structural and societal protections, and limited availability and safe access to services.<sup>36</sup> This is within the context of evolving gender dynamics, driven by factors such as security, stress on economic resources, restrictions on mobility and increasing revival of conservative traditional norms, particularly in areas controlled by extremist religious groups. Further, provisions in statutory law and customary practices entrench discrimination and violence against women and girls.

<sup>35</sup> Aliyah Sarkar (June 2014): The Syrian Conflict and Gender Dynamics: Society, Violence and peace process.

<sup>36</sup> Global Protection cluster, the Hidden cost of War: Gender-based violence, May 2013



## Syrian Arab Republic: Total Internally displaced persons by sub-district



Creation date: 29 October 2014 Source: Various Feedback: [ocha-syria@un.org](mailto:ocha-syria@un.org)

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.



## 2015 OUTLOOK

In 2015, in the absence of a viable peaceful and reconciliation process, the number of IDPs and affected people in Syria is expected to increase, concurrently with the increase in the number of refugees seeking refuge outside the country, should asylum space be preserved. In addition, it is expected that, in areas hosting large concentrations of people in need, the capacity of public services and infrastructure will remain overwhelmed. In those areas, erosion of coping mechanisms among both IDP and other affected communities, as well as a continued lack of access to basic supplies, such as food, water, essential non-food items, is anticipated.

## HUMANITARIAN NEEDS

### HIGHLIGHTS (AS OF 27 OCTOBER 2014)

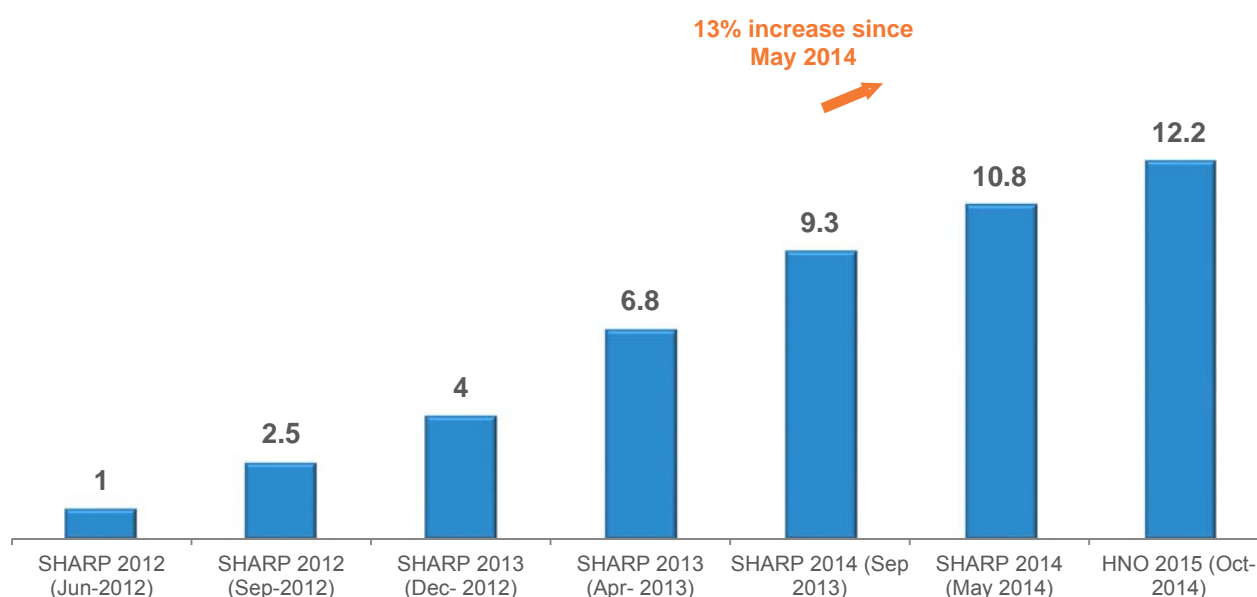
**12.2 million People in need inside Syria, including over 5 million children**

### Overview

As of 27 October 2014, the UN estimates that the number of people in need of humanitarian assistance in Syria has grown to 12.2 million, including over 5 million children and more than 7.6 million IDPs.<sup>37</sup> Of this total, the UN estimates that 4.8 million are located in hard to reach areas.

The humanitarian community faces vast challenges in its efforts to collect accurate, up-to-date data on the population in need in Syria, due to widespread insecurity and other challenges associated with implementing needs assessments. UN estimates of people in need of assistance and IDPs are based on its latest assessments and data which humanitarian actors operating within Syria and from neighbouring countries have made available. For this overview, the Multi-Sector Needs Assessment (MSNA), conducted in August 2014 and collecting primary data in 114 sub-districts (and 12 city sectors), the Governorate Profiles, updated in October 2014 and covering all 270 sub-districts, and the September 2014 Area of Origin (AoR) assessments acted as the primary basis for the definition of the humanitarian caseload at inter-sectorial level (See Annex II for methodological details).

### Number of people in need (in millions)



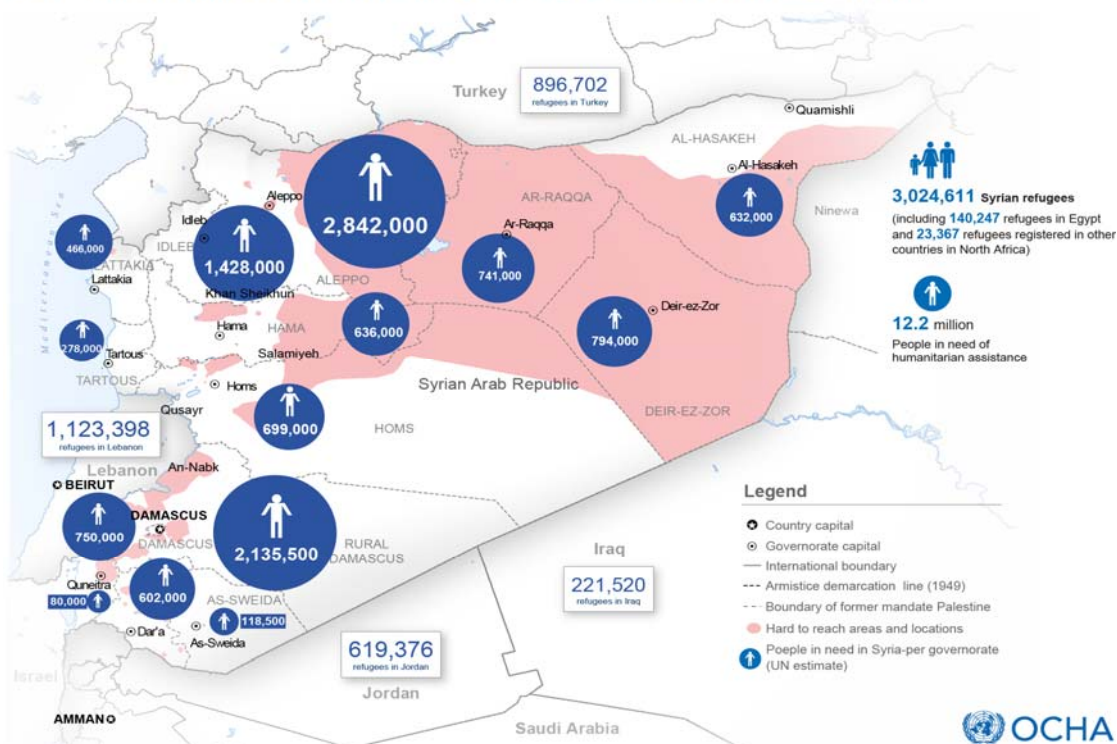
<sup>37</sup> Based on UNICEF estimates of children to be 47% of PiN

Table: Comparison PIN/ IDPs- SHARP 2014/ HNO

Gov. (AR)	Total Pop 2011*	SHARP 2014 (Sep-2013)		SHARP revision (May-2014)		HNO 2015 (Oct-2014)	
		IDPs	PIN	IDPs-SHARP revision (May-2014)	PIN-SHARP revision (May-2014)	IDPs-SHARP 2015 (Oct-2014)	PIN-SHARP 2015 (Oct-2014)
Aleppo	4,867,991	1,735,000	2,450,000	1,787,000	2,575,000	1,755,500	2,824,000
Rural Damascus	2,835,996	782,000	1,600,000	770,000	1,654,000	1,388,000	2,135,500
Idlib	1,501,000	570,000	900,000	708,000	1,117,000	918,000	1,428,000
Damascus	1,754,000	318,000	620,000	410,000	820,000	437,000	750,000
Homs	1,803,017	588,000	680,000	560,000	748,000	493,000	699,000
Deir-ez-Zor	1,239,005	420,000	500,000	441,000	711,000	464,000	794,000
Al-Hasakeh	1,512,025	295,000	319,000	197,500	582,000	249,000	632,000
Hama	1,628,006	423,000	650,000	245,500	533,000	453,000	636,000
Dar'a	1,027,006	275,000	400,000	266,000	517,000	391,000	602,000
Ar-Raqqa	944,000	255,000	290,000	177,000	490,000	168,000	741,000
Tartous	797,003	500,000	550,000	452,000	472,500	202,000	278,000
Lattakia	1,008,003	222,000	240,000	300,000	363,500	584,000	466,000
As-Sweida	370,004	77,000	95,000	69,000	133,500	73,000	118,500
Quneitra	90,000	52,000	53,000	72,000	87,000	57,000	80,000
<b>Grand Total</b>	<b>21,377,056</b>	<b>6,512,000</b>	<b>9,347,000</b>	<b>6,455,000</b>	<b>10,803,500</b>	<b>7,632,500</b>	<b>12,184,000</b>

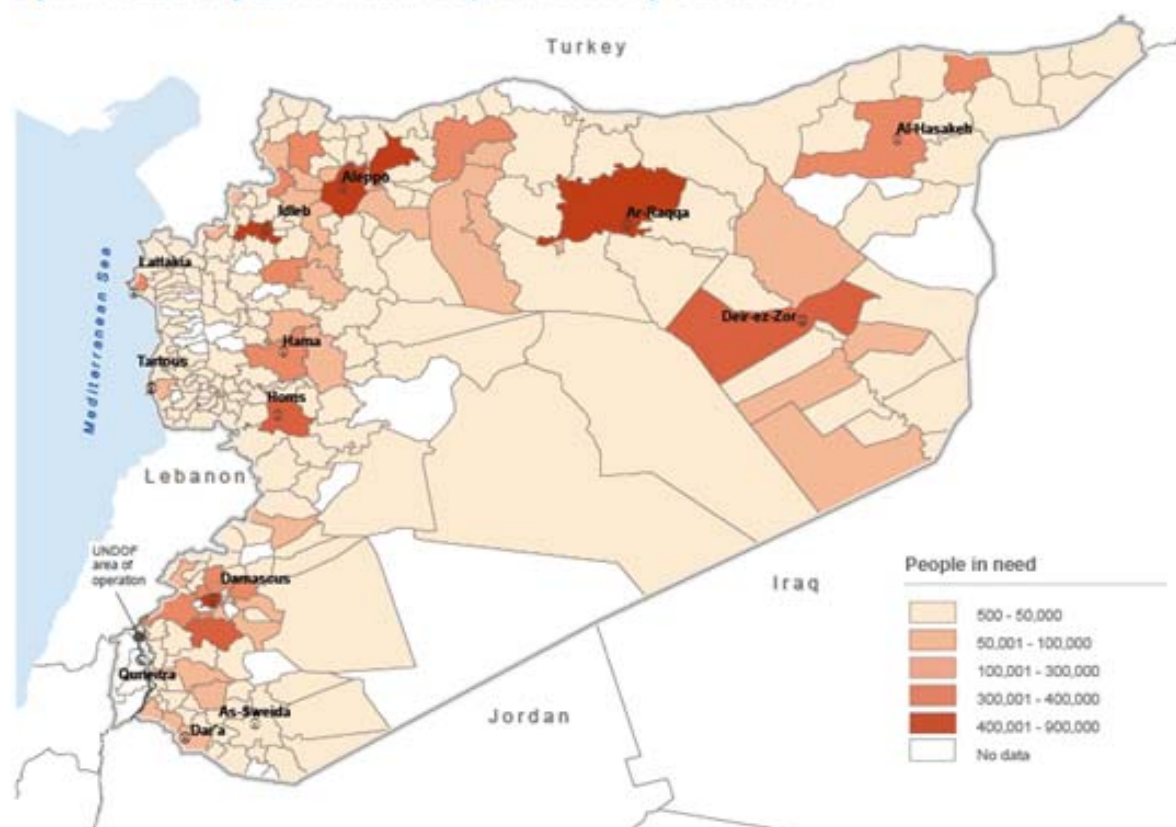
As a result of the conflict, needs in Syria are continuing to grow. Affected locations tend to be those witnessing active conflict and/or large-scale displacement or struggling to absorb large influxes of IDPs. The highest concentration of people in need continues to be reported in Aleppo, Rural Damascus, Idlib and Deir-ez-Zor governorates, with Aleppo hosting the largest number of IDPs, due in part to recent ISIL expansion, and Rural Damascus experiencing the largest IDP influx since May 2014.

#### Syrian Arab Republic: People in Need by governorate (as of 28 October 2014)



Overall, the humanitarian situation has deteriorated from severe in 2013 to acute by the end of 2013, due to gaps in all life-saving sectors. Areas under ISIL control, in particular, are witnessing significant increases in the number of people in need, due to targeting of oil infrastructure and the coalition airstrikes.

### Syrian Arab Republic: Total People in Need by sub-district



Creation date: 29 October 2014 Source: Various Feedback: ocha@un.org  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.



### Vulnerability scoring

Humanitarian actors operating in Syria face a number of challenges including estimating what and where the needs are, obtaining adequate funding to respond, overcoming administrative hurdles to enable goods and services to reach those in need, physical access negotiations with armed groups, and monitoring the response as well as planning for future needs. To improve the humanitarian community's needs analysis, the sectors and OCHA have developed an approach that takes into account all available information on the humanitarian situation, using proxy indicators where necessary, to define the level of need by province. Ultimately, this ranking is intended to help humanitarian practitioners prioritise their response.

Given these difficulties, the sector prioritization of humanitarian needs for the HNO was done according to a severity scoring approach. The tool provided a structured way to compare perceived humanitarian needs and the impact of the conflict, against the estimated vulnerabilities across geographic areas and sectors, combining data on different aspects of the crisis and from various sources in a consistent way. The methodology used for the needs analysis is intended as an objective basis for identifying relative humanitarian needs. It cannot fully reflect all the complex and local factors that might influence the humanitarian situation. It should inform, but not dictate, the decision of humanitarian donors, organisations and clusters on where to allocate resources. The emphasis should be on prioritising resources in a principled and transparent manner.



In the vulnerability scoring tool, for one given row, a score per sector was calculated by dividing the severity score with the maximum severity score, and then calculating an overall score for that row by taking a geometric mean<sup>38</sup> for all sectors.

A score per population was also weighed so to provide an understanding of the scope and scale, as well as the magnitude of the needs.

## GEOGRAPHICAL PRIORITIZATION OF HUMANITARIAN SECTORS

Governorate	RANK by Score	Overall Score	Education	Food Security	Health	NFIs	Shelter	WASH	Early Recovery	Access	Protection	Population 2011
Dara	1	0.61	0.89	0.53	0.57	0.75	0.52	0.61	0.69	0.56	0.49	1,027,006
Aleppo	2	0.54	0.64	0.51	0.55	0.46	0.58	0.46	0.61	0.51	0.57	4,867,991
Deir-ez-Zor	3	0.51	0.67	0.38	0.41	0.40	0.41	0.62	0.58	0.68	0.61	1,239,005
Ar-Raqqa	4	0.51	0.67	0.44	0.47	0.40	0.38	0.57	0.59	0.67	0.50	944,000
Rural Damascus	5	0.49	0.66	0.62	0.26	0.66	0.55	0.37	0.62	0.53	0.37	2,835,996
Quneitra	6	0.48	0.58	0.58	0.74	0.67	0.52	0.35	0.42	0.28	0.38	90,000
Idleb	7	0.47	0.56	0.46	0.36	0.46	0.45	0.46	0.64	0.40	0.49	1,501,000
Al-Hasakeh	8	0.45	0.62	0.54	0.40	0.52	0.35	0.41	0.49	0.36	0.41	1,512,025
Homs	9	0.38	0.63	0.54	0.20	0.44	0.56	0.38	0.43	0.16	0.36	1,803,017
Hama	10	0.36	0.51	0.39	0.21	0.37	0.48	0.33	0.44	0.22	0.43	1,528,006
Damascus	11	0.31	0.50	0.33	ND	0.50	0.33		0.39	ND	0.55	1,754,000
Lattakia	12	0.28	0.57	0.41	0.11	0.45	0.42	0.35	0.31	0.08	0.25	1,008,003
As-Sweida	13	0.21	0.26	0.33	0.06	0.36	0.50	0.34	0.36	0.06	0.12	370,004
Tartous	14	0.21	0.36	0.42		0.17	0.40	0.22	0.35	0.05	0.38	797,003

Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

## Key highlights

The severity scoring exercise identified Dar'a, Aleppo, Deir-ez-Zor, Al Raqqa, and Rural Damascus as the top five governorates with the most acute needs. Nonetheless, many the remaining governorates were recognised by the sectors as having critical needs. Equally, some sub-districts with a low overall vulnerability scoring may include areas, such as besieged and hard to reach where acute needs are reported.

Deir-ez-Zor, Al Raqqa, Dar'a, Rural Damascus, and Aleppo were ranked as the governorates most difficult to access. In Dar'a, Aleppo and Rural Damascus, sustained armed conflict continues to hamper access. The use of indiscriminate heavy weapons is common in all three of these governorates, leading to continuous displacement and interruption of public services and road networks. Moreover, all of the besieged areas are located within Aleppo and Rural Damascus governorates. Access to these areas is constrained as described in the access chapter.

<sup>38</sup> The geometric mean is a type of mean or average, which indicates the central tendency or typical value of a set of numbers by using the product of their values (as opposed to the arithmetic which uses the sum). The geometric mean is defined as the nth root of the product of n numbers.



## SECTORAL ANALYSIS



### Protection and Community Service Sector

#### People in Need for the Sector

12.2 million people have been affected by the crisis including 7.6 million people who have been internally displaced.

#### Rationale for estimating People in Need for Sector

The conflict in Syria has been characterized from the onset by wide scale, grave IHL and human rights violations and abuses committed against civilians.

### Overview

There have been significant changes in the overall dynamics of the conflict in Syria marked by new and fluctuating frontlines, higher intensity, increased regionalization, and significant changes in areas of control. The intensification has led to increased levels of violence, brutality, targeting and destruction of basic social services, especially schools and hospitals. The prominence of ISIL and increased fighting between various armed groups across the country have led to significant levels of violence and internal displacement. Civilian deaths continue to increase. The UN has documented over 191,000<sup>39</sup> people killed and estimates that 1 million have been injured since the start of the conflict.<sup>40</sup> Child casualty rates are believed to be the highest recorded in any recent conflict in the region, and chronic human rights violations continue to occur in a context of widespread insecurity and total impunity. The UN estimates that 7 million people are currently displaced across Syria, while over 3 million have sought refuge in neighbouring countries, making Syria the world's largest internal displacement crisis. There are still 40,000 non-Palestine refugees including the new influx of refugees from Iraq that remain in Syria. The refugee crisis has overwhelmed local hosting capacities in neighbouring countries. There have been some worrying trends in 2014 related to the capacity of civilians inside Syria to flee violence and seek refuge in neighbouring countries.

### Affected Population Groups

12.2 million people have been affected by the crisis including 7.6 million people have been internally displaced. The conflict has negatively impacted upon the effectiveness of protection institutions and family and community based protection networks and structures, which has increased the vulnerability of specific groups. The estimated 560,000 Palestine refugees in Syria, of whom some 64 percent are now displaced, are also considered vulnerable. Similarly, 40,000 non-Palestine refugees including 5,000 in the new influx of refugees from Iraq remain in a dire situation. More than 6,500 vulnerable foreign migrant workers, most of whom are female, are facing additional protection risks in insecure environments.

39 Updated Statistical Analysis of Documentation of Killings in the Syrian Arab Republic, 22 August 2014, Human Rights Data Analysis Group commissioned by OHCHR. Found at: <https://hrdag.org/syria/>

40 Add reference

## Humanitarian Needs

**Massive forced displacement:** At present, there is no legal/policy framework to support the protection of Internally Displaced Persons (IDPs) in line with the Guiding Principles on Internal Displacement that would ensure that protection and accountability mechanisms are in place in displacement settings and enhance an effective and timely response to the needs of IDPs. Individuals without civil documentation papers, including those who either lost their documents or failed to register civil events (births, marriages etc.) due to a range of barriers, including besiegement, are especially vulnerable to harassment, exploitation and restricted freedom of movement. The destruction of property and the status of property left behind by IDPs combined with the loss and/or destruction of civil and property documentation is also a major protection concern with long term consequences.

The crisis has curtailed people's freedom of movement, disrupted their access to basic services and ability to seek humanitarian assistance. UN estimates indicate that 4.8 million are in hard to reach areas, including in ISIL controlled areas where greater risks are present for both civilians and aid workers. Of that number, 212,000 are trapped in besieged areas, meaning that they are denied total access to humanitarian aid as a weapon of war by parties to the conflict, in flagrant violation of international humanitarian and human rights law.

There have also been attacks on humanitarian properties and personnel. Access to undertake meaningful and sustained protection service delivery remains challenging primarily due to access constraints, increasing insecurity, administrative hurdles and limited capacity on the ground.

Further, certain groups do not have equitable access to assistance due to barriers ranging from physical, social/cultural, age, gender and lack of information. The MSNA reported that a lack of adapted services for persons with restricted mobility was one of the major obstacles to accessing assistance in all sectors, in particular health, sanitation, food and NFI.

**Increase in sexual and gender based violence:** Incidents of sexual and gender based violence (SGBV) are on the rise<sup>41</sup>. Women and girls are at particular at risk of sexual violence due to forced displacement, family separation, lack of basic structural and societal protections, and limited availability and safe access to services.<sup>42</sup> This is within the context of evolving gender dynamics, driven by factors such as security, stress on economic resources, restrictions on mobility and increasing revival of conservative traditional norms, particularly in areas controlled by extremist religious groups. Further, provisions in statutory law and customary practices entrench discrimination and violence against women and girls.

SGBV risks are aggravated by overcrowding and lack of adequate protection measures in abandoned buildings and other locations where many families have found shelter<sup>43</sup>. MSNA data indicates the occurrence of cases of early/forced marriages including to foreign fighters. In addition to citing economic pressure and the use of marriage as a "protective" measure for adolescent girls, MSNA analysis highlighted lack of access to education as another major contributing factor to early marriage."

**Grave violations against children and other child protection concerns:** The conflict in Syria has been characterized from the onset by wide scale, grave violations committed against children, including killing and maiming of children, child recruitment and use by armed groups; the abduction, arbitrary detention, and ill treatment/torture of children, sexual violence against girls

41 Aliyah Sarkar (June 2014): The Syrian Conflict and Gender Dynamics: Society, Violence and peace process.

42 Global Protection cluster, the Hidden cost of War: Gender-based violence, May 2013

43 ibid

and boys.<sup>44</sup> In addition, children continue to experience profound psychosocial distress, large scale physical harm, neglect, dropping out of school and child labour, including under very hazardous conditions and increased risk of trafficking.

Over 1,200 grave violations against children were documented by the UN in the first six months of 2014<sup>45</sup>. This number includes over 850 children killed and maimed in the first six months of 2014 – the vast majority as a result of the indiscriminate use of explosive weapons in populated areas, particularly in Homs, Aleppo, Damascus, and Dara'a.

Eighty attacks on schools<sup>46</sup> and over 200 attacks against health facilities and the killing of 560 health personnel have been documented.<sup>47</sup> Recruitment and use of children stands out as a major protection concern. Whilst reports prior to 2014 indicated that children associated with armed groups were predominantly engaged in support functions, 2014 has seen an increased number of children reportedly recruited without the consent of their parents, children receiving military training and weapons, children used in combat roles, and the continued killing and maiming of children as a result of their association with armed groups. Reports of targeted killing of children by extremist groups, especially ISIL, including reports of children publicly executed and crucified; recruitment of children and their training and use in combat roles have become more prominent in the second half of the year.

Family separation is a significant protection concern both within Syria and for families who are divided by borders. As the conflict continues and the frequency of displacement increases, family separation will continue to rise resulting in increasing numbers of separated or unaccompanied children. In 2014, the UN reported that at least 8,000 children had arrived at Syria's borders without their parents.<sup>48</sup>

Children and youth are facing restricted access to justice, arbitrary detention and unlawful arrest. The disruption of formal mechanisms for birth registration and weakening national legal system further increases the vulnerability of children both in the short and longer term, including the risk of statelessness.

**Psychosocial distress:** Due to on-going conflict and heightened violence, many among the populations affected, particularly children, women and the elderly, continue to experience a high level of distress as a result of witnessing violence and destruction, the killing and injuring of members of their families and peers, or of being separated from their family and/or displaced. Deteriorating living conditions and lack of access to basic services also significantly impact on their psychosocial wellbeing.<sup>49</sup>

**Risks of unexploded ordinances and munitions:** The intensive use of explosive munitions on high-density urban areas throughout the conflict has resulted in widespread contamination by unexploded remnants of war, which will require decades of rigorous clearance efforts.<sup>50</sup> Children are in particular danger due to their natural curiosity and high mobility hence raising the immediate need for risk education and age specific survivors' assistance programmes. Major cities and their suburbs, including Aleppo, Damascus, Deir ez-Zor, Homs, Hama and Ar-Raqqa have been seriously affected while rural areas of Dar'a, Idlib and northern Latakia governorates are also

44 Report of the Secretary General on children and armed conflict in the Syrian Arab republic, 27 January 2014 (S/2014/31); Report of the Secretary General on children and armed conflict, 15 May 2014 (S/2014/339); Report of the independent international commission of inquiry on the Syrian Arab Republic, 13 August 2014 (A/HRC/27/60, pp. 13-16)

45 Report of the Secretary General on children and armed conflict, 15 May 2014 (S/2014/339)

46 Syria Regional Analysis, Q3 2014, 13 October 2014

47 Physicians for Human Rights (PHR), 2014

48 Regional Response Plan for Syria, UNHCR, December 2013.

49 SG Report, S/2014/31 and Syria MSNA (pp. 71-72)

50 Syria Needs Analysis Project, Explosive remnants of war (ERW) and landmines, August 2014

likely to be significantly contaminated. Furthermore, in affected areas explosive remnants prevent people from accessing basic services and livelihoods.

**Specific protection concerns of Palestine refugees:** Palestine refugees have been severely and disproportionately affected by the conflict. The location of Palestinian camps and gatherings in urban peripheries throughout Syria, particularly Damascus, Aleppo and Dara'a, have produced massive levels of displacement among this community, as residential areas became active frontlines in 2012 and 2013.

Throughout 2014, both Jordan and Lebanon blocked all entry to Palestine refugees from Syria, leaving this already vulnerable population with nowhere to flee. Tens of thousands of Palestine refugees continue to live in areas of active conflict, such as Yarmouk, Khan Eshieh and Qudsaya in Damascus Governorate; Dera'a Camp and the surrounding villages in Dera'a Governorate; and Neirab Camp / Eastern Aleppo City in Aleppo Governorate. These communities live in a state of profound vulnerability, with civilian communities frequently overwhelmed by armed engagements and exposed to life-threatening levels of deprivation.

### Geographical Prioritisation

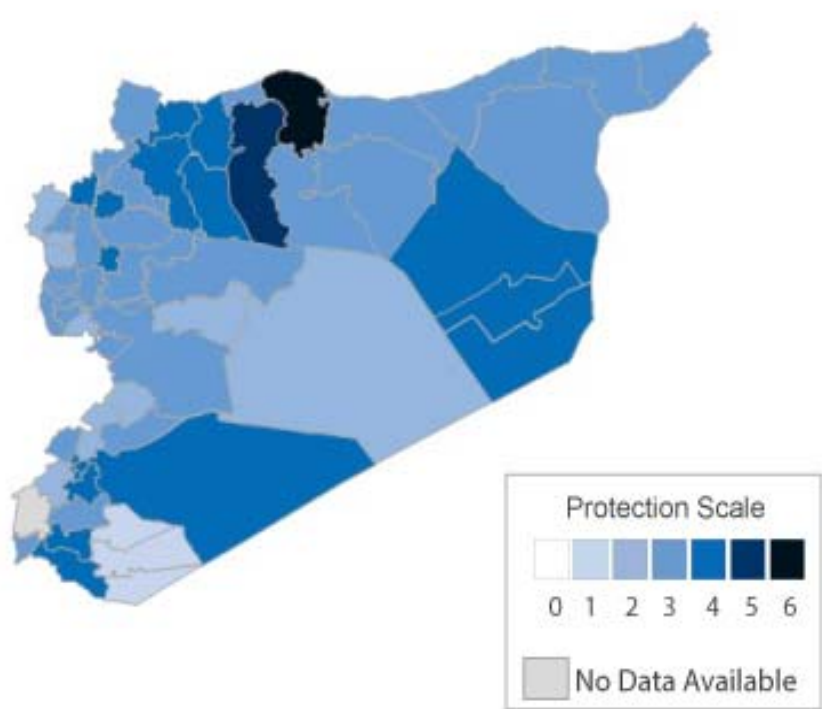
Governorate	RANK by Score	Protection	Population 2011
Deir-ez-Zor	1	0.61	1,239,005
Aleppo	2	0.57	4,867,991
Damascus	3	0.55	1,754,000
Ar-Raqqa	4	0.50	944,000
Idlib	5	0.49	1,501,000
Dara	6	0.49	1,027,006
Hama	7	0.43	1,528,006
Al-Hasakeh	8	0.41	1,512,025
Quneitra	9	0.38	90,000
Tartous	9	0.38	797,003
Rural Damascus	11	0.37	2,835,996
Homs	12	0.36	1,803,017
Lattakia	13	0.25	1,008,003
As-Sweida	14	0.12	370,004

#### Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

Particularly affected governorates for the Protection Sector were Aleppo, Deir ez-Zor, Damascus, ar-Raqqa, Idlib and Dar'a. These governorates were ranked high as a result of the levels of violence and displacement as well as the limitations on freedom of movement/ mobility at the sub-district level. It is assumed that in those governorates ranked as high, child protection risks will be also heightened due to the level of violence and displacement.

Protection Heatmap District level:







## Camp Coordination and Camp Management (CCCM)

### People in Need for the Sector

1233,000<sup>51</sup>

### Rationale for estimating People in Need for Sector

This includes the total number of IDPs living in formal and informal settlements, public buildings and spontaneous camps.

## Overview

In the north: 164,762 individuals/130 informal IDP camps and settlements. The vast majority, some 160,093, are in the governorates of Idlib and Aleppo, while the others are located in al-Raqqa, Deir-Ez-Zour and Lattakia. Fifty five percent of the IDPs in these settlements are estimated to be women and around 40 percent are children.

In the south: At least 10,381 individuals/nine informal tented settlements in the governorates of Dar'a and Quneitra were identified through a survey carried out in by the Humanitarian Monitoring Group, a not-for-profit organization. In addition: as of the end of September, the Syrian Ministry of Local Administration (MoLA) reported that 183,270 individuals are residing in 997 public collective shelters across all 14 governorates. However, the data has some limitations as it only covers areas accessible by MoLA staff. The latter two caseloads had so far not been covered by through the CCCM sector information collection.

**Settlements are the last resort of the IDPs in Syria:** Only a small percentage of IDPs, usually the most vulnerable, move to informal or formal settlements, which are often overcrowded and unsanitary. Normally, IDPs prefer other solutions such as living with host communities, rented accommodation, or in collective centres, before moving to settlements. Out of the 7.6 million IDPs in Syria only 385,413 (4 percent) live in informal tented settlements, according to available information. There is only a very small number of planned IDP camps, the vast majority of settlements being informal; only 4 out of 139 settlements in the north were reported to be formal settlements and none in the south were considered formal.

**The number of IDPs in informal settlements has increased by > 50% in 2014:** Between January and September 2014, the number of IDPs in settlements reached by CCCM members increased from 108,003 to 166,328, a massive 54 percent increase in 2014 over the previous year. The main increases occurred in Idlib and Aleppo Governorates, with reports of similar patterns of notable increase in the south. This increase indicates that vulnerability among the IDPs is increasing and that IDPs are running out of or are no longer able to access alternatives to camps and settlements.

**The foremost reason for displacement is insecurity. Many IDPs are displaced more than once due to insecurity or correlated reasons such as disruption of livelihoods, family reunification, or shifting from a “temporary displacement” situation to a longer-term**

<sup>51</sup> This represent the official PIN reported in CCCM annual response plan for the North (164,762 individuals/130 informal IDP camps and settlements – the vast majority, some 160,093 in Idlib, Aleppo, and the rest in al-Raqqa, Lattakia, and), the (10,381 individuals/9 informal tented settlements) recently identified in opposition influence areas of the southern governorates of Dar'a and Quneitra, and (183,270 individuals/997 public collective shelters/ across all 14 governorates) identified by the Syrian Ministry of Labor and Social Affairs in areas accessible from Damascus.

**arrangement:** Most IDPs reported violence as the reason for their decision to live in settlements. In the northern governorates, the overall humanitarian situation of IDPs residing inside settlements is relatively better compared to the situation of those living in unfinished public and private buildings. In both north and south many informal IDP settlements are located in the proximity of border areas, hence in relatively safe areas. Humanitarian actors therefore have enhanced access which enables more sustained assistance to IDPs living in settlements compared to those who live deeper inside Syria. Nonetheless, access and security levels fluctuate even near the borders. For example, with ISIL advancing from the east, the security situation is now the main concern in Aleppo settlements. As of late September, Jarablus and Menbij settlements had become completely inaccessible. In southern governorates, the informal self-established settlements in Dar'a located close to border towns, giving them proximity and access to humanitarian actors operating from Jordan. However, due to insecurity caused by armed hostilities, including bombing of a tented settlement in al-Shajara this year, larger groupings of tents have been un-clustered and repositioned in different scattered locations in Dar'a. In Qunaitra, informal tented settlements are often positioned in or near the UNDOF arms free zone because it provides a considerable degree of protection from aerial bombing, although the location is poorly accessed by humanitarian actors, being notably further from the border.

**Priority Humanitarian and Protection Needs:** The humanitarian response for IDPs in informal settlements is more consistent and predicable compared to IDPs living in communal shelters or other situations. This is because humanitarian partners tend to have better access to these settlements, which are often established along Syria's borders, and therefore have more information on needs. However, in 2014, access to settlements in ISIL located areas declined considerably.

Water and sanitation items and NFIs are among the assistance most frequently provided in IDP settlements. Needs vary according to geography and season; however as winter has approached, the common gaps are replacement of tents, provision of heating and cooking stoves, including fuel, and minor graveling and drainage improvement.. Since August, 2014, the food situation in settlements has also deteriorated, after some non-traditional actors' food assistance substantiality decreased and despite humanitarian actors working to bridge the gap to the extent possible.

In 2014, the increase in the number of IDPs living in camps and settlements led to an increase in protection concerns. For example, as the vast majority of IDP settlements are informal, they lack the management to ensure that women, children, and other vulnerable groups receive their fair and equal share of limited resources, including water and food, and are able to safely access latrines, washing facilities and essential services. In addition, in many camps and settlements, the need to share living space with non-household members results in a severe lack of privacy and exacerbates protection concerns including, in particular, among women and children, and those who are unaccompanied or separated. Any sectoral activities in the settlements need to take protection issues into high considerations. This has to happen at the early planning stages. The specific needs of girls, boys, women, men and those with special needs are essential when programming the response. Furthermore, the spontaneous and transit settlements that are located in unsafe areas near the location witnessing clashes between the warring parties represent another grave protection concern as the IDPs are under the risks of being targeted or arrested. The safety and security of the IDP sites are essential. Even if it is not possible to provide physical security in these location, there is a need to ensure that settlements in unsafe areas and in the areas witnessing continued clashes are not encouraged. The movements of girls and women are tremendously restricted in the areas controlled by the radical groups. Girls are suffering from being exposed to early marriages while boys are under the threat of being recruited. Finally, a few reports referred to the presence of unexploded devices in some areas where IDPs are located.



## Early Recovery and Livelihoods Sector

### People in Need for the Sector

12.2 million

### Rationale for estimating People in Need for Sector

The sector considered people whose livelihoods have been disrupted, displacement figures, those with a lack of access to basic services, and Palestine refugees. Calculations of PiN took into consideration the possible overlap in the above described affected population to avoid double counting.

## Overview

The crisis in Syria has severely damaged productive sectors and infrastructure, contributing to a stinging economic recession which has seen enormous numbers of people across the country lose their access to livelihoods. Together with the increasing cost of essential goods and services, this has contributed to widespread poverty, now estimated at 75 percent and felt in particular among the growing number of IDPs in Syria who have lost their property and assets in addition to their livelihoods sources.

By the end of 2013, total economic loss since the start of the conflict was estimated at USD 143.8 billion, which is equivalent to 276 percent of the Gross Domestic Product of 2010 in constant prices. In addition, the Syrian human development had regressed by more than four decades, with a Human Development Index measure of 0.472, Syria has now fallen from the “medium human development” cluster of nations into the “low human development” group.

## Affected Population Groups

By the end of 2013, three in every four Syrians (75 percent) lived in poverty and more than half the population (54.3 percent) living in extreme poverty. Restoring their access to livelihoods is among the Early Recovery and Livelihoods Sectors main priorities, and will represent one of the most challenging and critical steps in Syria’s post-conflict recovery.

IDPs and their host communities are considered the most vulnerable, as well as other crisis-affected populations who have suffered depletion of resources, particular disruption and lack of access to basic and social services, and loss of livelihoods, among other impacts of conflict. Moreover, persons with disability, elderly, women income earners, youths are among the most vulnerable groups facing livelihoods challenges in times of crisis.

## Humanitarian Needs

It is increasingly clear that the current conflict has severely compromised Syria’s economic and social gains and the country’s long-term stability, as social tensions continue to rise and certain population groups exhibit increasing vulnerabilities. While live-saving humanitarian programmes remain critical, they are not sufficient or sustainable, and, in the absence of a viable peace and reconciliation process to bring hostilities to a foreseeable end, it is also necessary to build resilience and reduce reliance on humanitarian assistance among the affected population to the extent possible. In Syria, there is a need to ensure that basic social infrastructure and productive sectors can cope with the pressure and increased demand (in particular, in areas hosting large IDP populations) and/or damages. There is also a need to support impoverished households to

recover through renewed and sustained access to livelihoods and improve living conditions, while stabilizing economic performance and social cohesion indicators.

To this end, the Early Recovery and Livelihoods Sectors has identified the following priorities: (i) restoration of livelihoods to stimulate local recovery; (ii) rehabilitation of basic services; (iii) capacity development of local partners; (iv) rehabilitation programmes for persons with disabilities, youth, and female headed households; and (v) advocacy for and mainstreaming of resilience-based planning into all sectors; and (vi) mainstreaming of protection needs into early recovery programming.

## Geographical Prioritisation

Governorate	RANK by Score	Early Recovery	Population 2011
Dara	1	0.69	1,027,006
Idlib	2	0.64	1,501,000
Rural Damascus	3	0.62	2,835,996
Aleppo	4	0.61	90,000
Ar-Raqqa	5	0.59	4,867,991
Deir-ez-Zor	6	0.58	944,000
Al-Hasakeh	7	0.49	1,239,005
Hama	8	0.44	1,512,025
Homs	9	0.43	1,754,000
Quneitra	10	0.42	1,628,006
Damascus	11	0.39	1,803,017
As-Sweida	12	0.36	370,004
Tartous	13	0.35	797,003
Lattakia	14	0.31	1,008,003

### Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

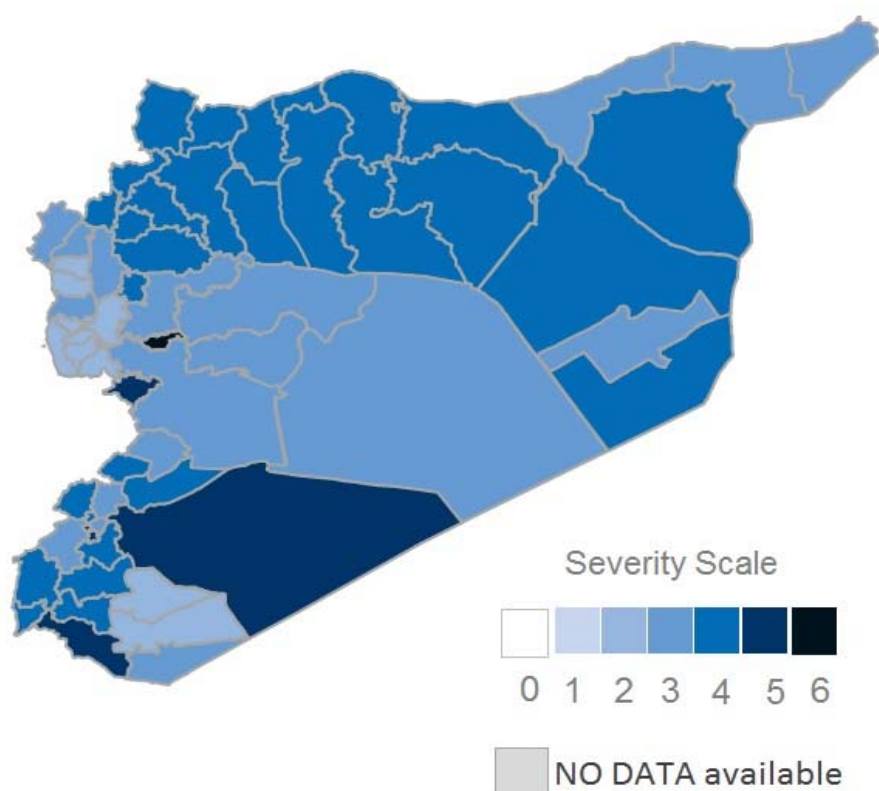
The Severity Ranking exercise aimed to provide a structured way to compare humanitarian needs, crisis impact and vulnerabilities across the early recovery and livelihoods sector in each of the 273 sub-districts of Syria, combining data on different aspects of the crisis and from different sources together in a consistent way in order to obtain quick indication of overall impact of the crisis on different livelihood dimensions. The exercise targeted all 14 governorates, with participation of over 150 key informants and stakeholders.

Assessment parameters comprised socio-economic, basic and social infrastructure, with questions revealing the degree, extent and severity of the crisis impact in each sub-district according to the following dimensions: job availability, access to market, effects on productive sector, degree of damage of houses and basic social infrastructures, access to financial services, availability of human resources, electricity and water, natural resources, number of people with disabilities, and the estimated number of people in need for early recovery and livelihoods activities.

The initial analysis of the collected data shows four main findings. First, some governorates have been highly impacted by the crisis in both rural and urban areas such as Daraa, Aleppo, Idlib, AL-Qunaitera, Deir Elzor, AL-Raqqa, Al-Hasakeh and Rural Damascus. Second, the impact of the crisis is very heterogeneous at the governorate level, with some sub-districts experiencing greater

socio-economic struggles while other sub-districts are doing relatively well, such as Homs and Hama governorates. Third, some governorates have experienced relatively lower negative crisis impact related or resulting from conflict such as Lattakia, Al-Swaida while Tartous and Damascus, which are hosting high numbers of IDPs. Forth, access to finance, availability of water and electricity and availability of jobs and livelihoods opportunities are cross cutting problems mainly witnessed in all affected areas irrespective the severity of the crisis. In general, Deraa seems to be the most affected governorate while Lattakia is witnessing a much lower impact of the crisis.

Early Recovery Heatmap District level







## Education

### People in Need for the Sector

4.5 million People in Need, from preschool to secondary school age children, Palestine and Iraqi refugees in Syria and teaching personnel in need.

### Rationale for estimating People in Need for Sector

It is estimated that 38.15% of the Syrian population are aged between 3 and 17, the official age bracket for school attendance, with a student-teacher ratio estimated to be 17.2. Accordingly, for each district, the Education Sector multiplied the SHARP 2014 PIN by 38.15% to assess the number of children in need. The sector also factored in the estimated number of teachers in need by dividing the total figure with 17.2. School aged children among Palestine and Iraqi refugee populations in Syria were also included.

## Overview

Despite the ongoing crisis, more than 3.7 million children were enrolled at grades 1-12 in school year 2013/14, according to the EMIS data. However, Syria has lost a significant number of students from the education system within the last two years. The number of students in basic education schools decreased from 4.9 million in 2011/12 to 3.1 million in 2013/14, a loss of 1.8 million or a 38% decrease in enrolment.

The national GER (Gross Enrolment Rate) of Syrian children in preschool and basic education levels was 104 percent one of the highest GER in the region. However, GER significantly decreased to 66 percent in 2012/13 due to the conflict and internal displacement countrywide. This indicates that the prolonged crisis has been adversely impacting the Syrian education development of the last, at least, 35 years compared to GER in 1980 that was 95 percent.

Between 2.1 and 2.4 million children are now either out of school or attending classes irregularly. Some children have been out of school for two to three years.

## Affected Population Groups

2 million students or 37 percent dropped out from the education system at all levels between 2012 and 2014.

Pervasive difficulties in meeting basic household needs also led many families to pull children, including refugees, out of school to allow them to supplement family incomes. These issues have given rise to growing protection risks among school-age children, as outlined below.

## Humanitarian and Protection Needs

Conflict in Syria has caused widespread damage to civilian infrastructure, in particular to school facilities. Reports indicate that across Syria more than 1,500 school are occupied by armed forces or used as collective shelters and over 3,000 have been damaged by the conflict. There is a dire need to **restore the civilian character of the school** and reduce the use of schools as collective shelters.

The MoE has also estimated that, since 2011, it has lost 52,500 teachers from its ranks – 22 percent of its pre-conflict workforce – although the true number is thought to be much higher.

While some schools remain fully or partially functional, conflict and insecurity, manifesting in targeted attacks, abductions and *ad hoc* violence, along with poverty, continue to prevent many children from accessing them on a daily basis and reduce incentives to enroll, particularly in besieged and hard-to-reach areas. Classrooms are often overcrowded with insufficient space or furniture to accommodate the influx of IDP children. School materials (textbooks, uniforms, stationary) are lacking, as are gender-sensitive WASH facilities.

In ISIL controlled areas, although many schools remain functional, significant changes to the educational system and curriculum have been implemented. Teachers have to comply with the new regulations or face retribution.

The MSNA report confirms that many of the children and adolescents, in and out of school, are in need of psychosocial support to process the effects of violence they themselves have suffered or that they have witnessed. Displacement causes trauma. Affected children are unable to concentrate on their lessons. Teachers have not been trained to provide this support; indeed, many of them are also in need of such counselling. Education personnel require capacity building and support especially in conflict-affected and hard-to-reach areas.

As education systems and infrastructure have deteriorated, protection concerns have grown in parallel. As noted above, to attend school, many children must travel through insecure and conflict-affected areas. In addition, as families have pulled their children out of school and sent them to supplement household incomes, increasing numbers of school-age children have engaged in high-risk activities which exposed them to exploitation, violence, and trafficking. Along with fear of violence, growing economic pressure has also led to an increase in early marriage of adolescent girls. In addition, out of school boys, including those younger than 15, are in danger of recruitment into armed forces. In 2014, in some NSAG-controlled areas, children were targeted for recruitment, with militants systematically approaching schools to reach out to them.

## Geographical Prioritization

There are significant geographical disparities in access to education across Syria, with the education sector worst affected in opposition-held and conflict-ridden areas. In 2014, the governorates that experienced the most severe reductions in school enrolment were Aleppo and Dara'a: Aleppo experienced a decrease of 57 percent between 2010/11 and 2013/14 and Dara'a a decrease of 52 percent in the same period.

In the severity ranking for education, the governorates ranked as most in need of education services were Dar'a, Ar-Raqqa, Deir-ez-Zor, Rural Damascus, and Aleppo. The highest number of People in Need for education can be found in Aleppo, Rural Damascus, and Idleb; however there are also areas of high vulnerability in other governorates. These priority areas may change due to the fluid situation on the ground.

## Governorate Level Heat Table: Education

Governorate	RANK by Score	Education Severity	Population 2011
Dara	1	0.89	1,027,006
Ar-Raqqa	2	0.67	944,000
Deir-ez-Zor	2	0.67	1,239,005
Rural Damascus	4	0.66	2,835,996
Aleppo	5	0.64	4,867,991
Homs	6	0.63	1,803,017
Al-Hasakeh	7	0.62	1,512,025
Quneitra	8	0.58	90,000
Lattakia	9	0.57	1,008,003
Idleb	10	0.56	1,501,000
Hama	11	0.51	1,628,006
Damascus	12	0.50	1,754,000
Tartous	13	0.36	797,003
As-Sweida	14	0.26	370,004

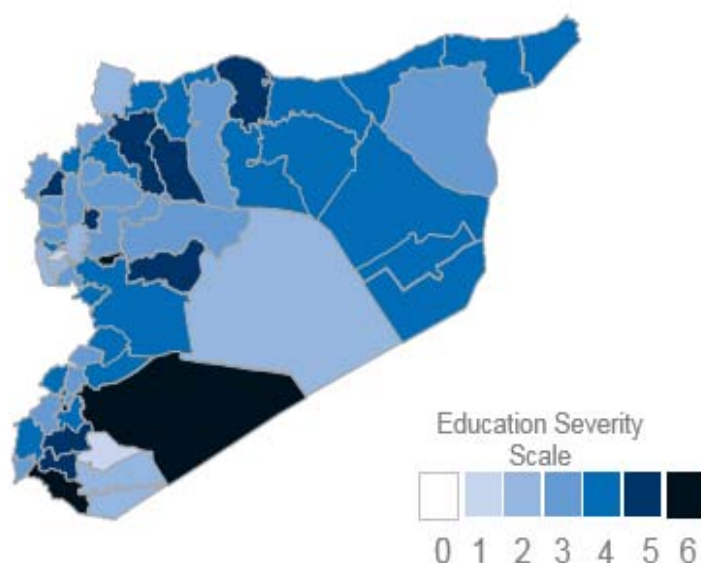
**Legend:**

- Acute & immediate need of humanitarian assistance
- Need of Humanitarian Assistance
- No need of external assistance

The education sector has been worst affected in opposition-held areas. In areas that remain under government control, the MoE continues to deliver public education services and most schools remain open, the national curriculum is used, and exams continue. In some areas under opposition influence, education services often continue using a varied curriculum.

Up to 2014, the governorates that incurred the most severe reductions in school enrolment were Aleppo and Dara'a: Aleppo experienced a decrease of 57percent between 2010/11 and 2013/14 and Dara'a a decrease of 52percent in the same period. In Quneitra, 4 out of 10 children are no longer enrolled and, in Rural Damascus and Homs, around 3 out of 10 children are no longer attending school.

## Education Heatmap District level





## Food Security and Livelihoods

### People in Need for the Sector

9.8 million people considered food insecure, including 6.8 million in high priority districts.

### Rationale for estimating People in Need for Sector

An exercise which looked at four criteria - reliability, coverage, date of assessment, and expert knowledge - was conducted to draw key information from all available assessment and monitoring data. All 61 districts in Syria were then analysed to determine the total PiN.

### Overview

In 2014, food security further deteriorated across Syria, as conflict caused continued degradation of productive sectors, assets, and livelihoods, as well as diminished resilience at the household level. Low crop and livestock production combined with import constraints, insecurity, and high transportation costs reduced the availability of food and pushed prices up to an all-time high, leaving some 9.8 million people food insecure.

### People in need/Affected Population Groups

Based on available information, it is estimated that around 9.8 million people are in need of various levels of food, agriculture, and livelihood-related assistance in Syria. Of the total people in need, it is estimated that 6.8 million people are highly food insecure in certain districts, making these areas a high priority.

Groups most vulnerable to food insecurity include IDPs and host communities, the unemployed and urban poor, casual labourers, and small-scale farmers and herders. Among IDPs, groups most susceptible to food shortages were those IDPs living in collective shelters.<sup>52</sup> Of the estimated 560,000 Palestinian refugees registered in Syria, 462,000 require food assistance.

The humanitarian and displacement crisis is also considered to have exacerbated pre-existing vulnerabilities among certain population groups, including children (in particular, those below five), female-headed households (which often struggle to access both food assistance and livelihoods), the elderly, people with disabilities, and those with chronic diseases.

### Humanitarian and Protection Needs

In 2014, low crop and livestock production together with a diminished import capacity, widespread insecurity, and high transportation costs further reduced food availability and pushed prices up, leaving Syrians, struggling to meet their basic food needs. As of September 2014, WFP price monitoring data indicated that the cost of wheat flour and rice, important staples, had increased by 300 percent their pre-crisis levels and continued to rise steadily, with a sudden uptick in Q4 attributed to conflict, as well as drought in western parts of Syria.

All indicators suggest that food security will continue to deteriorate in 2015 and overwhelm coping mechanisms among IDPs, host communities, and other affected communities. Even through 2014, the utilization of negative coping mechanisms became more frequent, including the selling of assets, taking high-risk/illegal jobs, and child-labour. In rural areas, to a greater extent than urban

<sup>52</sup> MSNA Validation Report.

areas, people also began to hunt wild animals, harvest immature crops, and collect food from wild plants.

Harmonizing the way the humanitarian assistance is delivered is critical to meet the different needs of women, children, minority groups, IDPs and the elderly. The assistance delivery should take the safety, security and dignity of the vulnerable groups into high consideration. Indeed, insufficient protection for the most vulnerable populations in Syria threatens meaningful food security outcomes. In conflict affected and insecure areas, there is a need, inter alia, to ensure that distribution takes place in areas as safe as possible and activities are carried out in a manner which minimizes travel and waiting time. Post-distribution monitoring should contribute to inform programs in case of reported violation of basic human rights as the result of the humanitarian distribution in line with the “do no harm” approach.

## Geographical Prioritisation

The western parts of the country suffered considerably from the 2014 drought, with below-average rainfall during key periods of the cropping season significantly reducing the harvest of some of Syria's key agricultural areas, including Aleppo, Hama, Idlib, Homs and Da'ra governorates.

In the severity ranking for Food Security the highest number of PiN for Food Security can be found in Aleppo, Rural Damascus, and Idlib. The governorates ranked as most in need are Rural Damascus, Aleppo, Dar'a, Al-Hasakeh, Homs, and Quneitra. The highest number of people with acute food needs reside in the As-Safira in Aleppo, Ar-Rastan and Tadmor in Homs, and Az-Zabdani and Duma in Rural Damascus.

Governorate Level Heat Table: Food Security

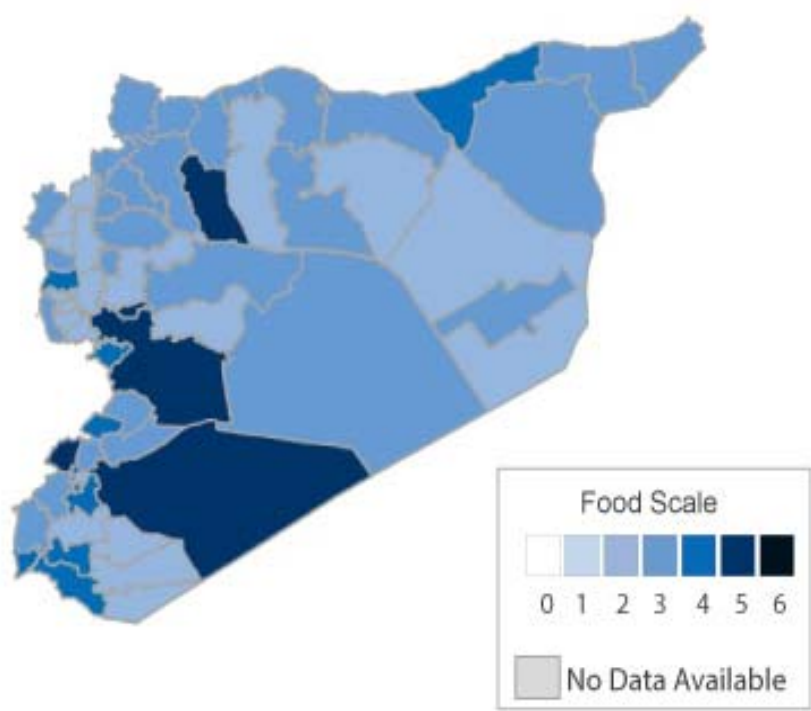
Governorate	RANK by Score	Food Security	Population 2011
Rural Damascus	1	0.62	2,835,996
Quneitra	2	0.58	90,000
Homs	3	0.54	1,803,017
Al-Hasakeh	4	0.54	1,512,025
Dara	5	0.53	1,027,006
Aleppo	6	0.51	4,867,991
Idlib	7	0.46	1,501,000
Ar-Raqqa	8	0.44	944,000
Tartous	9	0.42	797,003
Lattakia	10	0.41	1,008,003
Hama	11	0.39	1,628,006
Deir-ez-Zor	12	0.38	1,239,005
Damascus	13	0.33	1,754,000
As-Sweida	13	0.33	370,004

### Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)



Food Security Heatmap District leve





## Health Sector

### People in Need for the Sector

12.2 million people require access to health services, including emergency trauma care

### Rationale for estimating People in Need for Sector

An entirety of a population requires safe access to and continuous availability of health care. Essential and life-saving health services have been significantly impaired.

## Overview

In its fourth year, the crisis in Syria continues to disrupt the health system despite efforts to alleviate the health impact on the Syrian people. Since 2011, primary, secondary, and tertiary healthcare services in the country have deteriorated due to damages to facilities, power outages, and shortages of critical medicines, medical supplies, and qualified health care professionals. According to the latest HeRAMS report, 35 percent (38 out of 109) of public hospitals are now only partially functioning, while 22 percent (24 out of 109) are completely out of service. A quarter of the public hospitals and one-fifth of the public health centres have been reported as inaccessible, especially in contested and hard-to-reach areas<sup>53</sup> with some patients reporting having to travel 120-160km to reach the nearest hospital<sup>54</sup>. The private sector, which provided medical services to around 50 percent<sup>55</sup> of the population before the crisis, has also been severely affected and, today, most private health service professionals have either been displaced or left the country. Prices of services, medical supplies, and medicines have shot up beyond the reach of average Syrians, many of whom are now living in poverty.

## Affected Population Groups

While all populations have the right to receive appropriate health care, priorities vary among different groups and across the regions.

Children less than five years of age are considered the most vulnerable group, especially in rural areas, followed by the elderly and children aged between five and 12. Other particularly vulnerable populations groups include the chronically ill, persons with disabilities, and child-headed households.

Women are in need of all health care services, including those for reproductive health where approximately 432,000 pregnant women (out of 10.8 million people in need) require access to antenatal care and emergency obstetric care. However not only does insecurity pose a barrier to access care; other barriers include the high cost of treatment due to scarce resources and medicines, and the fewer number of females than males in the health workforce, which poses a cultural barrier to accessing care. Furthermore the prevention and management of GBV, access to services by survivors of GBV, identification of protection threats, need to be enhanced including ensuring the training of personnel within facilities on the clinical management of rape. Men are in particular need of access to trauma care, psychosocial and mental health services. Among IDPs

<sup>53</sup> HeRAMs Report September 2014.

<sup>54</sup> Multi Sectoral Needs Assessment 2014

<sup>55</sup> MOH, National health Account data, 2010

and their host communities, there is a need to enhance access to preventive services for communicable diseases, including awareness campaigns and hygiene support.

## Humanitarian Needs

Reduced capacity of and access to public and private health services has increased risks of mortality and morbidity, outbreaks of communicable and vaccine-preventable diseases (including polio, measles, pertussis), vulnerability among people suffering lifestyle- and age-related chronic diseases, and vulnerability to mental ill-health and psychosocial distress and disorders, which protracted conflict has proliferated. As water and sanitation systems and services have deteriorated, incidence of water-borne diseases have also increased, with Aleppo, Rural Damascus, Deir-ez-Zor, Idleb, and Yarmuk among the worst affected areas. In 2014, Typhoid fever outbreaks and a significant increase in diarrhoeal diseases were registered.

Notably, routine immunization coverage has dropped significantly since the onset of hostilities, due, inter alia, to the destruction of health facilities, attrition of health staff, damaged cold chain equipment, irregular supply of electricity, and shortage of vaccines. In November 2013, Syria experienced its first polio outbreak since 1999, precipitating a region-wide response, including nine polio vaccination campaigns in the country. While only one case of polio was confirmed in 2014, according to the Syrian MoH, as many as 150,000 people in hard-to-reach and besieged areas have not been reached.

The number of people suffering conflict-related injuries also continues to rise, and although health agencies provide lifesaving medicines, supplies, and surgical kits, their efforts are compromised by the lack of surgeons, orthopaedics and anaesthetists, while the worsening security situation continues to impede access. It is projected that, by the end of 2015, some 1.5 million people will have suffered conflict-related injuries in Syria.

In this context, 2015 Health Sector priorities include: (i) improving access to trauma and injuries care; (ii) enhancing vaccination coverage and improving herd immunity; (iii) improving access to essential medicines, medical supplies and equipment; (iv) strengthening preparedness, surveillance and responses to communicable disease outbreaks; (v) building capacity for mental health management; (vi) increasing access to quality health care services among IDPs and host communities; (vii) enhancing support to NGOs, CBOs, and the private sector to provide services; and (viii) strengthening the health information system.

## Geographical Prioritisation

Health concerns are widespread across Syria. The Health Sector severity ranking determined that 23 out of 272 sub-districts in Syria had the severest life threatening humanitarian health needs, specifically in Al-Hassakeh, Aleppo, Dar'a, Homs, Lattakia, Quinetra and Rural Damascus. However, this is the case not only in the assessed sub-districts, but throughout the country since a number of lifesaving interventions has been discontinued in public health facilities even in the best served areas. Referral mechanisms are no longer functioning and a high number of public health centres operate without medically trained staff. Even when the health issues encountered are not life-threatening, health needs are serious.

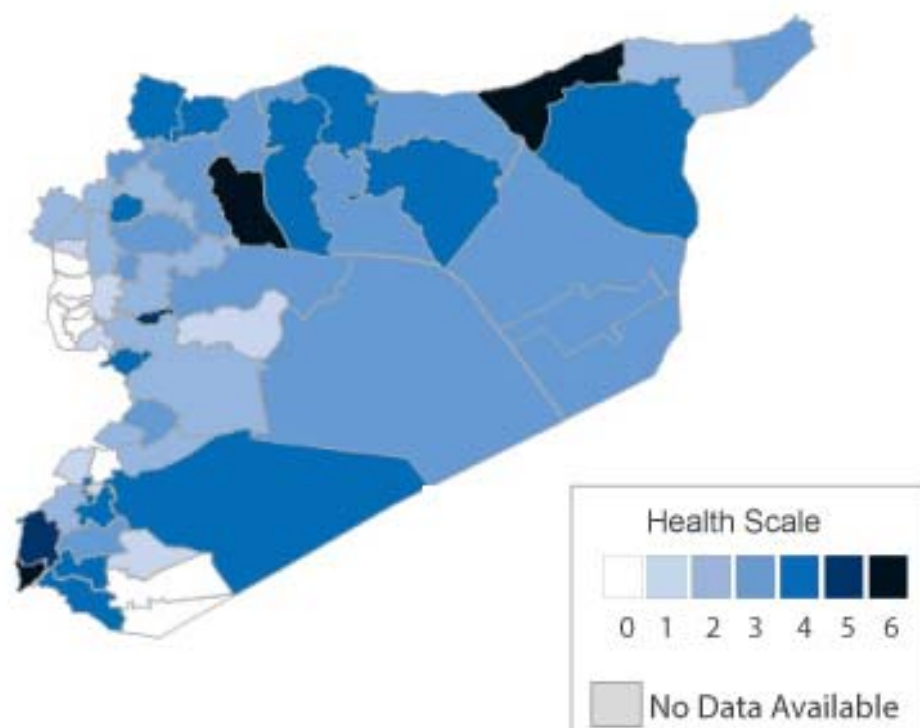
Governorate Level Heat Table: Health

Governorate	RANK by Score	Health	Population 2011
Quneitra	1	0.74	90,000
Dara	2	0.57	1,027,006
Aleppo	3	0.55	4,867,991
Ar-Raqqa	4	0.47	944,000
Deir-ez-Zor	5	0.41	1,239,005
Al-Hasakeh	6	0.40	1,512,025
Idleb	7	0.36	1,501,000
Rural Damascus	8	0.26	2,835,996
Hama	9	0.21	1,628,006
Homs	10	0.20	1,803,017
Lattakia	11	0.11	1,008,003
As-Sweida	12	0.06	370,004
Tartous	13		797,003
Damascus	-	ND	1,754,000

**Legend:**

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

Health Heatmap District level





## Nutrition Sector

### People in Need for the Sector

4,000,000

### Rationale for estimating People in Need for Sector

Poor nutrition situation reported in the Syria Family Health Survey (2009) and a series of Rapid Nutrition Assessments (RNA) on IDP populations in 13 governorates (except Ar-Raqqa), conducted between March and July 2014.

## Overview

Before 2009, confluence of factors, including widespread food insecurity, weakened water, sanitation and health care systems and services, and an increase in poor/sub-optimal infant and young child feeding practices (IYCF), have pre-existed thus increasing vulnerabilities to malnutrition throughout Syria. Overall, it is now estimated that some 4 million women and children in Syria are now considered vulnerable and in need of preventative and curative nutrition services. These include acutely malnourished children, children at risk of under-nutrition, and pregnant and lactating women.

## Affected Population Groups

It is estimated that 4 million women and children are now in need of preventative and curative nutrition services. Poor nutrition situation pre-existed the current crisis with reported 23% of children under-five being stunted, 9.3% being wasted and 10.3% underweight (2009). Sub-optimal infant and young child feeding and micronutrient deficiencies (vitamin A, iron and iodine) existed. A series of Rapid Nutrition Assessments conducted in 13 governorates between March and July 2014 indicate a Global Acute Malnutrition (GAM) rate of 7.2% and a Severe Acute Malnutrition (SAM) rate of 2.3%. Population groups considered most vulnerable to malnutrition include IDPs, children, pregnant women, and lactating mothers. IDP families resorted to negative coping mechanisms such as borrowing money, selling assets and property, and sending children to work in order to meet their basic food needs while it's suspected the host community's ability to sustain support to the IDPs is fast diminishing.

## Humanitarian and Protection Needs

The ongoing conflict has aggravated pre-existing nutrition concerns in Syria, as food security has deteriorated, water, sanitation, and health care services have deteriorated and inappropriate IYCF practices have heightened the risk of diarrhoea, insufficient micronutrient intake, and under-nutrition among children. The technical capacity is too eroded to implement the much needed preventive nutrition services (IYCF, micronutrient, integrated response offering the basic package consisting of health, nutrition, food etc), undertake screening for malnutrition and treatment of cases identified. There are limited nutrition stakeholders with capacity to scale up nutrition interventions including nutrition surveillance. Syria's 7.6 million IDPs have been among the worst affected, with between 41.1 percent and 62.9 percent of IDP families struggling to access protein rich foods such as meat, eggs, and milk-based products and a vast 28.8 percent reporting that their existing food supplies/rations were not sufficient to last beyond one week. This, among other factors, has led to negative coping mechanisms including purchasing cheaper food, reducing protein intake, and cutting back on the size and frequency of meals, thus contributing to growing rates of malnutrition – although cases are often not detected due to limited screening services.

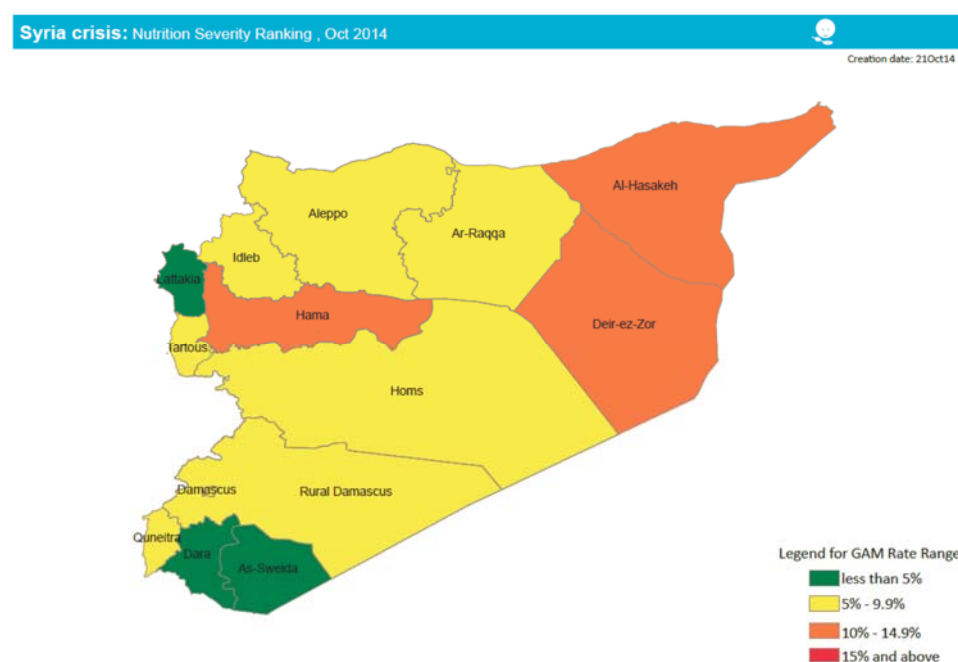


There is now a significant need to invest in strengthening the nutrition surveillance system to better understand the nutrition situation in Syria, as well as to strengthen preventative nutrition services (IYCF, micronutrients, etc.) to avert further deterioration. Enhanced availability of screening services is also critical to facilitate the identification and treatment of acutely malnourished cases.

The humanitarian response in the nutrition sector requires parallel protection measures. Among child- and female-headed households, difficulties accessing livelihoods and aid distribution points, as well as information, all exacerbate nutrition issues. Within camps and settlements, where there is often no 'official' management, there is a need to ensure that the most vulnerable receive a fair share of resources and benefit from equal and safe access to essential services.

## Geographical Prioritisation

### Nutrition Map Governorate level



In a recent rapid nutrition assessment, three governorates require immediate intervention, with GAM rates above 10 percent. The governorates of Al-Hasakeh, Hama and Tartous showed the highest Severe Acute Malnutrition (SAM) rates, each above 3 percent, while Aleppo, Damascus, Der-Ez-Zor, Quneitra and Rural Damascus showed SAM rates above 2.5 percent.

NB: The nutrition severity ranking presented in the map above is based on empirical data and malnutrition rates compared with technical thresholds in determining the geographical vulnerability.



## Shelter/NFI Sector

### People in Need for the Sector

11,833,000

NFIs: 9,965,000<sup>56</sup>

Shelter: 1,668,000<sup>57</sup>

### Rationale for estimating People in Need for Sector

NFIs: The number of people in needs is estimated based on MSNA and field exercise on needs identification

## Overview

Access to adequate shelter and critical relief items in Syria remains a significant challenge. Since 2011, indiscriminate use of heavy weapons in densely populated areas has caused mass displacement and widespread damage to civilian infrastructure. It is now estimated that 1.2 million houses have damaged, including 400,000 which have been completely destroyed, and 7.6 million people have been internally displaced.

While most Syrian IDPs have sought refuge with host families and in abandoned or unfinished public buildings, using tents as a last resort, their living conditions are poor, often times having to live in overcrowded areas or forced to share a single space with multiple families. In addition, in 2014, with multiple displacements occurring and active conflict reaching new areas, the number and size of IDP camps and informal tented settlements has grown, with further increases expected in 2015. The conflict has also resulted in reduced availability of basic household items, while those which are available tend to poor quality and high in price. Compounding these issues, since 2011, an enormous number of people have lost their access to livelihoods across Syria, with an estimated three in four persons now living in poverty.

## Affected Population Groups

Syrian IDPs, who are often compelled to leave behind their assets and find accommodation with host families in abandoned or unfinished buildings, makeshift shelters in open air and in informal camps and settlements, are considered among the most affected population along with their host communities. Female headed households, elderly, chronically ill, child headed households, and Palestinian refugees in Syria are also considered vulnerable by the Shelter and NFI sector.

According to the MSNA results, out of a total of 15.6 million people living in the 126 assessed areas, 2.8 million require NFI assistance, including 205,000 people in acute need, while 1.6 million people need shelter assistance, including 93,000 people in acute need.

## Humanitarian and Protection Needs

Needs among IDPs in Syria are vast and differ according to their circumstances. IDPs living with host families reportedly struggle to pay rent, access livelihoods and overburdened public services in their host communities. As their finances and resources are depleted, the strain on host families and communities becomes untenable.

At the same time, IDPs occupying abandoned and unfinished buildings, makeshift accommodations in the open air, and informal camps and settlements lack access to adequate,

<sup>56</sup> The number of people in needs have not yet been validated by the sector.

<sup>57</sup> People in need for the shelter assistance is only based on the MSNA, not covering the entire country.

dignified, and safe shelter and public service, with insufficient collective and transit accommodation reported as a particular issue in northern Syria.

Returnees to areas of origin are also reported to face difficulties rehabilitating partially damaged structures. Meanwhile, those living in rural areas, including camps along Syria's borders, do not have access to the markets and cannot afford transportation, and are thus unable to purchase the relatively low cost materials for tent refurbishment (e.g. plastic, repair kits, string, etc.).

Access to critical relief items is also severely limited, with the /Shelter / NFIs Sector reporting a current shortage of jerry cans, clothes for children, blankets / bedding items, hygiene kits and kitchen sets. The availability of items differs per governorate, while needs differ according to the accommodation in use (e.g. the MSNA illustrates shortages of children's clothing in Rif Damascus, while this was not the case in Quneitra).

Alongside humanitarian needs, increasing gaps in the Shelter/NFIs sector in Syria have raised considerable protection concerns. While the purchasing capacity is being depleted on one hand, those living in remote areas also do not often easily access to market and essential services. Women and children, including unaccompanied or separated children, are considered at particular risk of SGBV, among other protection concerns, while shared, overcrowded accommodation and camps are often poorly lit and set up without consideration to gender issues, while services for survivors are limited. Shelter / camp management, and community initiatives and empowerment require enhancement to address protection issues including SGBV as well as psycho-social welfare for the population. Inter-sectoral responses are crucial in particular, with WASH and Protection, to ensure needs beyond shelter /NFIs to enable the beneficiaries to live in safety and dignity. Individuals with limited mobility, such as the elderly and persons with disabilities, also face difficulties accessing assistance in many areas and require adapted services and distribution modalities.

### Geographical Prioritisation

For the Shelter and NFI Sector, the overall situation is severe across all governorates. Areas reported with acute needs include Dar'a, Latakia, and Quneitra, followed by Hama, Ar-Raqqa, Aleppo, Al Hasakeh, and Rural Damascus. As the financial resources are being depleted among the Syrian population and IDPs due to lack of income and savings coupled with an increase in prices, they are unable to access items such as tools and materials to repair shelter, which further contribute to degradation of the shelter situations.

Likewise, access to the beneficiaries in need remains a constraint across the majority of Governorates. This creates negative coping mechanisms, exacerbating humanitarian and protection risks. . Reduced access to markets in areas of insecurity and weak markets in areas of continued conflict has further strained the humanitarian situation.

The need for shelter and NFI assistance is highest in hard to reach, besieged and contested areas mainly in Aleppo, Idlib, Al Raqqa, Al Hassakeh, Deir-ez-Zor, Dar'a and Quneitra.

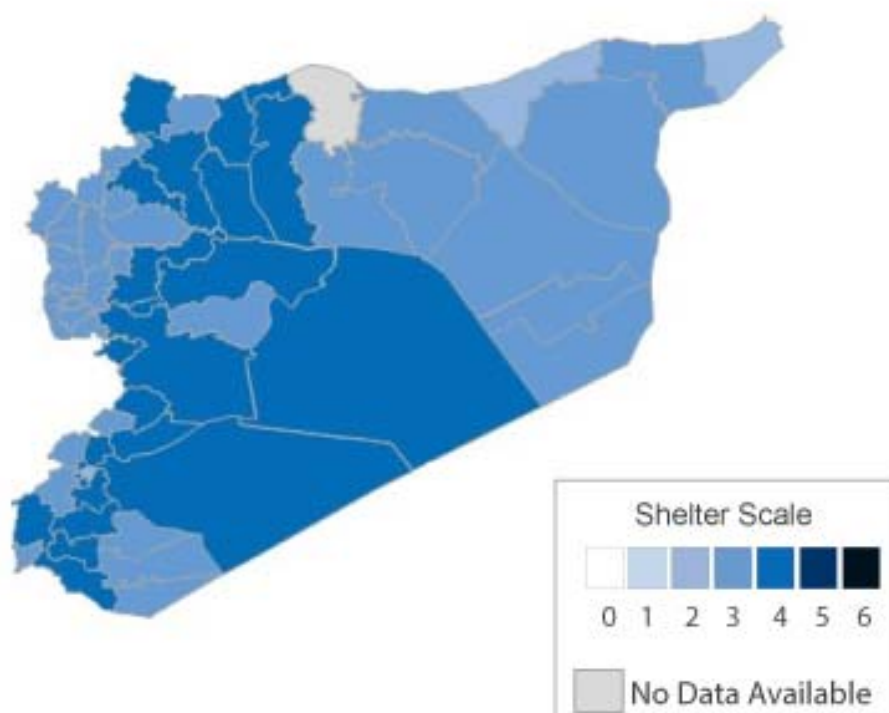
## Governorate Level Heat Table: Shelter

Governorate	RANK by Score	Shelter	Population 2011
Aleppo	1	0.58	4,867,991
Homs	2	0.56	1,803,017
Rural Damascus	3	0.55	2,835,996
Quneitra	4	0.52	90,000
Dara	5	0.52	1,027,006
As-Sweida	6	0.50	370,004
Hama	7	0.48	1,628,006
Idleb	8	0.45	1,501,000
Lattakia	9	0.42	1,008,003
Deir-ez-Zor	10	0.41	1,239,005
Tartous	11	0.40	797,003
Ar-Raqqa	12	0.38	944,000
Al-Hasakeh	13	0.35	1,512,025
Damascus	14	0.33	1,754,000

## Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

## Shelter Heatmap District level



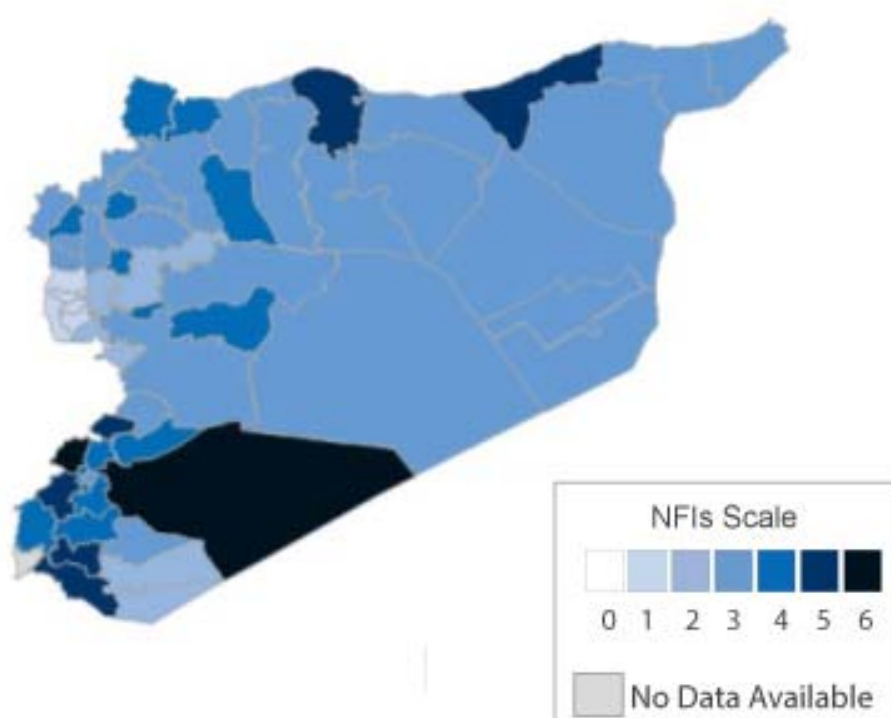
## Governorate Level Heat Table: NFIs

Governorate	RANK by Score	NFIs	Population 2011
Dara	1	0.75	1,027,006
Quneitra	2	0.67	90,000
Rural Damascus	3	0.66	2,835,996
Al-Hasakeh	4	0.52	1,512,025
Damascus	5	0.50	1,754,000
Idleb	6	0.46	1,501,000
Aleppo	7	0.46	4,867,991
Lattakia	8	0.45	1,008,003
Homs	9	0.44	1,803,017
Ar-Raqqa	10	0.40	944,000
Deir-ez-Zor	11	0.40	1,239,005
Hama	12	0.37	1,628,006
As-Sweida	13	0.36	370,004
Tartous	14	0.17	797,003

## Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

## NFIs Heatmap District level







## People in Need for the Sector

Support to infrastructure (water and sewage) for the entire affected population.

11.6 M people in need of humanitarian WASH

## Rationale for estimating People in Need for Sector

HNO PiN, except in sub-districts where WASH severity ranking index is 0 or 1, where only IDPs were considered.

## Overview

Prior to the onset of conflict, Syria maintained modern, state-owned water supply and sewerage systems, and access to safe drinking water was estimated at 92 percent in urban areas and 86 percent in rural areas,<sup>58</sup> while access to sanitation was estimated at 96 percent in urban areas and 80 percent rural areas.

Protracted conflict has had a devastating impact on the WASH sector. Bombing and shelling have damaged infrastructure, limited power supply has undermined systems which were reliant on electricity, sanctions have prevented water authorities from accessing vital spare parts, testing equipment, and treatment chemicals, and live conflict, along with the exodus of skilled personnel, has hindered repairs and maintenance across the country. In 2014, compounding these issues, drought depleted valuable ground water sources and water production and distribution sources in the governorates of Aleppo, Damascus, and Homs were targeted and exploited as weapons of war.

## Affected Population Groups

Damaged water and sewerage networks, diminished solid waste collection services, and poor sanitation and hygiene have exposed communities to very high public and environmental health risks. Alongside the increase in water borne diseases, in September-October 2013, Syria witnessed its first polio outbreak since 1999 and, in 2014, significant rates of typhoid, skin diseases and diarrhea were reported. People living in collective shelters and damaged and unfinished buildings are considered most at risk, due to crowding, inadequate water infrastructure, and lack of storage capacity, although it is recognized that, in order to support the most vulnerable, entire systems serving broader populations need to be restored and maintained.

## Humanitarian and Protection Needs

Access to safe drinking water is now a major issue throughout Syria. The reliability of urban piped schemes is highly reduced, and the quality of water cannot be guaranteed because of lack of testing facilities. Large numbers of people, especially living across conflict lines, are now reliant on trucked water, which is not regulated and has been subject to considerable price hikes, while others resort to unprotected water sources (including trucked water, shallow wells, and surface water), which require household water treatment and storage capacity. Water purification tablets for disinfection at household level are, for many Syrians, the only way to ensure water quality at the point of consumption, but proper training on the correct use of treatment supplies is not always provided.

<sup>58</sup> WHO/UNICEF JMP: Coverage Estimated Improved Water Supply, Arab Republic of Syria, 2012.

People also need urgent support to improve sanitation and hygiene in affected areas. The collection and disposal of rubbish, which took place prior to the crisis, has all but ceased, leading to the accumulation of garbage in public spaces. The damages to infrastructures also included sewage systems, and resulted in the leakages of raw sewerage, including into fresh water bodies, increasing the risk of surface water contamination, while, in some areas, there have been reports of sewerage being disposed in the open. Limited availability of hygiene products, including, in particular, soap, and inadequate latrines and washing facilities in collective shelters, unfinished buildings and camps have inhibited good regular hygiene practices and affect dignity and sense of well-being of the affected.

Alongside humanitarian needs, as WASH infrastructure and systems have deteriorated, protection concerns have been exacerbated. For example, in Aleppo, where the water supply was cut off due to political tensions and demands, women and children in their thousands were forced to queue for hours at public buildings and private wells to fill containers. In addition, in IDP settings in particular, inadequate, unsegregated, and poorly lit latrine continues to place women and children at heightened protection risk and, within camps and settlements, it is not clear to what extent informal management structures consult them on the location of facilities and ensure that, along with other vulnerable groups, they receive a fair and equal share of scarce water resources. The accumulation of garbage in public spaces also places children at heightened risk.

## Geographical Prioritisation

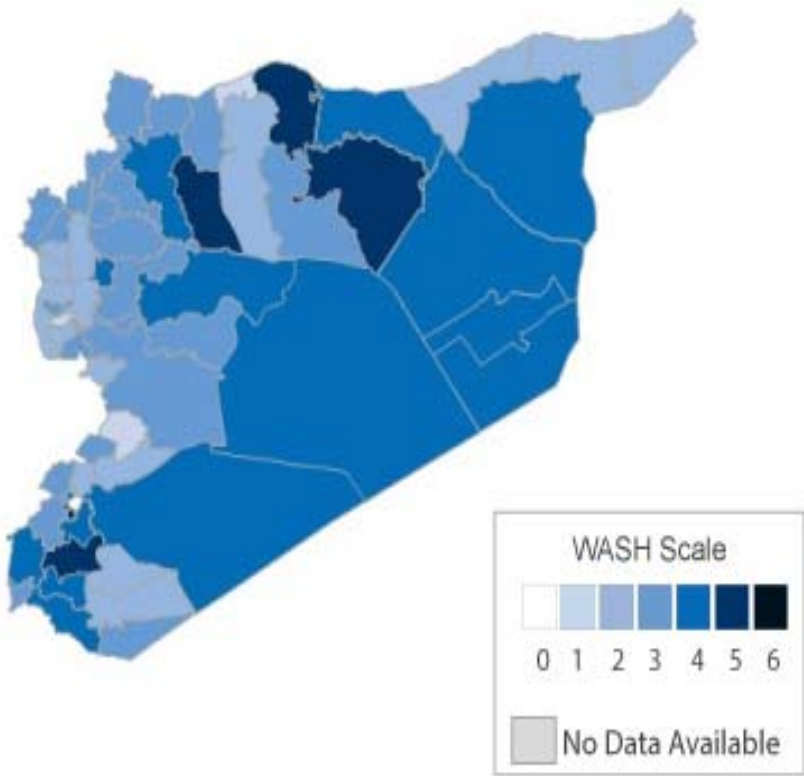
Governorate	RANK by Score	WASH	Population 2011
Deir-ez-Zor	1	0.62	1,239,005
Dara	2	0.61	1,027,006
Ar-Raqqa	3	0.57	944,000
Aleppo	4	0.46	4,867,991
Idleb	5	0.46	1,501,000
Al-Hasakeh	6	0.41	1,512,025
Homs	7	0.38	1,803,017
Rural Damascus	8	0.37	2,835,996
Quneitra	9	0.35	90,000
Lattakia	10	0.35	1,008,003
As-Sweida	11	0.34	370,004
Hama	12	0.33	1,628,006
Tartous	13	0.22	797,003
Damascus	14		1,754,000

### Legend:

	Situation critical
	Situation moderate
	Situation normal
	Situation very normal (Score of zero)
	No Data Available (ND)

The WASH situation is now considered to be the most acute in Deir Ez-Zor, where an estimated 794,000 people, including 464,000 IDPs, require assistance. The situation is also critical in Dar'a and Ar-Raqqa governorates, where 602,000 and 741,000 people are thought to be in need, respectively.

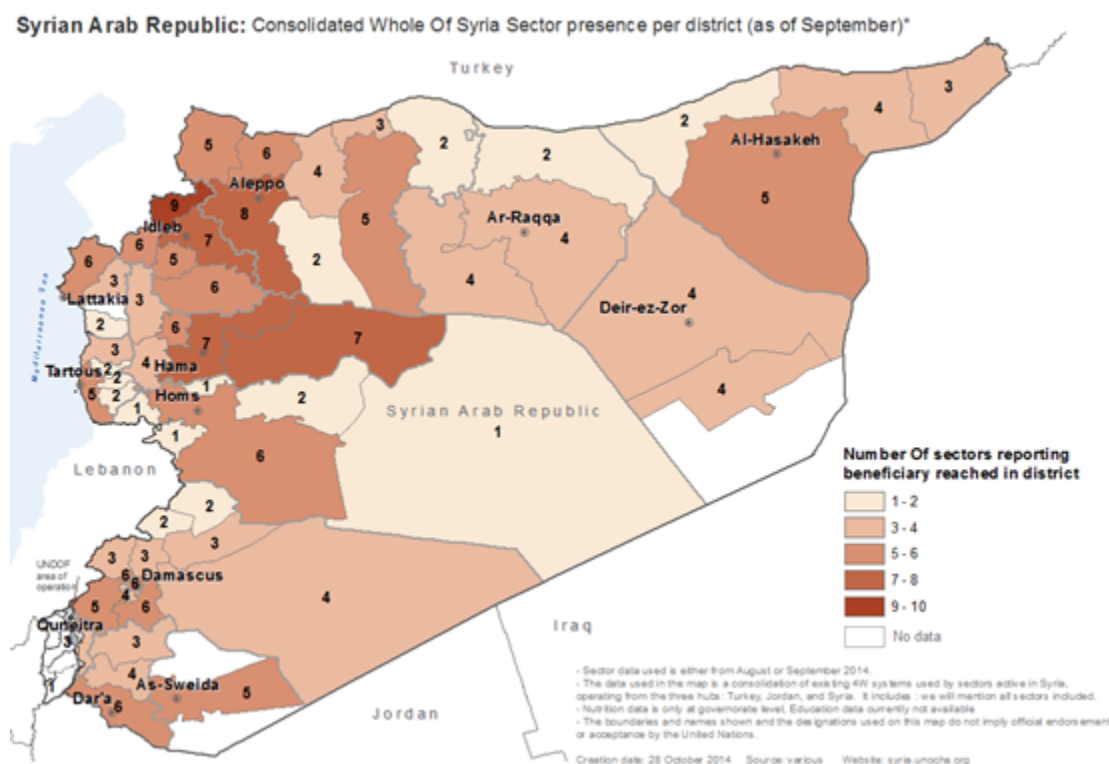
WASH Heatmap District level



## RESPONSE CAPACITY

In the past three years, a major relief operation inside Syria has come to life despite access constraints and increasing insecurity. Humanitarian actors, both national and international, have provided lifesaving multi-sectoral assistance to millions of people in need and continued to scale up humanitarian response. As of 28 October, the Syria Humanitarian Assistance Response Plan (SHARP) for 2014 was only funded at 38.2 percent (US\$ 870 million), while another US\$ 640 million has been allocated to partners outside of the SHARP framework, including for cross-border assistance, much of which is detailed within the framework of the US\$ 530 million Turkey-based Response Plan for the period of July 2014 to June 2015.<sup>59</sup>

While relief efforts have grown in breadth and scale, a clear impact in terms of improvements on severity of humanitarian needs due to assistance provision has been noted in some areas (e.g. in the health sector in sub-districts assessed through the MSNA), overall, the humanitarian response is falling short of addressing ever growing needs and significant gaps remain unaddressed in particular in hard to reach areas.



### National capacity and response

Throughout 2014, despite vast operational challenges, threats, and attacks against their personnel, the Syrian Arab Red Crescent (SARC) and national NGOs continued to provide life-saving assistance to Syrians in need, supporting, inter alia, vaccination campaigns, provision of healthcare, water, sanitation, and hygiene programmes, and the distribution of essential food and

<sup>59</sup> The plan can be accessed at <http://www.humanitarianresponse.info/operations/stima/document/response-plan-humanitarian-operations-syria-turkey-july-2014-june-2015>. The implementation rate of the Turkey-based Response Plan is not presently known as a tracking mechanism could not be implemented mainly due to confidentiality concerns and inadequate reporting both by NGOs and donors against the plan. Proxy indicators suggest that the assistance provided cross-border is significant.

non-food items throughout the country, as well as the provision of services such as education, psychosocial support, and community services.

SARC, with its 14 branches and 84 sub-branches, remains the largest implementing partner for UN agencies working within Syria. It has a network of 5,000 volunteers throughout the country and is able to also operate in many, though not all, opposition-controlled areas. SARC volunteers have paid a high price for being on the frontline of humanitarian action, with 38 volunteers killed to date in the line of duty, while many SARC facilities have been destroyed or damaged during the conflict.

As of 27 October 2014, there were 101 national NGOs authorized by the Syrian Government to partner with UN agencies operating from within Syria, with a collective 158 branches country-wide. Although this number appears significant, UN agencies and their partners face considerable challenges in their partnerships with NGOs. In particular, the Ministry of Foreign Affairs (MoFA) and the High Relief Committee must clear all partnership agreements with NGOs, including those authorized to work with the UN, causing considerable delays in formalizing agreements with partners. Secondly, to date, the UN has partnered with only half of all approved NGOs as many have very limited capacities. Thirdly, some of the approved NGOs are no longer functional due to conflict and insecurity in their area of work. Finally, the presence of national NGOs is uneven across sectors and governorates, with limited numbers in severely affected areas such as Raqqa, Rural Damascus, Dar'a, Idleb, Deir Ez Zor, and Hama.

Other Syrian NGOs, in addition to other networks and actors such as local councils, act as implementing partners for the cross-border response originating from Turkey, Jordan, Iraq and Lebanon or operate independently. While the number and reach is high, their capacity remains uneven. For instance, some NGOs have received considerable international funding and are able to implement large scale projects, while others mainly serve as implementing partners for the distribution of assistance in their areas of work.

While faith-based charities and foundations reportedly contribute significantly to the humanitarian response, the ability to capture the scale of their operations and integrate them in coordination structures remains a challenge for the international humanitarian system.

### **International capacity and response**

In 2014, UN humanitarian agencies continued to scale up their humanitarian response and outreach through regular and cross-line operations, increasing humanitarian coverage in all sectors and in all 14 governorates. In 2014, some 4.1 million people were reached with food assistance, 9 million people with health supplies, 3.8 million people with NFIs and 16 million people with WASH items; assistance to 4,776 migrant workers.

The UN footprint was enhanced in 2014 with the establishment of hubs in Aleppo, Qamishly, Homs and Tartous, specific deployment in several governorates, as well as the engagement of facilitators and focal points.

To date, only 14 INGOs are officially accredited in Syria and are operating under the SHARP framework. Those INGOs contribute significantly to the humanitarian response, but their number remains far from sufficient and in fact represents a decrease since the beginning of 2014. The great majority of INGOs are operating through Memoranda of Understanding (MoUs) with SARC and are allowed to establish sub-MOUs with line ministries, which for some INGOs remain pending, impacting negatively on their programme implementation. In addition, there are critical sectors, such as protection, health and nutrition, in which there are few or no INGOs partners operating from inside Syria active.



INGOs also face cumbersome administrative and bureaucratic procedures that constrain their operations. For instance, INGOs have reported difficulties in their ability to open any sub-offices across the country. Moreover, INGOs cannot partner with local NGOs (even those which the Syrian Government has authorized to partner with the UN) and cannot contribute staff and supplies to inter-agency convoys. In addition, a very limited number of visas for INGOs staff have been issued. As of 26 October, only 22 international INGOs have a valid visa and 11 visas remain pending.

There is a general need to monitor and report on protection violations. To this end, while acknowledging the challenges, UN Agencies and INGOs with protection mandates should give priority to ensuring appropriate coverage in country. In addition, the general needs of the humanitarian actors must be reflected in order to ensure quality and support the basic humanitarian principle of “doing no harm” to the affected population. Humanitarian actors are aware of the need to avoid enhancing beneficiaries’ vulnerability by misguided humanitarian acts and presence within the affected population.

### Cross border operations

In August 2012, in response to growing humanitarian needs in the northern part of the country, the Turkish Government designated 14 border points as “zero points”, allowing these to be specifically used by humanitarian partners for the provision of assistance at the Syrian border under a monitoring system led by the Turkish Red Crescent Society<sup>60</sup>. The Turkish Red Crescent Society reported that a total value of humanitarian assistance amounting to US\$ 332 million has been delivered through these “zero points”. This did not include assistance channeled into Syria through commercial routes as well as local procurement of relief items and the value of services in Syria.

From Turkey, INGOs and Syrian NGOs are providing regular assistance in several humanitarian sectors, reaching more than 2.5 million people with WASH assistance in 2014 as well as providing regular monthly food assistance to 991,000 people. In September alone, 522,000 people received health assistance and 212,000 people NFIs

From Jordan, bilateral donors, private donors, and INGOs working with Syrian distributions partners have been able to assist some 50 percent of the people in need in the southern Syria through cross-border operations, by providing basic services and life-saving humanitarian assistance.

With the passing of UN Security Council resolution 2165, the UN has started to deliver humanitarian assistance cross-border, with 26 convoys reaching an estimated 285,000 households since 14 July, partnering with both international and national NGOs that have established reach and experience in target areas.

Given the proximity and the ability to deliver assistance based on notifications under SCR 2165, as opposed to the current lengthier case by case approval processes in place for cross-line access, some areas are more accessible through cross-border operations. In light of existing gaps in the humanitarian response in many of these areas, there exists significant scope for scaling-up cross-border operations by UN agencies.

<sup>60</sup> The zero point assistance started in August 2012 and announced through a press release by the Turkish Prime Ministry’s Emergency and Disaster Management Presidency (AFAD): <http://reliefweb.int/report/turkey/delivery-humanitarian-aid-has-started=syrian-border-zero-point>.

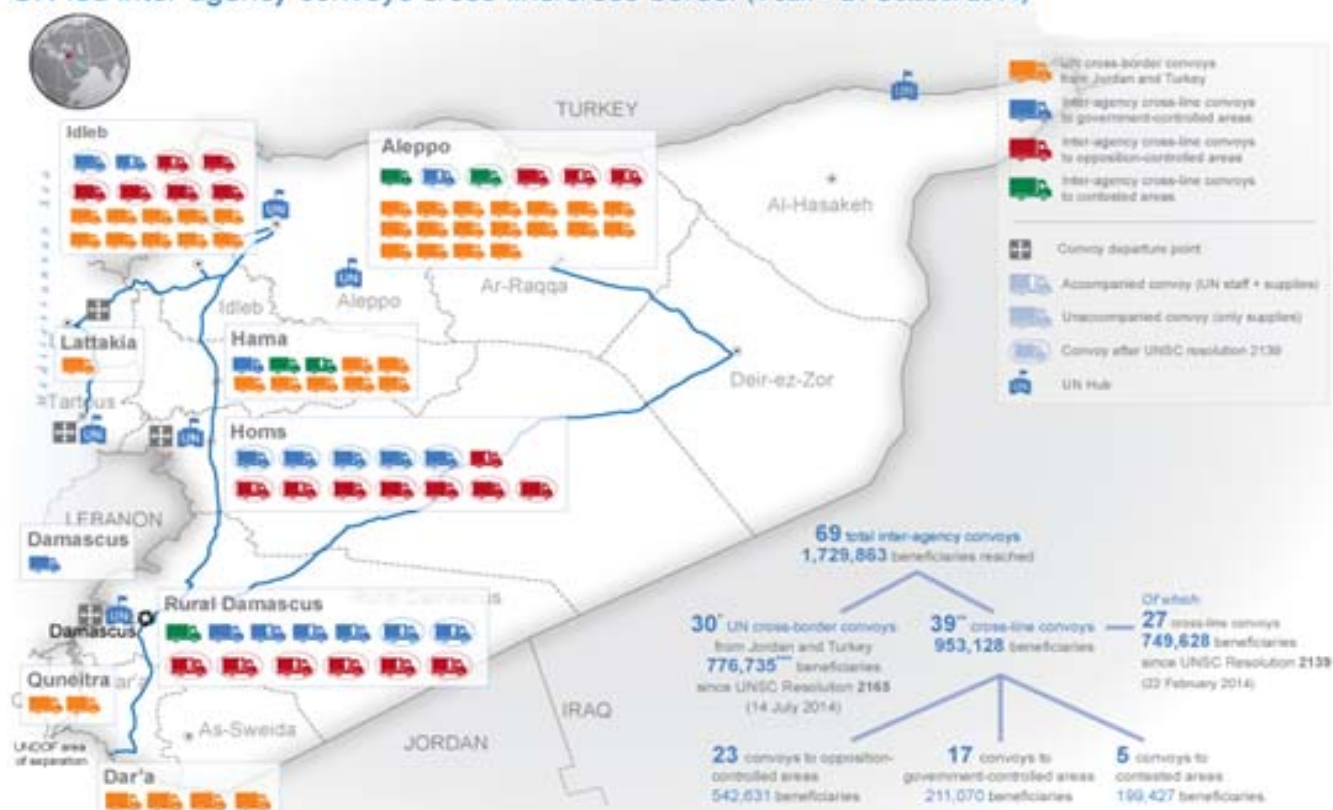
## Challenges associated with remote controlled operations

With insecurity growing in many parts of the country, implementing partners are faced with an increasingly complex operating environment. In parallel, the majority of actors carrying out cross-border or cross-line operations are finding it difficult to deploy their national or international staff to physically monitor program implementation by their partners. To address this growing challenge, common to all remote controlled operations in many other humanitarian contexts, most humanitarian partners have developed accountability frameworks based on risk management models that aim to link principles of due diligence, performance and capacity assessment throughout the project cycle.

These approaches are usually grounded in an analysis of the risks faced, coupled with assurance modalities designed to mitigate these risks. Risks are usually analysed at the level of the partner by undertaking due diligence activities and a comprehensive capacity assessment of partners, with risk mitigation measures being adapted to the assessed level of risk of each partner (ie. Level of reporting, monitoring imposed, and financial risk that the agency is willing to incur with the partner). This is usually complemented by a range of monitoring approaches, including remote monitoring techniques when direct monitoring is not feasible.

Given the inevitable level of risk inherent to remote controlled operations in Syria, and as the operating environment grows increasingly complex, it will be important to ensure that the accountability requirements of donors are met to the highest possible standard, while at the same time ensuring that the burden of risk is shared between humanitarian partners and donors in full transparency.

### UN-led inter-agency convoys cross-line/cross-border (1 Jan - 21 October 2014)



Creation date: 28 Oct 2014 Source: OCHA Feedback: ocha Syria@un.org  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

\* Some cross-border convoys cover more than one governorate

\*\* 1 cross-line convoy went to 2 areas under different control statuses (government + opposition)

## Increasing response capacity - the Whole of Syria approach

Due to the various operational challenges and the volatile security situation, the overall response by the humanitarian community has been fragmented during the year as a consequence of access constraints due to armed conflict and difficulties in bringing aid and services across often changing conflict lines.

Against a backdrop of growing needs, and following the adoption of UNSC resolutions 2139 and 2165, humanitarian actors operating inside Syria and across the Turkish and Jordanian borders met in Beirut on 3 September 2014 and decided to embark on a “Whole of Syria” approach to improve the effectiveness and operational reach of the collective response.

The cornerstone of the Whole of Syria approach is a commitment by all humanitarian partners to a coordinated response through the Inter-agency Standing Committee (IASC) sector / cluster approach to increase the efficiency and effectiveness of their response through (1) developing a principled, predictable and systematic operational planning process; (2) ensuring greater coherence across the different operational modalities (ie. cross-line, cross-border or regular programmes) through improved coordination; and (3) strengthening information-sharing and monitoring of response.

As part of the approach, humanitarian actors collectively decided to develop two-month joint operational plans designed as a practical test to implement the Whole of Syria approach on a feasible scale before the roll out of the 2015 Humanitarian Planning cycle. These plans, finalized on 14 October, have already resulted in a more effective humanitarian response in Syria through reduced overlap, increased complementarity, and overall improved information-sharing and joint planning. The plans have provided a much better understanding of the gaps in the collective response.

Building on the positive experience of the 2 months plans, humanitarian actors decided to develop the current joint HNO for the Whole of Syria, and are working closely together on a joint 2015 response plan.

Given the magnitude of the needs, there is also an urgent need to streamline and strengthen the coordination arrangements for the Whole of Syria in 2015 and ensure that they are underpinned by sufficient capacity. Getting this right will be crucial to enhance the response, noting that despite the humanitarian community’s best efforts, the response is still falling short of needs on the ground and vast gaps remain to be addressed.

Enhancing the presence, operational reach and capacity of UN, national NGOs and INGOs operating inside Syria, including through advocacy with government and other concerned actors, will be critical to increase response capacity. As the situation continues to deteriorate, enhanced contingency planning and pre-positioning of stocks to respond to unforeseen emergencies will also be important to more effectively and rapidly respond to emergencies and new displacement in 2015.

Beyond improving the overall effectiveness of the response, the Whole of Syria approach aims to also change the way humanitarian actors do business, with a view to improving the quality and reach of the collective response in a way to reduce aid dependency, promotes the resilience and dignity of affected people, and shores up sustainable livelihoods whenever and wherever possible.

## Support services for humanitarian operations in Syria

Both the **Logistics Cluster** and the **Emergency Telecommunications Cluster (ETC)** were formally activated in January 2013 to provide common services to the humanitarian community responding to the crisis in Syria and surrounding countries. The current situation in Syria and the region requires a holistic analysis of the needs for common services for the Syria response across several countries, in particular neighboring countries Lebanon, Jordan, and Turkey, and in line with the WOS approach for 2015. The changing regional dynamics, unpredictability of regional border crossings, logistics access constraints; unstable transport market, evolving security situation, and the need to coordinate an increasing number of humanitarian actors across the region, are some of the key challenges to be addressed in 2015.

### Transportation

The transport market in Syria is precarious, with transporters often refusing to go into certain hotspot areas, or increasing service rates to cover the additional risk. Drivers often indicate a willingness to go to certain areas one week, but later find themselves unwilling to risk their lives and assets the next. Sporadic closures along key routes such as the Damascus-Homs Highway as witnessed during the course of 2014, also disrupt cargo transport operations. Blockages at areas such as Palmyra severely limit road transport from Damascus to the east and northeast of the country. Emergency airlifts to isolated areas such as Hassakeh governorate are expensive, and such costs could be mitigated through improved road access to the area (such as via the Turkey/Syria Nusaybin crossing). Despite recent gains, certain locations such as Hassakeh and Deir Ezzour governorates in north-eastern Syria remain inaccessible by road from Damascus. In addition, rising fuel costs have also significantly improved the price of transport.

Humanitarian partners operating from Turkey and Jordan have been using various crossing points for humanitarian deliveries into Syria whenever authorized by the Government of Turkey, as well as when access conditions inside Syria allowed. Following UNSCR 2165, the logistic cluster has been supporting aid convoys via the Turkey border crossings of Bab-al-Hawa and Bab-as-Salaam as well as via the Jordan border crossing of Ramtha-Dar'a.

In March 2014, following the adoption of UNSCR 2139, both governments of Turkey and Syria allowed the first UN convoy to cross the Turkish-Syrian border through Nusaybin/Qamishly. On 30 September 2014, the UN further resumed operations through Nusaybin/Qamishly border crossing, a route that significantly helps to reduce logistics costs in resupplying UN warehouses in Al Hasakeh governorate.

The Nusaybin border crossing is a vital entry point into north-eastern Syria, currently the most isolated part of the country. The United Nations is currently using this crossing for delivery of assistance to Hassakeh governorate, under SCR 2139.

### Warehousing

The provision of adequate warehousing solutions is also challenging, as insecurity in certain areas has led to the looting and damage of warehouses. It is necessary to provide common warehousing capacity across the country in line with the needs of the humanitarian community, to store relief items on behalf of partners.

## HUMANITARIAN ACCESS

### Introduction

Throughout 2014, safe and unimpeded humanitarian access in Syria remained a significant challenge for humanitarian partners due to a confluence of factors, including widespread insecurity and conflict, shifting front-lines, bureaucratic impediments, conditions imposed by parties, and insufficient capacity.

While access remains relatively unimpeded in large parts of central and coastal Syria and only somewhat limited in the north-west and the south, access to large swathes of north-eastern Syria, Rural Damascus, and multiple locations in northern, central and southern Damascus remains highly restricted or even blocked. As of 26 October, it is estimated that 4.8 million people in need of humanitarian assistance continue to live in hard to reach areas and locations, of which 212,000 are fully besieged in 11 locations,<sup>61</sup> compared to 4.7 million people in hard-to reach locations and 241,000 people besieged in June 2014 (See Annex III).

It is worth noting that the level of needs is not even across all the hard-to reach areas, with the level of support to required varying depending on assessed needs in each sector.

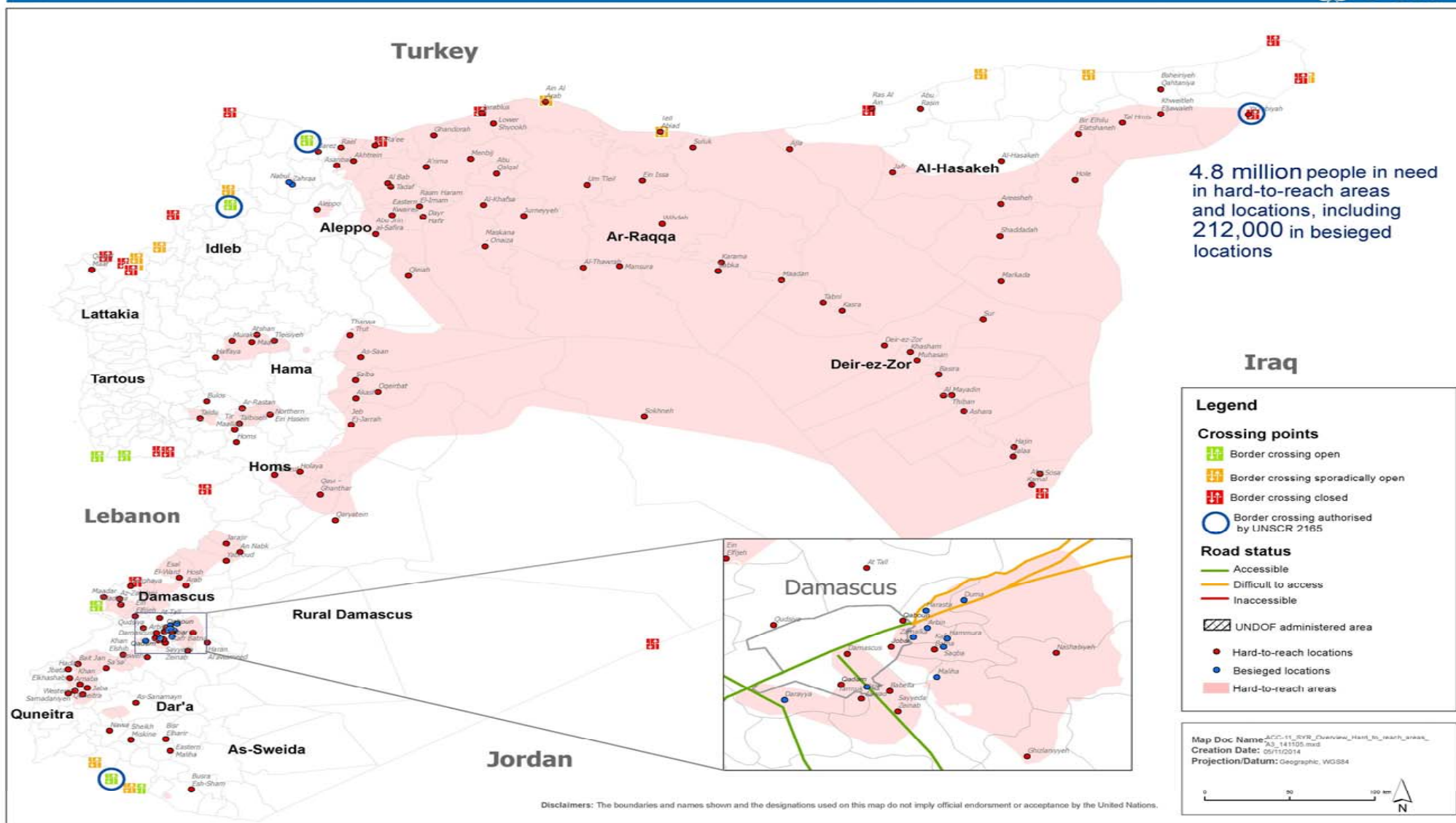
While UNSCR 2165 has brought positive developments in terms of humanitarian access to formerly hard to reach areas of Aleppo, Idlib and Hama in the north and Dar'a and Quneitra in the south, these gains were largely offset by increased barriers to access ISIL-controlled areas.

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<sup>61</sup> For the purposes of the Syrian conflict OCHA defines a 'hard-to-reach area' as an area that is not regularly accessible to humanitarian actors for the purposes of sustained humanitarian programming as a result of denial of access, including the need to negotiate access on an ad hoc basis, or due to restrictions such as active conflict, multiple security checkpoints, or failure of the authorities to provide timely approval. For the purposes of the Syrian conflict OCHA defines a 'besieged area' as an area surrounded by armed actors with the sustained effect that humanitarian assistance cannot regularly enter, and civilians, the sick and wounded cannot regularly exit the area. It is important to note that failure to access for other reasons (lack of capacity or will on the part of humanitarian actors) does not make an area hard-to-reach, but represents a gap that needs to be addressed programmatically.



## Syrian Arab Republic: Overview of humanitarian access with hard-to-reach areas and locations (as of 5 November 2014)



## Access Constraints

A number of trends have contributed to the continuation or expansion of access restrictions, despite the achievements of UNSCR 2165.

### Conflict dynamics

In 2014, conflict dynamics further restricted access, particularly to north-eastern Syria. Areas under the control of the armed opposition or contested by the Syrian government and armed opposition continue to be most affected by security incidents, especially in Damascus, Rural Damascus, Homs, Aleppo, Hama, Latakia, Idleb, Dar'a and Quneitra. Security incidents in ISIL-controlled areas have decreased somewhat, as ISIL has consolidated control, although conflict remains intense in locations under mixed government- and ISIL-control, such as Deir-ez-Zor city, and in locations under mixed Democratic Union Party (PYD) / government - and ISIL-control in al-Hasakeh.

Moreover, the number of parties engaged in active conflict with one another has grown, particularly after ISIL's territorial expansion provoked sustained fighting with both government and armed opposition forces, including along key access routes, exacerbating longstanding challenges in accessing hard to reach areas in the north-east. As of 27 October, a government offensive in Handarat (Aleppo) is threatening to encircle and cut access to approximately 300,000 people in opposition-controlled neighbourhoods of Aleppo City.

### Impact of ISIL expansion

Of the 4.8 million PIN in hard to reach areas, 2.7 million are located in areas under the control of ISIL. ISIL's dramatic territorial consolidation has allowed it to place constraints on humanitarian actors operating in areas under its control, seeking to impose conditions on distributions mechanisms, recruitment of staff and increasing harassment of humanitarian workers. ISIL has also blocked cross-line access by UN agencies or partners to ISIL-controlled areas, as well as all humanitarian access to Kurdish areas in Aleppo and al-Hasakeh and to government-controlled neighbourhoods of Deir-ez-Zor city, where up to 150,000 people are now at risk of being fully besieged.

Armed opposition groups have, on several occasions, restricted humanitarian access to the 2.7 million people in need located in ISIL-controlled areas in north-eastern Syria. Despite those challenges, there are several local and international NGOs that continue to operate and successfully negotiate access in ISIL-controlled areas, and ad hoc assistance is received from Gulf actors.

### Cross border access

In July 2014, the UNSC passed resolution 2165, authorising cross-border access for the UN agencies and their implementing partners through four border crossing points - Bab al-Hawa and Bab al-Salam from Turkey; Ya'robiyeh from Iraq; and Al-Ramtha from Jordan - to ensure that humanitarian assistance, including medical and surgical supplies, reaches people in need through the most direct routes.

As of 30 October 2014, 26 shipments have passed through three out of the four border crossing to deliver humanitarian assistance in Aleppo, Idleb, Hama, Dar'a, Latakia and Quneitra governorates, with armed groups present in the area having imposed no restrictions on access so far.<sup>62</sup> UN agencies are yet to use Yaroubieh border crossing due to the insecure situation in adjacent parts of Iraq.

<sup>62</sup> 30 groups operating in these areas signed a declaration of commitment on compliance to IHL and humanitarian assistance in compliance with UNSCR 2139 and 2165.

This assistance, although limited compared to the one provided by INGOs operating through cross-border, has reached some populations located in hard to reach areas in northwest Syria, due to the relative proximity of these areas to border crossing points. It also simplified administrative processes which, *inter alia*, require the submission of notification to the Syrian authorities only 48 hours in advance of operations. UN agencies delivered this assistance through international and local NGOs with longstanding operations and access in north-western Syria, as well as in the southern governorates. Cross-border shipments were also made possible with the full cooperation of the Governments of Turkey and Jordan. The UNSCR 2165-mandated UN Monitoring Mechanism (UNMM), deployed at the border crossing, ensured the humanitarian nature of the shipments prior to their entry into Syria.

The specific dynamics of humanitarian access of NGOs operating cross-border should be noted, with armed groups often granting significant and sustained access to local NGOs and INGOs operating cross-border through local staff or implementing partners. Accordingly, 50 international NGOs, and over 100 Syrian NGOs continue to conduct or support cross-border operations into Syria from Turkey. There are also several local and INGOs operating inside Syria from Iraq and Jordan. Most NGO cross-border operations reach areas in Aleppo, Idleb, Dar'a, Quneitra, rural Lattakia and northern rural Hama, while some continue to provide the modality of cash assistance to hard to reach or besieged opposition enclaves in Homs and Damascus.

Cross-border operations through the 14 border crossings which the Turkish government had authorised for use since 2012 also remain constrained by restrictions on borders with adjacent countries or conflict at those borders. The principal border crossings used to access north-western Syria from Turkey are generally open but have been subject to security incidents that have led to their closure for several days. ISIL's territorial expansion prompted Turkey to close ISIL-controlled borders in January 2014, creating major access restrictions to ISIL-controlled areas. Turkish authorities have since granted ad hoc border access to ISIL-controlled areas through Tell Abyad, notably after armed opposition groups blocked almost all access to ISIL-controlled areas from inside of Syria in July 2014. Turkey continues to restrict access through border crossings under the control of the PYD, hindering access to areas under the control of Kurdish forces in north-eastern Syria.

Cross-border access remains difficult from Iraq. Political disputes between the two Kurdish authorities controlling the border - the PYD and the Kurdish Regional Government – have led to closures of the Fiskhabour-Simalka crossing, which is used by various international and local NGOs to access north-eastern Syria. Yarobiyyeh border crossing, permitted for cross-border use in UNSCR 2165, remains unusable as a result of conflict between Kurdish forces (Iraqi Kurdish Forces and Syrian YPG Kurdish Forces) and ISIL in Iraq.

While UNSCR 2165 authorized the use of al-Ramtha crossing for UN cross-border operations from Jordan - specifically and exclusively for operations under UNSCR 2165 with six UN convoys using it to date - the border crossing requires upgrading to allow for the passage of more regular humanitarian aid consignments. The UN is working to address these capacity challenges.

### **Access across conflict lines**

The Syrian Government continues to restrict cross-line humanitarian access to a wide range of areas, including to 4.8 million people in need in hard to reach areas, of which 185,500 people in nine areas in Damascus and Rural Damascus are fully besieged. Cross-line access is regulated by the Syrian Government under specific and stricter procedures than those used in regular programming, with the Syrian Government's Joint Committee on the implementation of UNSCR 2139, emphasising that access across conflict lines can only be negotiated on an *ad hoc* basis. Moreover, cross-line access at a subnational level has been further restricted by new

administrative procedures, imposed since May 2013, whereby local Governors cannot approve cross-line missions without 3 layers of approval by the Central Government, sometimes resulting in 2-3 months delays for cross-line plans already approved. Cross-line access is further restricted by conditions imposed by all parties on quantities, type of assistance, routes, as well distribution modalities and selection of implementing partners. Although there is no official communication by the Syrian Government, further restrictions and denials to the delivery of surgical and other life-saving medical supplies through cross-lines have been reported throughout 2014, in clear violation of IHL and HRL.

Despite those constraints, 43 inter-agency cross-line convoys took place, reaching almost 1 million people, in Aleppo, Idlib, Damascus, Homs, Hama, Rural Damascus since the beginning of 2014.

Since the beginning of 2014, the UN have submitted 94 requests for inter-agency convoys to hard to reach and besieged locations at national and hub levels. 51 convoys could not proceed due to lack of approval by the Syrian Government and or conditions imposed by the warring parties.

While UNSCR 2165 creates an operational space for cross-lines missions and convoys through a simplified notification system, these provisions of the resolutions have not been implemented, and procedures for actors operating from within Syria remain cumbersome as described above.

### Attacks against aid workers

All parties to the conflict continue to disregard IHL and HRL, through indiscriminate bombardment or through attacks on humanitarian workers and facilities. Since March 2011, 70 humanitarian workers have been killed, including 21 United Nations staff, 38 SARC staff and volunteers, seven Palestine Red Crescent Society volunteers and staff and four international NGO staff. 27 UN national staff have been detained or remain missing, of which 24 are UNRWA Area Staff, two UNHCR staff and one UNDP staff. It is also worth noting the two humanitarian workers beheaded by ISIL in 2014, the two international humanitarian workers that remain captive with ISIL<sup>63</sup> and an extensive arrest campaign of local humanitarian workers conducted by ISIL in eastern rural Aleppo in 2014.<sup>64</sup>

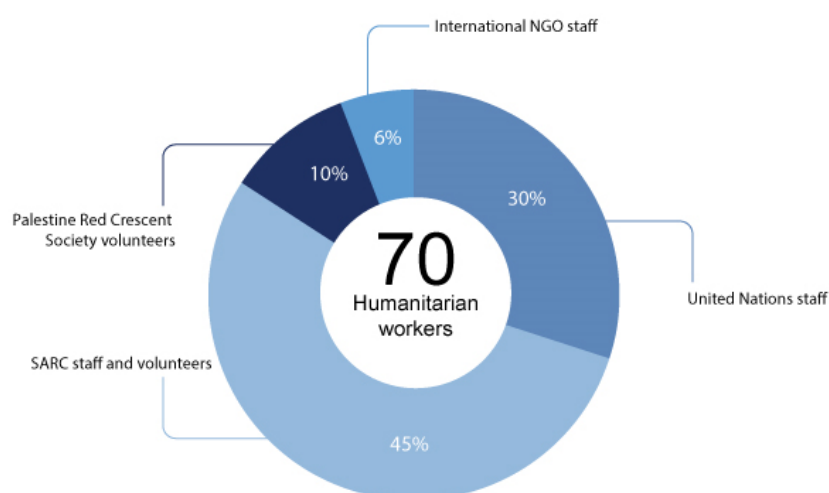


Figure: Humanitarian workers killed in Syria

### Outlook for 2015

In the absence of a viable peace and reconciliation process, all parties to the conflict are likely to continue seeking territorial expansion in the hope of significantly altering the balance of power to their advantage.

<sup>63</sup> <http://www.nytimes.com/2014/10/26/world/middleeast/horror-before-the-beheadings-what-isis-hostages-endured-in-syria.html?>

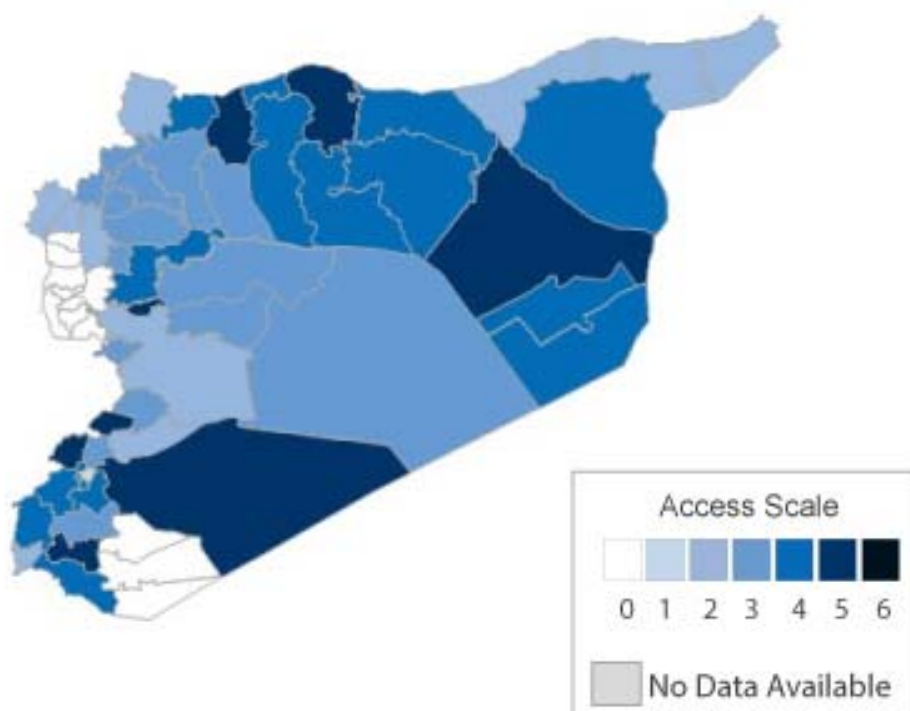
<sup>64</sup> OCHA Turkey Humanitarian Bulletin

A further escalation of the conflict along key access routes is therefore envisioned in 2015, thus hindering the ability of humanitarian actors to reach affected people, particularly in already hard to reach and besieged areas.

Against this backdrop, preserving and where possible expanding humanitarian access will require engagement with all parties at all levels with a view to increasing acceptance for humanitarian action and negotiate access for aid, as well as effective cooperation with international and local NGOs to necessary to fill gaps throughout the country. This will require advocacy with the Syrian Government and other parties, in order for them to increase the space offered to international and local NGOs. Heightened insecurity will increase the dependence on remote management, necessitating improved risk sharing and management measures, as well as flexible operational modalities.

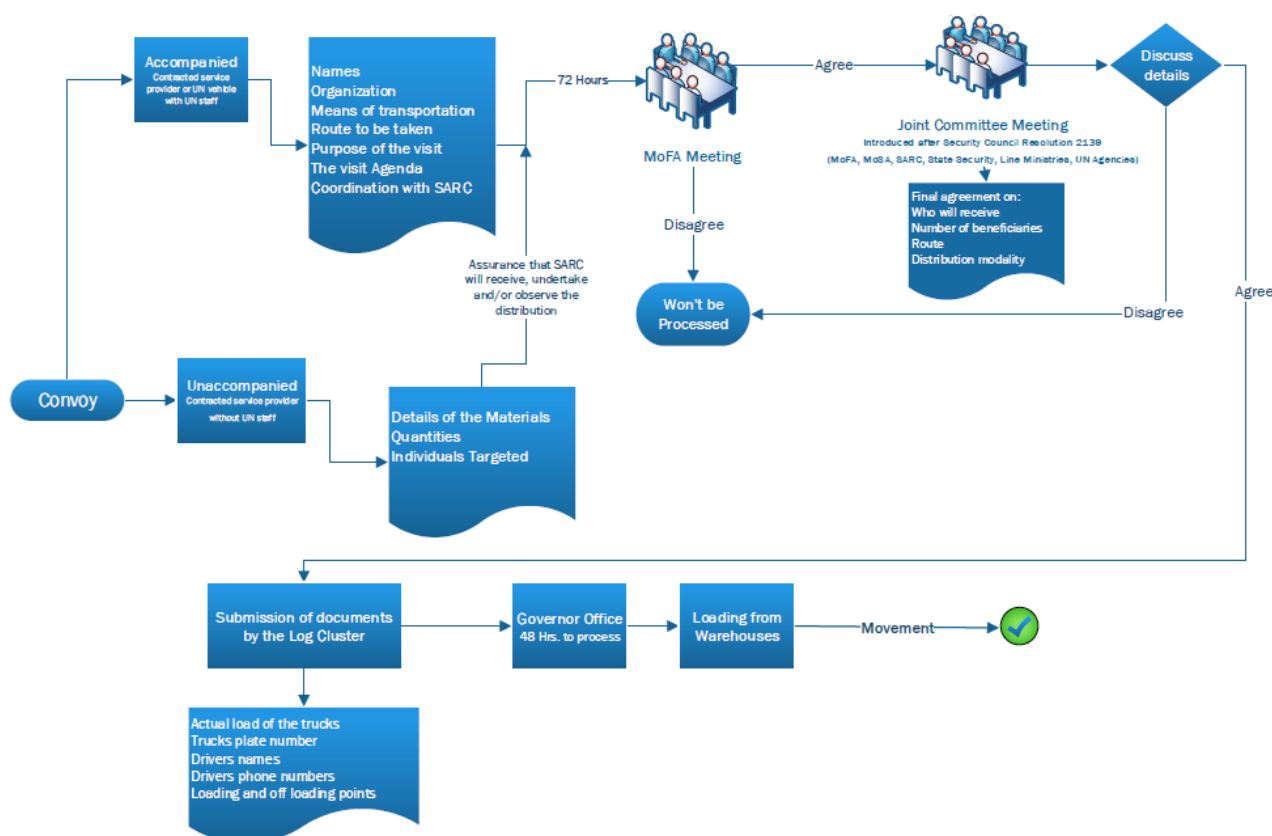
The current access analysis indicates that significant access constraints will continue throughout the country. Scaling up assistance through all available modalities to reach people in need (cross-border, cross-line, regular programming) should therefore be a priority in 2015.

Access Heatmap District level

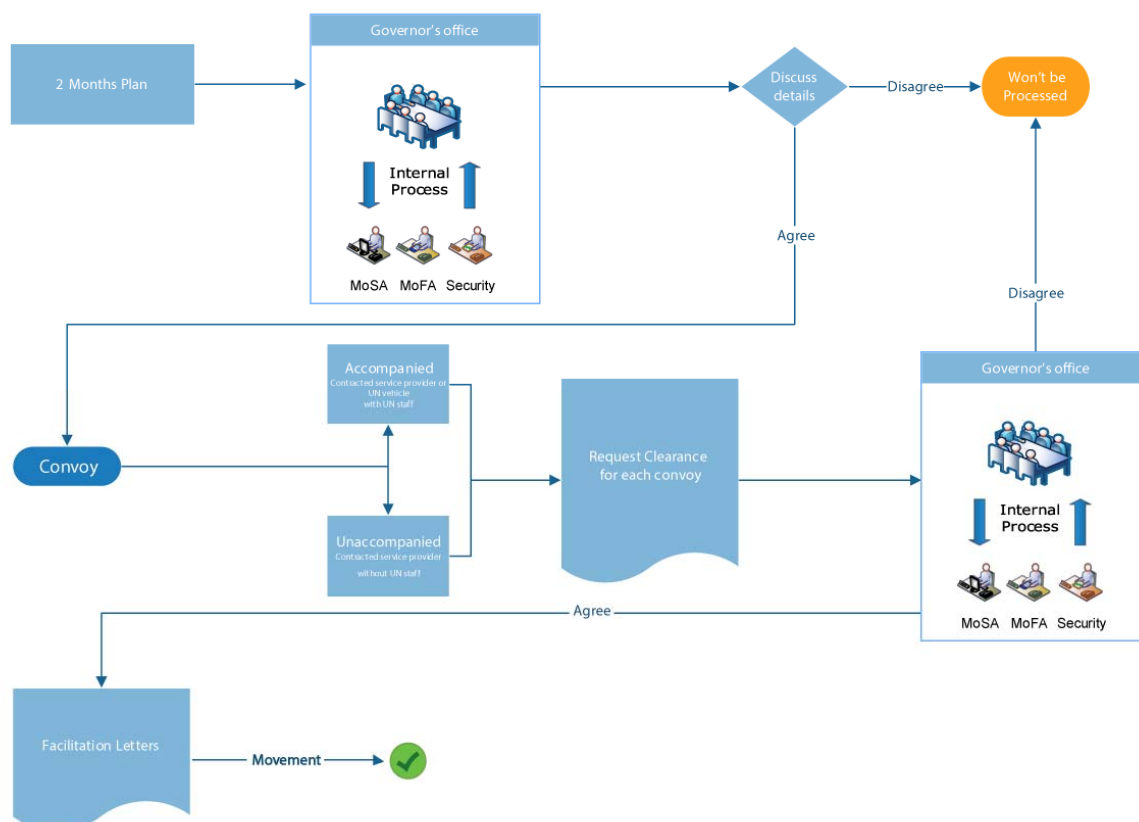




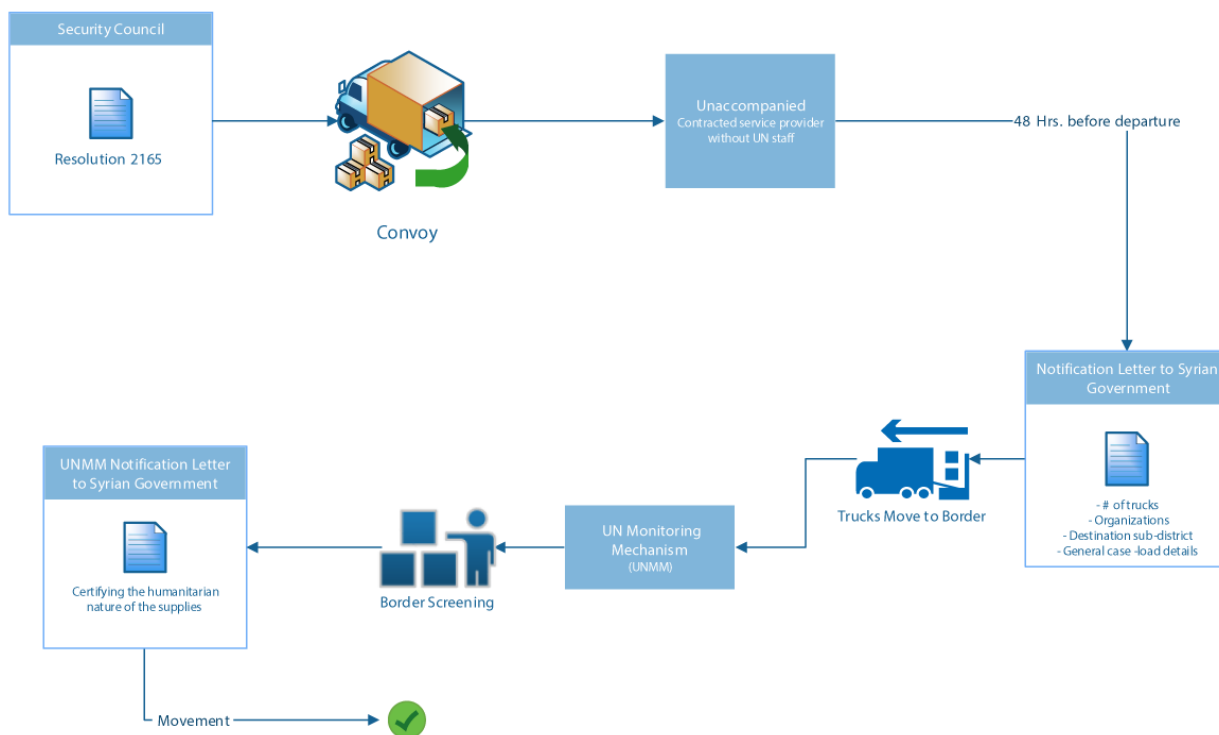
## Syrian Arab Republic: National-Level Interagency Cross-line Convoys



## Syrian Arab Republic: Hub-Level Interagency Cross-line Convoys



## Syrian Arab Republic: UN Cross-Border Convoys



## INFORMATION GAPS AND ASSESSMENT PLANNING

### Information Gaps and assessment planning

While the humanitarian crisis in Syria continues to worsen, the identification of humanitarian needs to inform an effective response is critical. In the past three years, humanitarian actors have worked to improve their understanding of needs and have significantly strengthened information management, needs assessment, analysis and monitoring, despite the constraints of the operational environment.

In 2014, the humanitarian community working in Syria has relied on a number of key sources of data including; the Governorate profiles, the MSNA and the Dynamo Monitoring (DYNAMO). Turkey based actors also relied on the the Syria Integrated Needs Assessment (SINA, December 2013). In addition, sector-specific assessments have provided a useful body of information to define the needs and responses. Another key source of information is the area of origin assessments conducted through interviewing of refugees on the situation of needs in their areas of origin. Other sources of information include revision of secondary data review, including the Syria Needs Analysis Project (SNAP).

While progress has been made at the technical level to develop a joint assessment approach within Syria, and concurrently OCHA has initiated various mechanisms to support primary and secondary data collection in Syria, Turkey and Jordan, coordinated country-wide assessments have not been undertaken yet.

In addition, while efforts that have been made to roll-out in-depth sector assessments, these have been ad-hoc and isolated efforts by actors operating in the different hubs (Jordan, Syria and Turkey, Lebanon and Iraq), and information flow and coordination between the hubs has so far remained weak as operations have been running in parallel and with limited interaction.

Tracking of internal displacement in Syria remains extremely difficult due to shifting frontlines and intense conflict, and the absence of a well-developed IDP tracking and registration systems.

At present there is no comprehensive assessment with harmonised data covering the entire country. Gender disaggregated data and related analysis is too scanty to provide a good picture of the differentiated needs of women, girls, boys and men. Ongoing conflict, insecurity and severe access restrictions have resulted in a lack of a robust protection/child protection and GBV monitoring and data collection mechanism. This remains one of the major obstacles in providing in-depth analysis. Collection of GBV data is particularly challenging given the cultural context and lack of response services, which limits any efforts to effectively collect and document GBV cases in an ethical manner in keeping with international standards.

As a consequence, significant information gaps remain at both sectoral and inter-sectoral levels that need to be addressed as a matter of priority to improve the response.

To this end, in 2015, building on the opportunities created by the Whole of Syria approach and on the information available and gaps highlighted in the Humanitarian Needs Overview, humanitarian actors supporting the response inside Syria will aim at strengthening and harmonizing assessments initiatives to ensure a better evidence based response to assessed needs.

The following specific measures will be prioritised to strengthen information and needs assessment capacity.

## Needs Assessments

### **Improving Inter-sectoral assessments**

Inter-sectoral coordinated assessments planned for the response inside Syria will be guided by a Whole of Syria assessment strategy. OCHA will aim to facilitate this process through effective Inter-Cluster coordination, including in terms of information management in line with the IASC guidelines on Coordinated Assessments and Information Management. As part of the 2015 response plan, the priority for humanitarian actors will be to agree on and roll-out a light Joint Humanitarian assessment mechanism tailored to the operational constraints inside Syria.

### **Creating a more effective IDP tracking mechanism and displacement mapping**

Establishing an effective IDP tracking mechanism that covers the whole of Syria is therefore a priority to enable a more effective response to the largest displacement crisis the world is facing.

### **Improving sectoral assessments.**

Ensure that each sector develops a clear assessment strategy at the Whole of Syria level to assure common approaches in assessments undertaken, with a view to identifying gaps in coverage and enabling a more effective and prioritized response to assessed needs.

## Information Management

### **Strengthening IM capacity for the response inside Syria.**

Sectors within Syria have, up until recently, generally focused their limited information management resources on agency-specific work. With the adoption of the Whole of Syria approach and the needed strengthening of the sector approach, sector lead agencies will increasingly need to make sure that an appropriate level of information management resources are committed to sector-specific work, in accordance with IASC guidance.

### **Engaging specialized NGOs and integrating IM initiatives**

Partnership with specialized NGOs within the area of information management, assessments, and monitoring will need to be strengthened to provide needed expertise and advice to clusters / sectors, capitalising on the on-going work of the The Needs-Response-Gap project, in which a number of NGOs and Whole of Syria sectors are currently involved.

## ANNEX I

### FULL SECTORAL INPUTS



#### Protection and Community Services

##### Impact of the crisis

##### I. Drivers and underlying factors

##### Deepening Protection crisis

There have been significant changes in the overall dynamics of the conflict in Syria marked by new and fluctuating frontlines, higher intensity, increased regionalization, and significant changes in areas of control. The intensification has led to increased levels of violence, brutality, targeting and destruction of basic social services, especially schools and hospitals. The prominence of ISIL and increased fighting between various armed groups across the country have led to significant levels of violence and internal displacement. Civilian deaths continue to increase. UN estimates indicate that over 191,000<sup>65</sup> have been people killed and 1 million injured since the start of the conflict. Child casualty rates are believed to be the highest recorded in any recent conflict in the region, and chronic human rights violations continue to occur in a context of widespread insecurity and total impunity. The UN estimates that 7 million people are currently displaced across Syria, while over 3 million have sought refuge in neighbouring countries, making Syria the world's largest internal displacement crisis. The refugee crisis has overwhelmed local hosting capacities in neighbouring countries that have at times restricted entry of Syrians fleeing the conflict.

##### Situation of the affected populations:

##### (i) Lack of civil documentation and limited/denied access to humanitarian assistance.

At present, there is no legal/policy framework to support the protection of Internally Displaced Persons (IDPs) in line with the Guiding Principles on Internal Displacement that would ensure that protection and accountability mechanisms are in place in displacement settings and enhance an effective and timely response to the needs of IDPs. Individuals without civil documentation papers, including those who either lost their documents or failed to register civil events (births, marriages etc.) due to a range of barriers, including besiegement, are especially vulnerable to harassment, exploitation and restricted freedom of movement. The destruction of property and the status of property left behind by IDPs combined with the loss and/or destruction of civil and property documentation is also a major protection concern with long term consequences.

The crisis has curtailed people's freedom of movement, disrupted their access to basic services and ability to seek humanitarian assistance. UN estimates indicate that 4.8 million are in hard to reach areas, including in ISIL controlled areas where greater risks are present for aid workers. Of that number, 212,000 are trapped in besieged areas, meaning that they are denied total access to

65 Updated Statistical Analysis of Documentation of Killings in the Syrian Arab Republic, 22 August 2014, Human Rights Data Analysis Group commissioned by OHCHR. Found at: <https://hrdag.org/syria/>

humanitarian aid as a weapon of war by parties to the conflict, in violation of international humanitarian and human rights law.

There have also been attacks on humanitarian property and personnel. Access to undertake meaningful and sustained protection service delivery remains challenging primarily due to access constraints, increasing insecurity and administrative hurdles.

Further, certain groups do not have equitable access due to barriers ranging from physical, social/cultural, age, gender and lack of information. The MSNA reported that a lack of adapted services for persons with restricted mobility was one of the major obstacles to accessing assistance in all sectors, in particular health, sanitation, food and NFI.

## **(ii) Increase in sexual and gender based violence**

Incidents of sexual and gender based violence (SGBV) are on the rise<sup>66</sup>. Women and girls are at particular at risk of sexual violence due to forced displacement, family separation, lack of basic structural and societal protections, and limited availability and safe access to services.<sup>67</sup> This is within the context of evolving gender dynamics, driven by factors such as security, stress on economic resources, restrictions on mobility and increasing revival of conservative traditional norms, particularly in areas controlled by extremist religious groups. Further, provisions in statutory law and customary practices entrench discrimination and violence against women and girls.

SGBV risks are particularly aggravated by overcrowding and lack of adequate protection measures in abandoned buildings and other locations where many families have found shelter<sup>68</sup>.

MSNA data indicate the occurrence of cases of early marriages in Ar Raqqa, Deir Er Zor, al Hassakeh and Idlib Governorates. Early and/or forced marriages to foreign fighters has also been reported particularly in Deir Er Zor Governorate. In addition to citing economic pressure and the use of marriage as a “protective” measure for adolescent girls. MSNA analysis highlighted lack of access to education as another major contributing factor to early marriage.

Meanwhile, the Commission of Inquiry asserted that the parties to the conflict are using sexual violence as an instrument of war.

Gender Based Violence (GBV) actors have been able to identify and support 67,744 cases of violence against women, in four locations in Damascus, Rural Damascus, Homs, Hama and Latakia.

These incidents are vastly under-reported due to societal norms, fear of retribution, lack of specialised services and limited community awareness. As a result, it is difficult to assess the magnitude of the problem although available data indicates that this continues to be a significant protection concern.<sup>69</sup> GBV always increases in conflict situations. According to the guidelines underlying the Minimum Initial Service Package (MISP), 2 percent of women and girls at reproductive age can be expected to require post-rape treatment care. Data from the Syria MSNA show that protection, safety and dignity were ranked as the second highest priority needs for women across all assessed areas and as a first priority in urban areas.

66 Aliyah Sarkar (June 2014): The Syrian Conflict and Gender Dynamics: Society, Violence and peace process.

67 Global Protection cluster, the Hidden cost of War: Gender-based violence, May 2013

68 ibid

69 Report of the Independent International Commission of Inquiry on the Syrian Arab Republic, 13 August 2014 (A/HRC/27/60)



**(iii) Grave violations against children**

The conflict in Syria has been characterized from the onset by wide scale, grave violations committed against children, including killing and maiming of children, child recruitment and use by armed groups; the abduction, arbitrary detention, and ill treatment/torture of children, sexual violence against girls and boys.<sup>70</sup>

Over 1,200 grave violations against children were documented by the UN in the first six months of 2014, confirming some of the trends reported in the Syria chapter of the 2014 Secretary General's report on Children and Armed Conflict.<sup>71</sup> This number includes over 850 children killed and maimed in the first six months of in 2014 – the vast majority as a result of the indiscriminate use of explosive weapons in populated areas, particularly in Homs, Aleppo, Damascus, and Dara'a. Actual numbers are expected to be much higher. Attacks on education and health facilities and personnel are also having a major impact on children's basic rights to education and health<sup>72</sup>.

Eighty attacks on schools were documented between January and August 2014.<sup>73</sup> Furthermore, since the start of the conflict, over 200 attacks against health facilities and the killing of 560 health personnel have been documented.<sup>74</sup> Trends indicate that these grave violations have become more prominent in the second half of 2014. Recruitment and use of children in armed conflict stands out as a major concern. While adolescent boys are particularly susceptible to recruitment and use in combat roles, 2014 has seen increased reports of adolescent girls associated with armed groups, especially extremist groups, as "wives".<sup>75</sup>

**(iv) Other forms of violence, exploitation, abuse and neglect of children**

Preliminary evidence suggests that there are large numbers of separated or unaccompanied children living among IDPs and host communities, however, due to the lack of systemic identification, documentation, family tracing and reunification, only 176 children were identified and supported<sup>76</sup>. In 2014, the UN reported that at least 8,000 children had arrived at Syria's borders without their parents.<sup>77</sup>

In addition, children continue to experience large scale physical harm, neglect, dropping out of school and child labour, including under very hazardous conditions and increased risk of trafficking. Available data suggests that the involvement of children in labour is often related to the absence of a financial provider within the household (father disabled, dead or missing) and disruption of education.

Evidence also strongly suggests that children and youth are facing restricted access to justice, arbitrary detention and unlawful arrest. The disruption of formal mechanisms for birth registration, a pre-crisis element of the national child protection system in Syria, as well as the weakening national legal system further increases the vulnerability of children both in the short and longer term, including the risk of statelessness.

<sup>70</sup> Report of the Secretary General on children and armed conflict in the Syrian Arab republic, 27 January 2014 ( S/2014/31).

<sup>71</sup> Report of the Secretary General on children and armed conflict, 15 May 2014 (S/2014/339)

<sup>72</sup> UN sources

<sup>73</sup> Syria Regional Analysis, Q3 2014, 13 October 2014

<sup>74</sup> Physicians for Human Rights (PHR), 2014

<sup>75</sup> UN sources

<sup>76</sup> Internal report

<sup>77</sup> Regional Response Plan for Syria, UNHCR, December 2013.

Moreover, children in Syria continue to experience a high level of distress as a result of witnessing violence and destruction, the killing and injuring of members of their families and peers, or of being separated from their family and/or displaced. Deteriorating living conditions and lack of access to basic services also significantly impact children's psychosocial wellbeing.<sup>78</sup>

**(v) Risks of unexploded ordinances and munitions**

The Syria conflict has been characterized by the well documented wide scale indiscriminate use of explosive weapons in populated areas resulting in significant numbers of civilians, including children, killed and maimed and a corresponding increase in the number of people with disabilities.

The intensive use of explosive munitions on high-density urban areas throughout the conflict has also resulted in widespread contamination by unexploded remnants of war, which will require decades of rigorous clearance efforts.<sup>79</sup> Major cities and their suburbs, including Aleppo, Damascus, Deir ez-Zor, Homs, Hama and Ar-Raqqa have been seriously affected while rural areas of Dar'a, Idlib and northern Latakia governorates are also likely to be significantly contaminated.

The risk of injuries and death from explosive remnants remains high for all conflict affected populations. Children are in particular danger due to their natural curiosity and high mobility, hence raising the immediate need for risk education and awareness training as a vital life-saving protection response in addition to age specific survivors' assistance programmes. Furthermore, in affected areas explosive remnants prevent people from accessing basic services and livelihoods.

**(vi) Specific protection concerns of Palestine refugees**

Palestine refugees have been severely and disproportionately affected by the conflict. The location of Palestinian camps and gatherings in urban peripheries throughout Syria, particularly Damascus, Aleppo and Dara'a, have produced massive levels of displacement among this community, as residential areas became active frontlines in 2012 and 2013.

Prior to the conflict, Palestine refugees experienced significantly higher levels of poverty and unemployment than the Syrian population meaning that, in addition to frequent exposure to armed conflict, their resilience and coping mechanisms have been all but exhausted.

Throughout 2014, both Jordan and Lebanon blocked all entry to Palestine refugees from Syria, leaving this already vulnerable population with nowhere to flee. Tens of thousands of Palestine refugees continue to live in areas of active conflict, such as Yarmouk, Khan Eshieh and Qudsaya in Damascus Governorate; Dera'a Camp and the surrounding villages in Dera'a Governorate; and Neirab Camp / Eastern Aleppo City in Aleppo Governorate. These communities live in a state of profound vulnerability, with civilian communities frequently overwhelmed by armed engagements and exposed to life-threatening levels of deprivation.

**Challenges**

Given the constraints in terms of humanitarian access, insecurity, the sensitivities involved in carrying out sustained protection interventions in the midst of conflict and the limited protection capacity on the

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<sup>78</sup> SG Report, S/2014/31.

<sup>79</sup> Syria Needs Analysis Project, Explosive remnants of war (ERW) and landmines, August 2014

ground, protection needs of the conflict affected population still remain largely unaddressed. These challenges will continue to persist.

### INFORMATION GAPS

Ongoing conflict, insecurity and severe access restrictions have resulted in a lack of robust protection, child protection and GBV data collection mechanisms, which remain one of the major obstacles in providing in-depth analysis of the protection situation inside Syria. So far, due to the challenges indicated above, the Protection and Community Service Sector has not been able to conduct a sector specific assessment to provide better understanding of the types, severity and concentration of protection needs across the country.

Limited child protection data and analysis is currently available. Child Protection situation and response monitoring mechanism is underway to support data collection and analysis.

GBV is difficult to quantify even in the best of circumstances. In the Syrian context, reporting on GBV has to contend with the cultural context, the continuous population displacements, and the breakdown of information and data collection. Also, the absence of data about numbers of survivors is linked to their access to services. Due to the lack of availability of such services, not all survivors have access to GBV care even if they seek it. Current data reflects only the relatively few registered cases.



## Camp Coordination and Camp Management (CCCM)

PiN: 1,243,300<sup>80</sup>.

### Camp Coordination and Camp Management (CCCM)

While no formal mechanism exists to track the number of off-settlement IDPs in Syria, the most well assessed IDP concentration are the informal settlements close to the Turkish and Jordanian border. Only a small percentage of IDPs, usually the most vulnerable, moved to informal or formal settlements or shelters, which are often overcrowded and unsanitary. As of 26 October 2014, the CCCM sector reported that 178, 569 IDPs were residing in 139 informal IDP camps and settlements across the northern and southern governorates of Idlib, Aleppo, Ar-Raqqa, Latakia, Deir-ez-Zor, Dar'a and Quneitra.

Between January and September 2014, the number of IDPs in settlements increased from 108,003 to 166,328 (54%). While there are only few planned IDP camps, the vast majority of settlements are informal. Only four locations were reported as formal settlements or camps. 52% of the IDPs in settlements are estimated to be women and at least 40% are children. IDP settlements are homogeneous. The religious and sectarian minority groups did not move to settlements but rather they have either left the country or moved to other areas.

In the northern governorates, the overall humanitarian situation of the IDPs residing inside settlements is relatively better compared to the situation of those living in unfinished public and private buildings. The majority of the IDP settlements are located in the proximity of border areas and zero point cross-border assistance, hence in relatively safe areas., humanitarian actors are therefore

<sup>80</sup> This represents the official PiN reported in the CCCM annual response plan in addition to the recently identified IDPs (10,381) residing in tented settlements in the southern governorates of Dar'a and Quneitra.

granted a more sustainable and enhanced access enabling the continued assistance IDPs living inside the settlements compared to those who live outside.

The needs of IDPs in settlements vary during the course of the year, due to seasonal climate and weather constraints as well as from geographical constraints from one location to another. However, the response provided and the delivery of services and goods is predominantly affected by physical access of humanitarian aid providers, and of beneficiaries to access services. When access allows, water and sanitation, as well as NFI needs, are the most frequent assistances provided by the NGOs in the IDP settlements.

In southern governorates, the informal self-established settlements are near to bordering towns, located in the proximity of Jordan and the Golan Heights. Due to insecurity caused by armed hostilities, in the informal settlements, larger number of tents were unclustered and repositioned in different scattered locations. Humanitarian response provided to IDPs in informal settlements is not consistent and not of a sustainable nature, due to restricted access, insufficient funding resources and limited response capacity by humanitarian actors.

However, as winter has approached, the common gaps could be summarised by: replacement of tents, provision of heating/ cooking stoves, including fuel and minor graveling and drainage improvement are also considered as major needs. The facilities and infrastructure, mainly toilets and bathrooms, need to be enhanced to meet the specific needs of women, girls and boys and people with specific needs. Providing more regular food assistance in the IDPs settlements remains a constant need. Given that most of the IDP settlements are informal, they lack any sort of management. Therefore, empowerment of IDPs and the establishment of IDP committees in these settlements would have a great added value to maintain the services and ensure the sense of ownership and sustainability of the services inside the settlements.

## 1- Idleb

Idleb hosts the biggest number of IDPs residing in settlements. As of September 2014, Idleb had 92 settlements with 110,918 IDPs<sup>81</sup>, 67% of all IDPs number of IDPs living in settlements. The main reason for the displacement of these IDPs is violence, specifically the clashes between opposition forces and the GoS. Apart from the Atmeh cluster, which is the biggest informal settlement of IDPs 38,000 IDPs, Idleb hosts a larger number of settlements with small clusters of up to 4,000 IDPs.

Except for August, the trends monitoring of the number of IDPs in Idleb settlements show a continuous increase. August witnessed a significant decline in clashes; as a result, the displacement not only declined but also more than 12,000 IDPs have moved from the settlements towards their areas of origin.

## Humanitarian Needs

Owing to better accessibility for humanitarian actors, settlements in Idleb are privileged in receiving services. The humanitarian actors are able to cover main lifesaving needs in the IDP settlements. The best coverage of needs is reported in terms of provision of NFI (87%) and water services (83%) , with the Sarmada cluster being least served in terms of provision of shelter (18%) and NFI (32%) and water services (22%).

The biggest unmet gaps exist in food and shelter needs. Most of the humanitarian actors were not providing regular food assistance in the IDP settlements because in many settlements, food was

<sup>81</sup> CCCM Sector\_September 2014 Database

covered by many non-traditional actors which has recently declined,. The CCCM could not verify the reason for this reduction in assistance however the CCCM members have started taking the measures to cover the existing gaps in food.

With the upcoming winter season, lessons learned from assessments conducted by the CCCM members in September and October indicated the replacement of tents as an urgent need. Heating fuel, blankets, bedding and clothes are further traditionally among the most needed items for winter.

It is reported that solid waste management, health and education are the least served sectors in the informal settlements in Idleb in general. However solid waste-management is sometimes reported under assistance delivered as water services, while health and education are mostly accessed outside of settlements. As in other governorates, although protection needs are not captured, IDPs residing in collective shelter have reported the lack of privacy being one of the main protection concerns.

## 2- Aleppo

According to September 2014 data analysis, after Idleb, Aleppo Governorate is hosting the second biggest number of IDPs in settlements (in Northern Syria), with 49,175 IDPs residing in around 30 informal settlements and collective centers in Jarablus, Azaz and Menbij. Concentrations range from around 400 to 14,500 IDPs per informal settlement and from under 100 to 700 IDPs in collective shelters. IDP population hosted in settlements in Aleppo remained largely stable from July to September, despite a decline in the number of IDPs in Azaz in July/August. With ISIL advancing from the east, the security situation becomes the main concerns in Aleppo settlements . as of late September, Jarablus and Menbij settlements become completely inaccessible.

### Humanitarian Needs

Until mid-September, the settlements in the districts of Jarablus and Azaz, and particularly in the city of Jarablus, were better served than IDP settlements in the district of Menbij. With regard to shelter, water and sanitation, NFI, and health in particular, informal settlements have received higher coverage than collective shelters in Menbij, where coverage has been very scarce in all sectors despite some limited water and sanitation support. As a result of ISIL advance, the humanitarian space has substantially declined in the eastern settlements of Aleppo. As of the end of September, the main NGOs who were providing assistance in Jarablus and Menbij settlements have put their activities on hold.

Compared to Idleb, shelter and NFI needs in Aleppo are better covered. On the whole there are significant gaps in food and health assistance, as well as in education and solid waste disposal. While no specific data is available on protection needs, it has been reported that lack of privacy in collective shelters is a major concern for IDPs, mainly in Azaz district/ Bab Al Salama settlements. IDPs of at least one settlement in Jarablus are reported to be evacuated by ISIL. ISIL has also requested the IDP occupying the public building buildings to evacuate them during October. With the control of ISIL, women have limited capacity to move and concerns over child recruitment is growing.

## 1- Lattakia

According to the RAS, Lattakia continues to be one of the governorates receiving the highest number of IDPs because of its relative safety and the availability of services. Accurate figures of number of IDPs residing in Lattakia have been difficult to obtain and the most recent estimates (as of June 2014) range between 300,000 IDPs, as reported by OCHA (OCHA 2014/08/06) and up to one million. The majority of IDPs are said to reside in Lattakia City, in six collective shelters, of which Sport City is

considered the biggest, besides the large number already living in rented accommodation and touristic facilities. Latakia Governorate hosts from 200 to over 870 IDPs in each of the six informal settlements located in the sub-district of Rabe'e'a. This population of 2,249 IDPs in these settlements appears to have remained stable from July to September 2014, with no reports of new arrivals during that period.

## Humanitarian Needs

Access to the locations for most sectors does not appear to have been a major constraint, all settlements reportedly receiving 100% coverage in terms of water and sanitation and NFIs and 83% coverage for shelter. There remain clear gaps, however. Only two settlements had benefitted from food assistance and none had received support for health or education, mainly because health and education require longer term planning that is not possible with the existing level of access.

### 1- Deir-ez-Zor

There are currently three collective shelters in the governorate of Deir-ez-Zor around Sa'lo hosting 210 to 570 IDPs. The total number of 1,050 IDPs living in formal settlements/collective shelters remained stable from July to September 2014. These numbers add to the MSNA primary data results, which counted 394,500 IDPs in the governorate, most of whom are located in Deir-ez-Zor city, Abu Kamal and Hajin sub-districts. The majority of IDPs live in rented accommodation (45%) and with host families (30%). IDPs with adequate resources expressed that their preferred destination is Turkey, others indicated they would probably move toward the desert, where there are towns far from targeted attacks and aerial shelling.

MSNA primary data indicates a total of 59,300 people living in collective shelters in Deir-ez-Zor, primarily in the city of Deir-ez-Zor and in Sur sub-district. 14,950 people are residing in structured and organized informal settlements in the Kisreh sub-district. In the Kisreh, water shortage was reported. Water pollution was also observed whenever water was available, resulting in a high prevalence of waterborne diseases such as diarrhoea.

## Humanitarian Needs

Water needs were reported to be fully covered in the location monitored by the CCCM sector. There was no report of any other form of assistance reaching the IDPs in these collective centres assessed by CCCM.

### 1- Ar-Raqqa

Although there were no IDPs reported to be in formal settlements in Ar-Raqqa in August 2014, data collected in September shows around 426 IDPs located in three collective shelters – schools mainly - in the sub-district of Mansura. The majority reportedly came from Aleppo and were displaced by clashes. As of September 2014, there was no information on services provided in the collective shelters or on the percentage of needs covered. In MSNA field research, it was reported that 500 people were living in one organised camp in Mansura sub-district, 11,700 people in informal settlements and 31,500 in collective shelters.

### 1- Dar'a

There are four informal tented settlements in Da'ra Governorate as of August 2014, with an estimated number of 5,291 IDPs. The majority of the accommodation locations hosting IDPs includes mainly tents (50%), followed by makeshift shelter installations (25%), when tents are not available, and public buildings and schools (25%).



Fourty-four percent of the IDPs are estimated to be children under age of 18 years, of which 57% are girls. IDPs, due to insufficient accommodation space, are in the necessity of sharing accommodation, especially tents and some in basic make-shift shelters with non-household members. Moreover, presence of unaccompanied, pregnant women with special needs and people with disability were indicated in those informal tented settlements.

IDPs residing in those settlements are highly mobile during the day and tend to use the settlements as mainly overnight and transit sites. In fact, some of those locations have been targeted by aerial bombardment in the recent months in clear violation of International Humanitarian Law.

## Humanitarian Needs

Humanitarian assistance was provided to the three most populated informal tented settlements, no specific services provisions are made for tented settlement, however services are provided as part of regular response activities in the town when there is response. There is a clear evidence of an inadequate and not sustained humanitarian response provided in those informal tented settlements.

### 1- Quneitra

There are five informal tented settlements in Quneitra Governorate as of August 2014. An estimated 1,090 IDPs are living in four informal tented settlements, and 4,000 IDPs are living in makeshift shelters in Quneitra Governorate. 63% of the IDPs are estimated to be children under the age of 18 years of which 60% are girls.

IDPs due to insufficient accommodation space, are in the necessity of sharing accommodation, especially tents and some in basic make-shift shelters with non-household members. Furthermore, presence of unaccompanied, pregnant women with special needs and people with disability were indicated in those informal tented settlements.

## Humanitarian Needs

Humanitarian assistance was provided to the four most populated informal tented settlements, no specific services provisions are made for tented settlement, however services are provided as part of regular response activities in the town by cross border actors when feasible. There is a clear evidence of an inadequate and not sustained humanitarian response provided in those informal tented settlements, also due to increased insecurity.

### Information Gaps:

While the data on numbers and delivered services in informal settlements in the northern governments are updated on regular basis, there is massive lack of information on the IDPs living in other types of settlements, i.e. collective shelters and sporadic/spontaneous camps. That said, gender disaggregated data in the settlement need to be improved, there are very nominal information on protection activities in the IDP settlements.

There is sufficient data on the services delivered inside the settlements, i.e. food, WASH, NFI and Shelter, it is however, difficult to access accurate information on education and shelter because these services are rarely provided inside the settlement but rather IDPs are accessing them outside of the settlements.



## Early Recovery and Livelihoods Sector

Since March 2011, Syria has been witnessing a protracted conflict that has directly resulted in losses of human lives, significant displacement and migration, weakened social services, destruction of basic social infrastructure and significant loss of livelihoods, destruction of homes and property, and the deterioration of the rule of law and security. The Syrian Centre for Policy Research in partnership with UNDP and UNRWA has published the “Squandering Humanity” report, a socio-economic study assessing the impact of the crisis until end of 2013. Economic and social consequences of the war were depicted as follows<sup>82</sup>:

### Economic Impact of the crisis

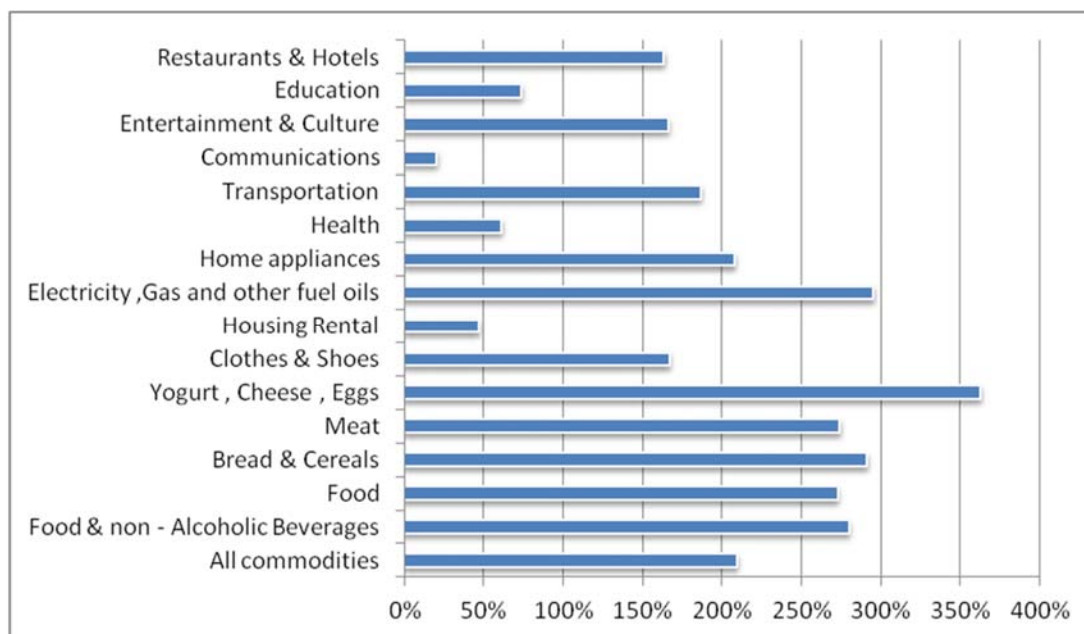
By the end of 2013, total **economic loss** since the start of the conflict was estimated at **USD 143.8 billion**, which is equivalent to **276 percent of the GDP of 2010** in constant prices. **Damaged capital stock of USD 64.81 billion** accounted for 45 percent of this loss. **GDP contracted by 37.8 percent** in 2013-Q4 compared to 2012-Q4, with the total volume of **GDP loss estimated at USD 70.88 billion**, of which USD 16.48 billion was generated in the last half of 2013. The structure of GDP changed dramatically during the conflict, with agriculture and government services together accounting for 50 percent of total GDP in 2013, with each becoming a growing share of a shrinking productive base.

**Contraction in private investment** continued regressing by **16.9 percent** in 2013-Q4, while **public investment shrank by 39.8 percent** in the second half of 2013. **Public debt** continued to grow in the second half of 2013 reaching **126 percent of GDP** as the government imported oil and basic commodities to alleviate shortages in the local market and to subsidise basic goods. While still largely drawn from domestic debt, a mounting portion of the public debt is composed of foreign borrowing, mainly from Iran.

**Private consumption**, which represents a direct measure of household welfare, contracted by **25.5 percent** in 2013-Q4 while the Consumer Price Index indicated that **prices to consumers had risen by 178 percent since the start of the conflict**; with the cost of basic commodities such as yoghurt, cheese and eggs increased up to 360 percent, general food items up by 275 percent, while heating and cooking costs were up by 300 percent. Thus, runaway price inflation is squeezing the household budgets of an increasingly jobless, poor and desperate population. Moreover, prices for the same goods differ substantially between areas and regions, with prices in conflict zones usually higher than elsewhere due to scarcity of basic commodities as a result of the security situation, limitation on transportation and lack of access due to blockades. Additionally, conflict-driven black market and illegal criminal networks benefited from smuggling, looting, theft, and monopolizing of the basic goods and services, creating an interest among such groups in the continuation of the conflict.

<sup>82</sup> SCPR [http://scpr-syria.org/att/SCPR\\_Squandering\\_Humanity\\_En.pdf](http://scpr-syria.org/att/SCPR_Squandering_Humanity_En.pdf)

## Percentage increase of CPI in main categories (March 2011 to August 2013)



Source: Central Bureau of Statistics and SCPR Impact of the Crisis Report calculations

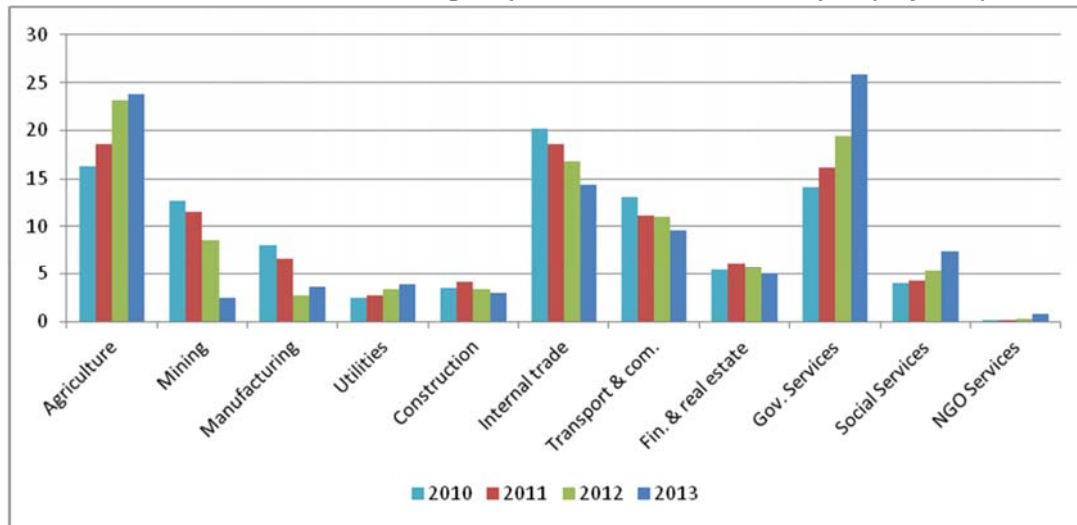
As indicated above, the cost of vital services has also increased with education and health costs up by 74 percent and 61 percent, respectively. Although this increasing financial burden has fallen on all sectors of Syrian society, it has weighed most heavily on poor households where food constitutes an increasingly important component of their consumption basket. Such poor households are a burgeoning share of the population, with poor people ballooning from half the population in the first half of 2013 to three-quarters of the population at the end of the period. Thus, price inflation and the collapse in households' sources of income shifted people's consumption patterns towards the very basic goods and services, often of quite low quality.

A study conducted by ESCWA<sup>83</sup> illustrates the inflation rate reaching up to 90 percent, with a major decline in export (95 percent) and import (93 percent) activities compared to 2010.

- In the midst of such economic decline, public consumption is vital to prevent total collapse of economic demand. There was a shallow decline in public consumption which fell by 16.2 percent in 2013-Q3 and by just 0.3 percent in 2013-Q4. It is crucial to maintain subsidies on the basic commodities that have become increasingly essential as households became poorer. However, it was clearly observed that public resources allocations shifted from major focus on development components to conflict-related purposes.

<sup>83</sup> ESCWA report produced in September 2014 covering the Impact of the Crisis until end of 2013

Productive Sectors' share of GDP during the period 2010-2013 – SCPR report (May 2014)



Source: SCPR estimations (May 2014)

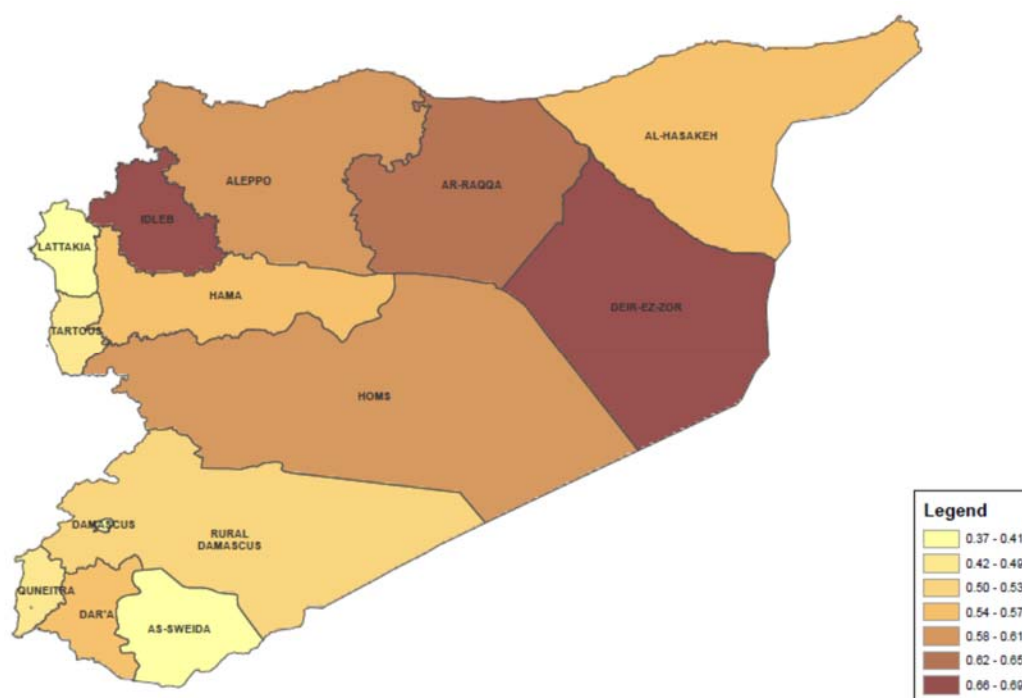
The above chart highlights that by 2013 public/government services (public employment) became a major contributor to the economic sector, accounting for 26 percent of GDP. This was followed by the agriculture sector at 24 percent and internal trade and transport and communication at 14 percent and 10 percent, respectively. The increasing contribution of public/government services reflects the hefty intervention by the state to maintain key services, logistics, and public sector employment, including military expenditure. The agriculture share of GDP has relatively grown throughout the conflict with much lower value than in the past. Moreover, the huge humanitarian burden increased the share of the social services and NGO portion of the economy; although this has not been sufficient to meet the massive requirement for humanitarian support required as millions of people were displaced, lost their jobs and became poor.

## Social Impact of the crisis

The crisis in Syria continues to exacerbate the poverty levels that are deepening throughout the country as a result of rising prices for goods and services, job loss and growing unemployment, damages to the productive sectors and infrastructure, swelling numbers of IDPs who lost their properties and assets combined with a stinging economic recession.

- By the end of 2013, Syria has become a country of poor people afflicted by a ruinous descent into poverty, whereby **three in every four Syrians (75 percent) lived in poverty at the end of 2013** with more than **half the population (54.3 percent) living in extreme poverty**. Those are barely able to secure the most basic food and non-food items required for the survival of their households and are mainly living in conflict-areas. The population of Idlib was most affected by extreme poverty, with 69 percent of the households struggling to meet their basic food and non-food items to survive. This was followed by Deir Ezzor where 65 percent of households lived in extreme poverty. Similarly, most of the population of al-Raqqa, Aleppo and Homs lived in extreme poverty. Some 20 percent of the population survive in abject poverty where they scarcely have the means to meet their basic food needs, with the abject poor in conflict zones and besieged areas facing hunger, malnutrition and starvation.

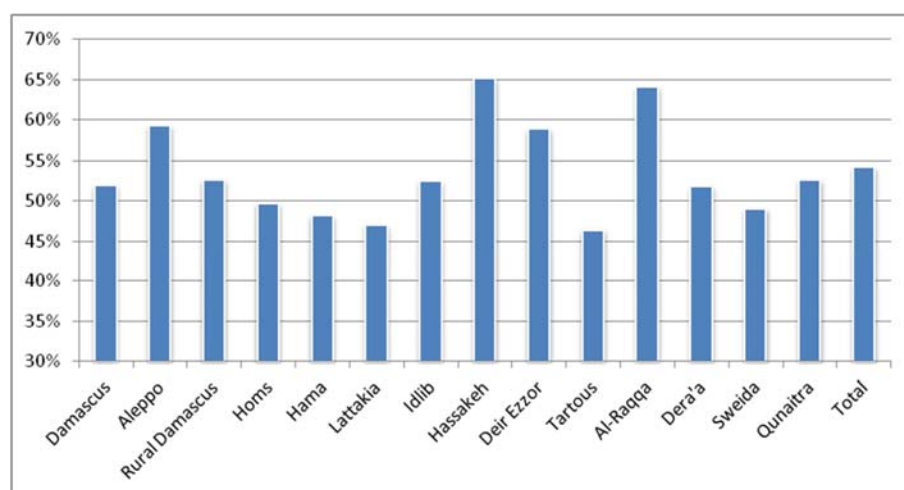
Extreme poverty incidence in Syria by governorate (2013) – SCPR 2014



- Syria is blighted by joblessness and overwhelmed by unemployment with 54.3 percent of the labour force, or 3.39 million unemployed persons by end of 2013. Some 2.67 million of these people lost their jobs during the conflict, with their loss of income impacting on the welfare 11.03 million dependents. The dwindling formal labour market has forced many to participate in informal economic activities including tiny workshops and street-market micro-entrepreneurship. Moreover, many economic activities have moved from the conflict zones into other safer regions. This is changing the economic and demographic structure of these regions. In order to adapt to the crisis, the majority of entrepreneurs has turned towards unskilled and labour-intensive activities with low payment, which will diminish the accumulation of human capital and de-skill the labour force. Unemployment rates were mainly portrayed in Hassakeh, Ar-Raqqa, Deir Ezzor and Aleppo given the massive destruction and damages to productive infrastructure, high incidence of insecurity and conflict paving the way to rather illegal businesses in cross-border actions.



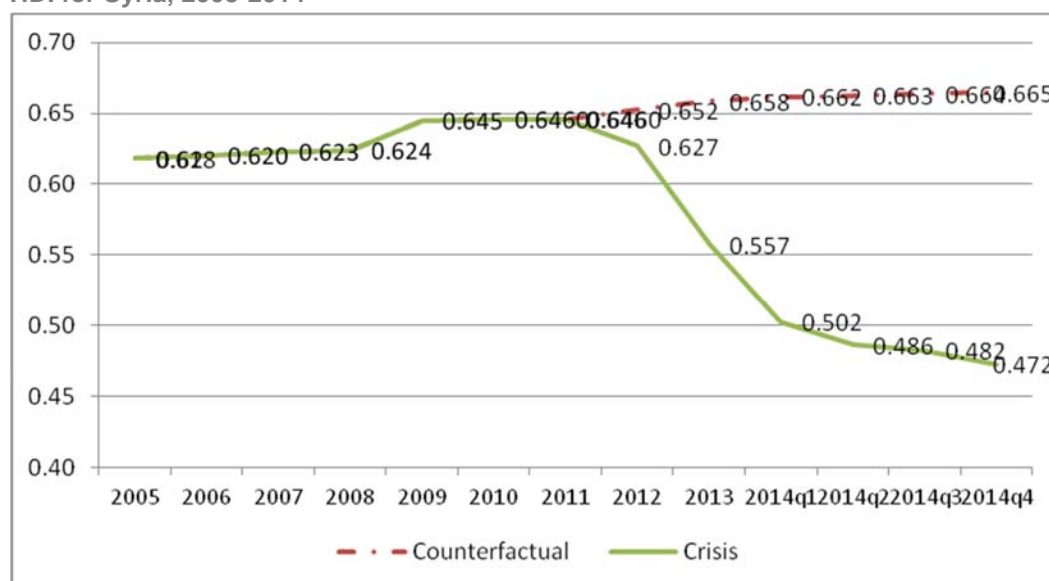
Unemployment rate by governorates by the end of 2013



Source: SCPR analysis

- Syrian human development regressed by more than four decades during the conflict. With a Human Development Index measure of 0.472, Syria has fallen from the “medium human development” cluster of nations into the “low human development” group, largely as a result of weakening performance in education, health and income.

HDI for Syria, 2005-2014



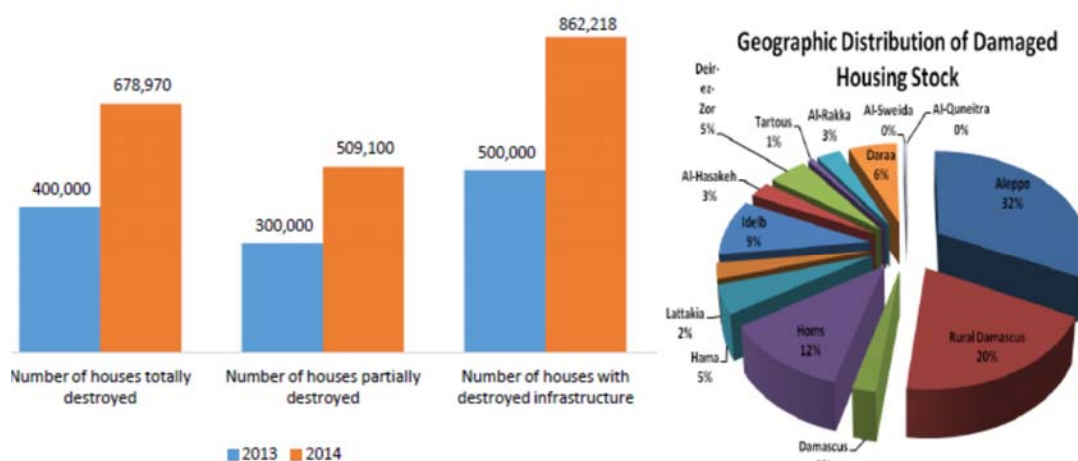
Sources: HDR 2011 and SCPR estimations (for HDI of 2012 – 2014)

- Home and Properties have suffered catastrophic damage and destruction to hundreds of thousands of homes, farms and commercial properties that are no longer habitable or operational. As per the ESCWA report on the impact of the crisis, **more than two million houses have been damaged during the crisis until end of 2013.**

## Housing

**2,062,218**

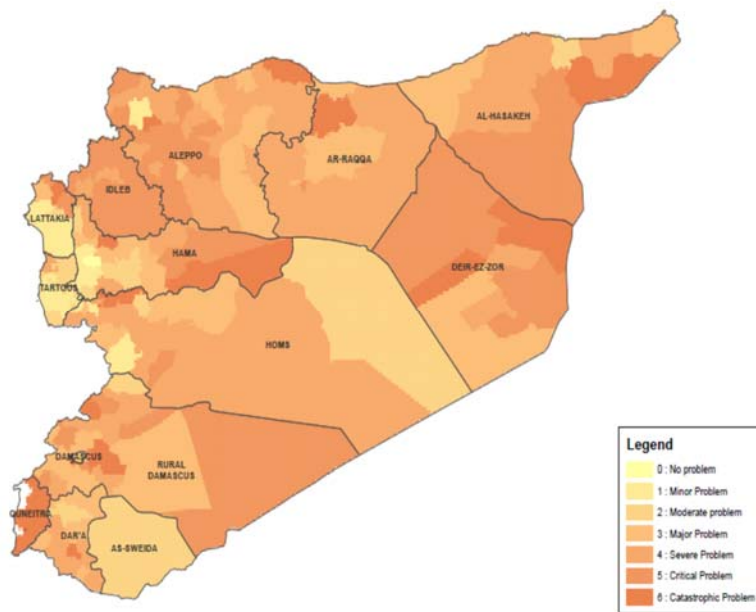
Number of damaged houses during the crisis



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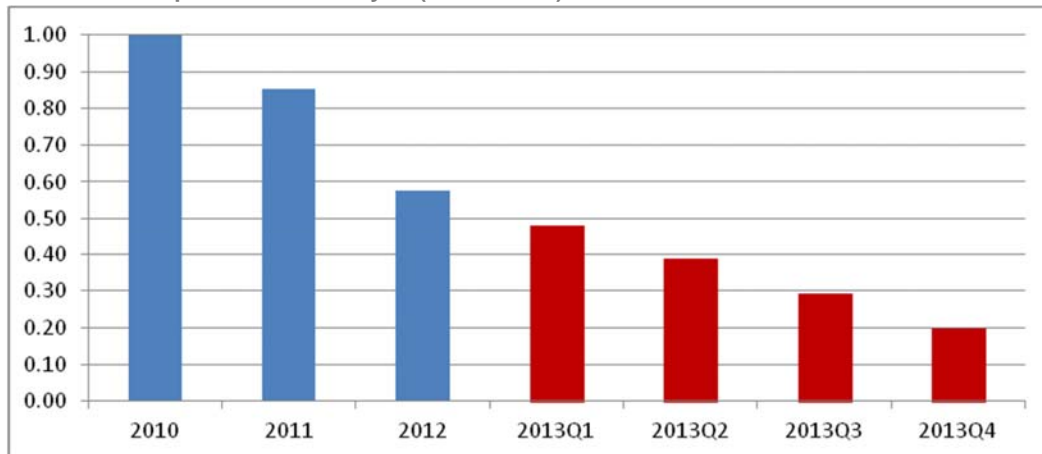
The manufacturing sector was a driver of the Syrian economy through its complex linkages with the agriculture, internal trade, transportation and finance sectors employing a large number of people in large production sectors and creating many jobs opportunities in small and medium enterprises. The sector has been severely affected by the crisis, particularly damaged in regions such as Aleppo, Rural Damascus, and Homs where many firms were concentrated, as these areas suffered from the most intensified battles and destruction during the crisis. During 2013-Q3, private firms continued to face substantial damage, with more than 90 per cent of industrial enterprises closed in the Alsheek Najjar industrial zone in Aleppo, 40 per cent were closed in Adraa industrial zone in Rural Damascus, 20 per cent were closed Hessia industrial zone in Homs, while all industrial enterprises were closed in the Deir Ezzor industrial zone. Even where they were still able to operate, it is estimated that surviving industrial firms are operating at less than 30 percent capacity. Although a number of firms have relocated activities to more secure regions, such as Tartous, Latakia or Damascus city, the SMEs and productive sector is still suffering from a major regression. Others have exported capital and operations outside the country, while others have reduced wages to continue operations.



- **Solid waste management systems are overstrained** with the high influx of IDPs, destruction and/or damages of basic infrastructure including sewage systems, secondary networks and cesspits. Equipment and heavy machinery normally used for solid waste management have been either looted or destroyed or are not functioning due to the need for new spare parts and maintenance, leading to large amounts of garbage piling up in the streets deteriorating the health and environmental situation and further exacerbating difficult living conditions for the affected population.
- As indicated in the SCPR report, *Squandering Humanity*, the majority of Syrians faced a disastrous decline in their standards of living due to the destruction of the economic infrastructure, strained social support systems and the growth of international sanctions. As the economy has floundered, all parties to the conflict have sought to exploit the remaining economic resources to serve their own purposes. This has resulted in the emergence of widespread illegal and violence-related activities that have diverted resources from productive to destructive activities.

Deterioration of rule of law and security, in areas where the institutional performance has deteriorated by 80 percent against its 2010 level (as per the “Institution Composite Index – World Bank) has resulted in a lack of voice and accountability, political stability, effectiveness and rule of law. In some governorates like Raqqa and Deir Ezzor, parts of Aleppo, governance structures are experiencing a paramount shift from public/civil management to application of Islamic law and Shari’a. This indicates that within any future recovery and development context, institutional reform in Syria will require significant attention to participation and accountability, political stabilization and ending violence and intimidation, investment in governance for effectiveness, modernizing and improving regulatory effectiveness, and full application of the rule of law to all areas of Syria.

Institution composite index for Syria (2010 – 2013)



Source: Worldwide Governance Indicators, World Bank, 2013, and SCPR estimations

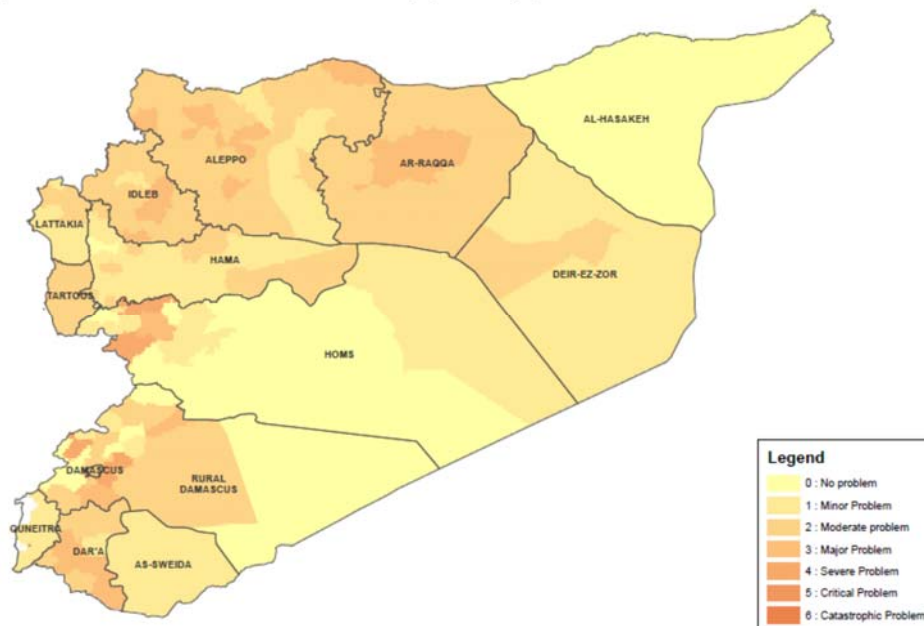
### Socio-economic conditions of Palestine refugees

- Out of approximately 560,000 Palestine refugees registered in Syria, over 280,000 (50 percent) are internally displaced. A further 70,000 have left the country altogether, primarily to Lebanon, Jordan, Egypt and European countries. In 2014, 462,000 Palestine refugees in Syria were dependent on UNRWA to meet their minimum humanitarian needs.
- Palestine refugees have been severely and disproportionately affected by the conflict. The location of Palestinian camps and gatherings on urban peripheries throughout Syria, particularly Damascus, Aleppo and Dera'a, have produced massive levels of displacement among this community, as residential areas became active frontlines in 2013 and 2014. Prior to the conflict, Palestine refugees experienced significantly high levels of poverty and unemployment which was further exacerbated by the conflict and ultimately affecting their resilience and coping mechanisms. Throughout 2014, both Jordan and Lebanon blocked all entry of Palestine refugees from Syria, leaving this already vulnerable population with nowhere to flee. Tens of thousands of Palestine refugees continue to live in areas of active conflict, such as Yarmouk, Khan Eshieh and Qudsaya in Damascus Governorate; Dera'a Camp and the surrounding villages in Dera'a Governorate; and Neirab Camp / Eastern Aleppo City in Aleppo Governorate. These communities live in state of profound vulnerability, with civilian communities frequently overwhelmed by armed engagements and exposed to life-threatening levels of deprivation.
- UNRWA retains access to the vast majority of Palestine refugees in Syria through its network of 4,000 national staff in Damascus, Aleppo, Dera'a, Homs, Hama and Latakia. The agency has established the capacity to distribute a broad spectrum of humanitarian assistance across Syria with extreme rapidity, efficiency and operational rigour. However, in an environment of acutely constrained resources, the wellbeing of Palestine refugees in Syria remains at severe risk and, without consistent funding, may decline significantly throughout 2015.

### Vulnerable groups including Youths, Women, Elderly and Persons with Disability

Four years into the crisis, vulnerability increased at higher rates due to deterioration of many socio-economic factors including loss of lives, sudden incidence of disability, deterioration of normal living conditions including disruption of social and rehabilitation services. The number of people with

disabilities is increasing, mainly in areas witnessing severe conflict. Rehabilitation services are scarce and lack specialization particularly for amputation and severe disability situations. Major disability problems are observed in Raqqa, Aleppo, Hama, Homs, Deir Ezzor and Rural Damascus. .



### Methodology and overall assessment of humanitarian needs for the ER&L

The Early Recovery and Livelihoods sector engaged with more than 150 key informants, experts and local community members in all affected areas to assess the socio-economic situation of affected Syrian governorates and feed into the humanitarian needs overview. This was done at governorates level in a participatory and consultative manner. Moreover, the SCPR report on the impact of the crisis in Syria is considered the main source of reference for the overall analysis of humanitarian needs. The report is based on macro-economic simulations based on statistical data collected in 2010 and projected for 2013 and 2014.

### Early recovery and livelihoods sector achievements

The ER&L sector in Syria is mainly focusing on enhancing resilience in communities, with an aim to restore and stabilize livelihoods and facilitate income generation to avoid further destitution, marginalisation and dependence on aid. Special focus is placed on vulnerable groups such as IDPs, youth, women-headed households and people with disabilities. In 2014, the sector members succeeded in establishing labour intensive emergency employment schemes for repairing basic community infrastructure and improving service delivery (such as cash-for-work schemes to collect solid waste and remove debris and rehabilitate schools in Palestinian camps), as well as provision of emergency support for the restoration and stabilisation of disrupted livelihoods (ex. start-up grants, assets replacement and targeted vocational training, micro-financing). The ER&L sector promotes social cohesion and reconciliation through community-based socio-economic recovery activities engaging with local actors promoting for community participation and representation in the early recovery efforts. Moreover, the sector succeeded to strengthen the capacities of some local workshops and productive facilities to produce and manufacture much needed humanitarian assistance items ensuring that employment and procurement are locally driven. Finally, the sector



finalized a large scale NGO assessment exercise for all active partners in the target governorates and conducted series of capacity development training sessions. Specialized and advanced training will continue to take place in 2015.

The Early recovery and Livelihoods sector has established two technical working groups, one for NGOs/CBOs capacity development and another for Damage and Livelihoods Assessments. The main objective is to bring together the efforts of all UN agencies and humanitarian actors for better delivery of humanitarian assistance and strengthen the capacities of local partners. The technical working group on Damage and Livelihoods Assessment will provide in-depth analysis of the needs and priorities of the affected communities for better response planning, prioritization and resource mobilization.

### ER&L Strategy to address Needs & Priorities

There is increasing recognition amongst concerned governments and the international community that the crisis is compromising development gains and that stability of particular areas in Syria is at risk, as social tensions continue to increase, as evidenced by declining human development and growth trends, and increasing levels of vulnerabilities. Host and vulnerable communities in Syria are stretching their already scarce socio-economic resources to respond to the influx of IDPs brought on by the crisis. There is also a growing acknowledgment that current life-saving humanitarian funding and programming are neither sufficient nor sustainable, and that a more “development-oriented” approach is necessary to build resilience and reduce the need for humanitarian assistance over time. In fact, while acknowledging that humanitarian and development assistance are not mutually exclusive, a robust and coordinated early recovery and livelihoods response that complements humanitarian efforts and fosters resilience has become essential. A resilience-based development approach is an all-encompassing concept that frames a comprehensive, coordinated and sustainable response to the growing and complex humanitarian and development challenges in Syria. The resilience-based approach is grounded in the UN's core principles and universal values such as equity, participation and human rights and takes into account protection and conflict sensitive elements.

The approach is designed to ensure that 1) basic resources, infrastructures, especially the housing sector and services and productive sectors can cope with the pressures from increased demands and/or damages, 2) households are supported and protected against becoming further impoverished, and 3) declining economic performance and deteriorating social cohesion indicators are stabilized.

Support to livelihoods strengthens resilience of the affected population, induces positive coping mechanisms, prevents further destitution and impoverishment, anchors Syrians to their homelands (security permitting) and preserves the dignity of people.

As such, and given the nature of this protracted conflict, there is an increased recognition among humanitarian actors and the international community that **Early Recovery and resilience interventions will create an enabling environment for the delivery of humanitarian relief, reduce reliance on aid, and enhance the resilience of affected communities.** More attention should be given to strengthen the resilience and positive coping mechanisms of affected communities:

**A. Restoration of livelihoods to stimulate local recovery will be achieved through:**

1. Market rehabilitation and support to micro, small and medium enterprises/businesses through assets replacement, vocational training, small grants, and labour intensive rehabilitation schemes among other activities;
2. Provision of business “development/recovery” services based on emerging trends of productive sectors in the target communities;
3. Provision of direct support to farming and agricultural activities (backyard and roof-top gardening, livestock, industrial and productive manufacturing activities (clothes production, manufacturing of garbage bins and other locally needed items).

**B. Rehabilitation of basic and social services in affected communities including shelter, host communities and conflict-affected areas will be achieved through:**

1. Restoration of and support to local service delivery activities, including solid waste and debris management, relying on innovative localized solutions inducing income generating activities (recycling and re-using solid waste, including rubble and debris, to generate income and stimulate productive livelihoods activities)
2. Labor intensive rehabilitation of damaged infrastructure in relatively stable areas, areas of returns and host communities, including repairs of primary health care centres, schools, rehabilitation of irrigation networks and other services supporting productive livelihoods sectors.

**C. Capacity development of the ER&L partners, mainly national NGOs and local actors, and re-orienting their local initiatives towards livelihoods, resilience and early recovery type activities.****D. Rehabilitation programmes for persons with disabilities, youths and women-headed households****E. Advocacy and mainstreaming resilience-based planning into other sectors;** including developing the capacities of international and national actors and promoting the substitution of humanitarian assistance through local production and procurement solutions.**Challenges:**

- Funding for the ER&L initiatives as donors’ attention is focused towards conventional humanitarian assistance (food distribution and NFIs)
- Only a limited number of local NGOs is capable of implementing ER&L initiatives. NGOs accredited by MoFA are overwhelmed with high demands and their limited absorption capacity.
- Operating in an insecure environment while planning for ER&L interventions. Innovation and localized solutions are raised at the lowest administrative levels.

**Main actions and considerations to improve the ER&L emergency response in the 2015 Response Plan**

- Participation and representation of local level actors and their active engagement in community-based/local area response planning and implementation processes;
- Strengthening the capacity development element in ER&L programming for partner NGOs and local actors;
- Providing “emergency support” to local markets to reduce risks of further economic deterioration;
- Resorting to labour intensive rehabilitation activities and focusing on the emergency employment angle in other sectors’ response plans to avoid further destitution of communities.

Early recovery and Resilience programming as an integral component of humanitarian response.

## Education

This overview of the critical education needs in Syria aims at reviewing and addressing key education responses priorities to enhance delivery of education services to the most vulnerable children and adolescents throughout Syria including cross-border, cross-line and hard to reach areas outlined in the UN Security Council Resolutions S/RES/2139 (2014) and S/RES/2165 (2014) and in the No Lost Generation initiative.

### **1. Key humanitarian issues** (e.g. what are the acute challenges to the lives and livelihoods of the affected population faces and how these are likely to change in coming months)

Prior to the onset of the crisis, Syria had reached near universal enrolment rates. At the primary school level, 100% of male and 98% of female students were enrolled. At the secondary school level, 67% of both male and female students were enrolled<sup>84</sup>. An estimated 5.5 million children attended primary and secondary education according to the Central Bureau of Statistics in 2010/2011.

The national Gross Enrolment Rate (GER) of Syrian children in preschool and basic education levels was 104%, one of the highest GER in the region. However, GER significantly decreased to 66% in 2012/13 due to the conflict and internal displacement countrywide. This indicates that the prolonged crisis has been adversely impacting the Syrian education development of the last, at least, 35 years compared to GER in 1980 that was 95%.

Literacy rates were over 90% and Syria was spending almost 5% of its annual Gross Domestic Product (GDP) on national learning<sup>85</sup>.

Protracted conflict has weakened the capacity of the education system to address the critical education needs of the affected children and adolescents<sup>86</sup> in Syria. Prolonged crisis has deprived children of their fundamental rights to access basic services including education. Between 2.1 to 2.4 million children are now estimated to be either out of school or attending class irregularly<sup>87</sup>, with limited learning supplies and poor facilities such as clean water and electricity due to internal displacement, armed attacks and damages to learning facilities. Children, teachers and parents have been experiencing the long term psychosocial impact of the crisis.

The Syria Multi Sector Needs Assessment (MSNA) has found that children are perceived to be one of the most vulnerable groups across all sectors, with children under the age of 5 and children aged 5-12 years having been identified as the first and third most vulnerable in-need groups respectively. Access to education has been compromised because of mobility restrictions brought about by acute insecurity and the destruction and/or appropriation of public infrastructure, including education facilities.

The Damascus-based Education Sector, co-led by the Ministry of Education (MoE) and UNICEF and the Turkey-based education working group have analyzed key education issues through the ongoing national education sector analysis and the MSNA.

<sup>84</sup> UNESCO. EFA Global Monitoring Report. Rep. Paris. 2014; UNESCO (2011) World Data on Education: Syrian Arab Republic, VII ed., 2010/2011. Montreal: International Bureau of Education, UNESCO Institute for Statistics

<sup>85</sup> Al-iqtisadi 2014/03/19, UNICEF 2014/01/07, Washington Post 2014/03/11, Al-Akhar 2014/03/27, UNICEF 2014/03/11, CBS 2010)

<sup>86</sup> By UN definition, adolescents are persons from 10 – 19 years. In Syria, adolescent boys and girls represent around 25 % of the population, with a cohort of young people (10-24 years) constituting around 28% (Syrian National Bureau of Statistics, 2013). Proper assessments and statistics are lacking; however, these are the most recent figures made available by the Syrian National Bureau of Statistics in 2013. It is very likely these are not the same figures as of October 2014, due to displacement and people fleeing the country.

<sup>87</sup> The 4.5 mil estimated People in Need (PIN), include both children in and out of school.

## 2. Impact of the crisis

### Access to Education

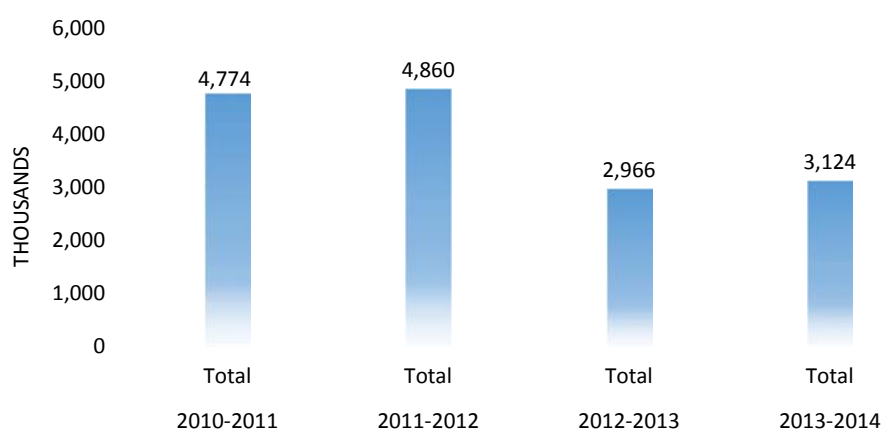
The appropriation of schools as command and control centres for military purposes by parties to the conflict, as well as makeshift shelters used to house internally displaced populations, is widespread and suggests that access to education as a right and a public service is marginal and immediate humanitarian and/or military needs take precedence<sup>88</sup>. The security risks inherent to the commute to and from school, especially in areas experiencing frequent fighting, are seen as significant with children risking injury from bombing, crossfire, as well as targeted attacks, abductions and *ad hoc* violence. Security concerns aside, scarce economic resources and pervasive difficulties in meeting basic needs are exerting pressure on households to pull children out of education and send them to generate or supplement incomes.

Residents of areas controlled by opposition groups said these groups have aggressively targeted children and youth for recruitment and have systematically entered schools in order to reach out to them. Extremist Islamist groups are conducting "free schooling" campaigns in schools and educational environments in order to recruit children and youth. According to the Institute for the Study of War, the ISIS educational programme is devoted to training the next generation of ISIS members<sup>89</sup>.

### Enrolment and Attendance

Despite the ongoing crisis, more than four million children are enrolled at grades 1-12 in the school year 2013-14, according to the available EMIS (Education Management Information System) data. However, **Syria has lost a significant number of pupils and students from the education system within the last two years.** The number of students in basic education schools decreased from 4.9 million in 2011-12 to about 3.1 million in 2013-14, a loss of 1.8 million or a 38% decrease in enrolment.

Enrolment of Basic Education (Grade 1 -9)  
between 2010-2011 and 2013-2014



Source: MoE EMIS

<sup>88</sup> S/2014/31 Report of the Secretary-General on children and armed conflict in the Syrian Arab Republic, 27 January 2014.

<sup>89</sup> Human Rights Watch and Selected testimonies from victims of the Syrian conflict, Institute for the Study of War, ISIS Governance in Syria, July 2014.

The quantitative data analysis reveals that there has been significant variation in the changes in enrolment at various levels of education and across governorates (see Annex 1). This implies that the ongoing conflict, coupled with internal displacement, gives rise to **geographical disparity in access to basic education** throughout the country. In areas experiencing frequent fighting, children aged 6 to 14 years old rarely go to school. For instance in May, UNRWA reported that 68% of students in Yarmouk Palestinian refugee camp in Rural Damascus are no longer attending school<sup>90</sup>.

The governorates most affected with a sharp drop of school enrolment from 2010/2011 to 2013/2014 are Aleppo and Dara'a: Aleppo experienced a decrease by 57%, Dara'a a decrease by 52%. In addition to this, Quneitra has lost 4 out of 10 children and in Rural Damascus and Homs around 3 out of 10 children are not going to school anymore. A severity ranking of the Education Sector also indicates that major and critical education needs are identified across 39 districts out of 61 in affected governorates including the above mentioned locations.

In Aleppo governorate, there was a decline of about 637,000 in the number of registered students in two years, which makes Aleppo the most affected area in terms of severe difficulties in providing basic education to children in Syria.

The above criticalities are in line with what the Syria MSNA suggests: the vast majority of school-aged children residing in contested areas or in areas which have experienced intense armed conflict do not attend primary or secondary learning facilities on a regular basis. In Aleppo governorate, for instance, only 0-25% of boys aged 6-14 were attending primary school across nearly half (49%) of all assessed areas<sup>91</sup>.

According to the MSNA, attendance of students in secondary schools is lower if compared to primary schools: this can potentially be attributed to child protection problems associated with child labour and recruitment into armed groups which become more acute with age.

When it comes to Higher Education, the MSNA findings report that the crisis has had less impact than on primary and secondary education, as many universities were located in safer areas of the country<sup>92</sup>. Despite this, from an estimated 380,000 students eligible to attend university, 204,000 students are currently enrolled while 178,000 are unable to attend university. Insecurity has limited the access of students and professors and academics workers to universities.

## Curriculum, Accreditation and Certification

In terms of curriculum, certification and accreditation in Syria, interviews reveal that what is taught and what access Syrian children have to education, differ from place to place, depending on who controls the area. In areas that remain under control of the government, the MoE continues to deliver public education services. In these areas, most of the schools remain open, the Syrian national curriculum is followed, and official exams take place. In areas that are under the control of non-state actors, education services often continue, using the Syrian official curriculum, but with subjects such as national education and history removed as they are considered to reflect the views of the present government. In some of these areas the Syrian curriculum revised by the Syrian Opposition Coalition (SOC) in Turkey is also in use. The SOC conducted grade nine and twelve examinations during the

90 UNRWA, Syrian Center for Policy Research and UNDP, "Squandering Humanity – Socioeconomic Monitoring Report on Syria, combined third and fourth quarter (July-December 2013), May 2014, page 38.

91 Data collection for the Syria MSNA was conducted during the month of August when most schools were closed for the summer break; nevertheless, findings reflect the state of education overall, regardless of the summer period.

92 SNAP: Regional Analysis Syria – Part I: Syria – 03 July 2014, e SCPR Squandering Humanity: A new UN economic report on Syria, 2014



academic years 2012/2013 and 2013/2014 in these areas and provided certificates for students successfully completing this examination<sup>93</sup>. In areas controlled by opposition groups there is no government recognition of any certificate issued making progression difficult for Syrian children. Alternative delivery mechanisms such as virtual learning is a distinct possibility to consider.

At the beginning of the school year in Iraq and Syria, ISIL introduced radical changes to reform the educational system in schools and universities in the areas under its control. Music, art, history and geography classes were cancelled in the primary and secondary schools, while philosophy, sociology and psychology were banned from higher education. ISIL preserved physics, chemistry, mathematics, English and Arabic languages but removed some sections. Teachers are greatly concerned but they have to obey to the new regulations otherwise sanctions could apply to them and to their families as well<sup>94</sup>.

## Gender

When it comes to education access for girls, the EMIS preliminary analysis of the Gender Parity Index (GPI)<sup>95</sup> for all level shows that, although geographical gender disparity exists, there has been a slight increase in enrolment of girls since the onset of the conflict at all education levels. Gender equality is central to the education response in accelerating education opportunities for boys and girls. The MSNA reports that Ar-Raqqa exhibits the highest disparities in attendance rates between boys and girls and this appears to be attributable to the restrictions imposed on female engagement in the public sphere by the third party armed group governing the area.

Adolescent girls are prone to early marriage in the absence of education. For girls, insecurity is often a key reason for leaving education, while the prospect of early marriage looms as a solution to their families' economic and security concerns, and as a way of 'protecting' them from the risk of abuse<sup>96</sup>. Reports from neighboring countries and from inside Syria indicate an increase in the incidence of early marriages, noting that families see it as a protective measure for girls and that early marriage may provide some economic support to the family<sup>97</sup>. Structured debriefing conversations with MSNA field researchers indicated the occurrence of cases of early marriages in Ar Raqqa, Deir Er Zor, Al Hassakeh and Idlib Governorates.

While adolescent boys are particularly susceptible to recruitment and use in combat roles, 2014 has seen increased reports of adolescents' girls associated with armed groups, especially extremist groups, as wives.

As stated in previous reports, early marriage is not a new phenomenon among Syrian girls<sup>98</sup>. What is new are the conflict related drivers contributing to girls marrying at increasingly younger ages. In addition, because of economic pressures on conflict-affected Syrian families, these marriages are often conducted in haste, without formal registration or other traditional mechanisms that would provide some protection to a girl in the event of a divorce.

93 Milica Popović, Stefan Delplace and Gabriela Bergan, Independent Assessment Report on the Implementation of the General Certificate Exam by the Ministry of Education of the Interim Syrian Government, August 2014 and UNICEF unpublished data.

94 Al Monitor, <http://www.al-monitor.com/pulse/originals/2014/10/islamic-state-impose-education-program-iraq-syria.html>

95 As per UNESCO definition, GPI is the ratio of the number of female students enrolled at primary, secondary and tertiary levels of education to the number of male students in each level. To standardise the effects of the population structure of the appropriate age groups, the Gender Parity Index (GPI) of the Gross Enrolment Ratio (GER) for each level of education is used.

96 Future under threat, the impact of the education crisis on Syrian Children, Save the Children, 2014

97 Are we listening? Acting on our commitments to women and girls affected by the Syrian conflict, IRC, September 2014 and UNICEF Jordan, A Study on Early Marriage in Jordan, July 2014.

98 Early marriage was not uncommon in Syria prior to the conflict. UNICEF estimates that roughly 3% of Syrian girls were married by age 15 and 13% by age 18. Further, study respondents reported that this practice was more common in rural areas such as Daraa where strong tribal traditions remained intact. See UNICEF At a Glance: Syrian Arab Republic.



## Out of school children (OOSC)

Based on estimated population data<sup>99</sup> and EMIS data 2013-2014, the Education Sector in Damascus estimates that there are 1.6 million out of school children from schools or repeating the same grade for pre-school and basic education levels across Syria. While this number represents a decrease from the 2012/2013 school year, this is mainly due to the increase in the number of school-age refugee children in host countries (0.6 million) and to the slight enrolment increase. The precise number of children dropping out of school is difficult to gauge given the inherent difficulties in collecting this data, but at present, the MSNA reports that at least 40% of school-aged children are believed to not be attending school, with children residing in contested areas or in areas hosting high numbers of Internally Displaced Persons (IDPs) being the most vulnerable<sup>100</sup>.

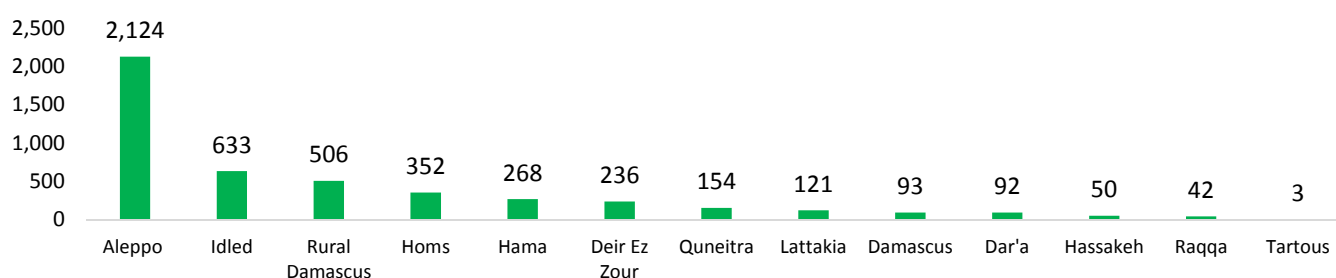
Multiple barriers and bottlenecks are confronted by the OOSC, including continuous escalation of violence that prevents children from accessing education services and safe learning spaces and reduces the incentives to even enrol in schools particularly in besieged and hard to reach areas; capacity of classrooms that is overstretched due to overcrowding, and the physical space of schools located in relatively safe host communities is not sufficient to accommodate the influx of displaced children; lack of school materials (textbooks, uniforms, shoes, stationaries) and gender-sensitive water and sanitation facilities in schools; economic poverty, insecurity and safety issues are also forcing children to stay away from school, which put them at risk of exploitation, child labour, violence and trafficking.

## Education Facilities

The Ministry of Education has reported in August 2014 that 15,765 schools are both accessible and able to report to the Ministry. As indicated in Figure 2, a further 3,285 schools are inaccessible, 608 schools are in use as collective centers for IDPs, and 783 have been severely damaged in the conflict or have been occupied by armed forces, across 13 governorates in Syria.

Number of Non-Functional Schools in 13 Governorates<sup>101</sup> in 2014

# Non-Functional schools in 2014



Source: MoE

The analysis of EMIS data also indicates more schools have been not functioning over the last four years since the conflict started in 2011 (see Annex 2). It is reported that since 2011 – 2012, between 50% and 87.9% of schools (from kindergarten to secondary schools) were lost in 17 affected districts across six governorates of Aleppo, Damascus, Dara'a, Rural Damascus, Quneitra and Homs as shown in Table 1 below. For example, Jubar district of Damascus lost 87.7% of schools, and

<sup>99</sup> The preliminary quantitative analysis has average figures from three sources from UNDP, US Census Bureau and civil affair records.

<sup>100</sup> UNICEF, Under Siege – The devastating impact on children of three years of conflict in Syria, March 2014

<sup>101</sup> Data from Sweida is missing.

Ain Al Arab district in Aleppo lost 72.8% of schools due to crisis. Though some schools in Aleppo governorate are still functioning, bombardments from the warring sides pose a severe barrier to education, with schools having been partially or severely damaged on several occasions<sup>102</sup>.

Districts with Decreased Number of Schools from KG to 12<sup>th</sup> grade<sup>103</sup>

Governorates	District	Loss of schools (%)
Aleppo	Al Saferah (Al Sfirah)	87.9
Damascus	Jubar	87.7
Aleppo	Ain Al Arab	72.8
Damascus	Qaboun (Qabboun)	71.4
Aleppo	Maskaneh (Maskana)	70.0
Dara'a	Izra'a	69.8
Aleppo	Deir Hafer	59.8
Rural Damascus	Douma	59.0
Quneitra	Rural Damascus	58.4
Rural Damascus	Daria (Darayya)	57.7
Damascus	Al Qadam (Al Qaddam)	54.5
Aleppo	Aleppo Center	54.3
Dara'a	Dara'a Center	52.2
Aleppo	Ifrin	51.7
Homs	Al Qouseir (Al Quseir)	51.2
Aleppo	Al Bab	50.9
Dara'a	Nawa	50.7

At the time of the MSNA, a total of 1,527 school are occupied across 10 governorate, out of which 617 in Aleppo, thus rendering them as non-functional for schooling purposes regardless of the degree of damage to infrastructure. A further 142 were reported as heavily damaged, whilst 68 were reported as completely destroyed. This also holds true in Deir-ez-Zor, where an estimated quarter (24%) of schools were occupied at the time of the assessment<sup>104</sup>, 60 were reported as heavily damaged and 15 were reported as completely destroyed. Half (49%) of all schools in Ar-Raqqa were reported as not damaged, and this is reflected in the fact the majority of schools appear to be functional. School facilities have remained largely intact there despite being occupied by armed groups. Many of these facilities are also being used for non-academic learning purposes.

## Education Personnel<sup>105</sup>

Teachers are facing huge pressures due to large numbers of traumatized children and limited resources; teachers have been killed, displaced, living in host countries, suffering psychosocial trauma, not prepared to deal with students' psychological distress<sup>106</sup>. The Ministry of Education has reportedly lost more than 52,500 teaching staff from its ranks since the beginning of the crisis – 22% of the pre-conflict workforce – although the true number, including those from opposition-held areas, is thought to be much higher<sup>107</sup>.

<sup>102</sup> SNAP, Regional Analysis Syria, Part I – Syria, 3 July 2014, p. 19.

<sup>103</sup> MoE EMIS data.

<sup>104</sup> Schools are often occupied by IDPs during the summer period, so the number of occupied facilities is expected to have decreased in the meantime. MSNA, October 2014.

<sup>105</sup> In the MoE EMIS database, the Education Personnel definition includes teachers, administration staff and librarians.

<sup>106</sup> Future under threat, the impact of the education crisis on Syrian Children, Save the Children, 2014

<sup>107</sup> Response Plan for the Syrian Humanitarian Operations from Turkey, July 2014 – June 2015, p.19.

According to MoE EMIS data, in basic education and at national level, one education personnel took care of 17.1 students prior to the conflict, which increased to 17.2 students per personnel in 2013-14. This change is minimal but if the analysis is unpacked at sub-national levels, there are some governorates that experienced rapid change in the student-education staff ratio in basic education between 2011-2012 and 2013-2014 (Table 2). At the district level, nine out of top 10 districts with high increases in the student-education personnel ratio are from Aleppo. Teachers in Aleppo governorate need to take care at least 50% more student, compared to the level in 2011. In Ain Al Arab, it is estimated that one education personnel needs to take care of about 61 students, while it used to be 22 in 2011-12.

Districts with Large Changes in Student-Education Personnel Ratio in Basic Education

Governorate	District	2011-12			2013-14			Difference	
		Total Student	Total Edu Staff	Student per Edu Staff	Total Student	Total Edu Staff	Student per Edu Staff	Total Student	Change (%)
Aleppo	Ain AL Arab	60,960	2,737	22.3	35,589	586	60.7	38.5	272.7%
Aleppo	Maskaneh	34,833	1,341	26.0	17,114	357	47.9	22.0	184.6%
Aleppo	Deir Haffer	32,133	1,312	24.5	11,140	249	44.7	20.2	182.7%
Aleppo	Al Sfirah	58,812	2,467	23.8	8,274	191	43.3	19.5	181.7%
Aleppo	Al Bab	63,994	2,859	22.4	41,698	1,022	40.8	18.4	182.3%
Aleppo	Minbij	90,148	4,106	22.0	71,118	2,047	34.7	12.8	158.2%
Aleppo	Jarablis	16,939	920	18.4	14,738	512	28.8	10.4	156.3%
Aleppo	Izaz	75,935	4,100	18.5	51,246	1,796	28.5	10.0	154.1%
Aleppo	Ifrin	37,571	2,262	16.6	22,603	876	25.8	9.2	155.3%
Damascus	Qanawat	8,154	503	16.2	13,343	615	21.7	5.5	133.8%

Source: EMIS, MOE

## Refugee education and IDPs

Providing education to Palestine refugees in a context of mass displacement remained deeply challenging throughout 2014. From a pre-crisis total enrolment of 67,000, only 26,000 Palestine refugees were attending school at the end of the 2012/13 school year. This figure has gradually recovered, with approximately 40,000 attending in 2013/14 and over 50,000 enrolled at the beginning of the 2014/15 school year<sup>108</sup>.

According to UNRWA, only 24 out of 58 UNRWA school buildings (which previously hosted 118 schools working through a double shift system) remained open and operational for education purposes. In Damascus, most of the accessible UNRWA school buildings were used as collective shelters for displaced Palestine refugees and Syrians.

With the outbreak of conflict in Iraq, the Damascus-based Education Sector is currently supporting 1,000 Yazidi refugee children newly arrived in Newrouz camp located in Malikia district of Hassakeh governorate, in close coordination with UNHCR.

<sup>108</sup> UNRWA data, 2014. Syria Crisis situation update (Issue 54).

In the 5 host country of Lebanon, Turkey, Jordan, Iraq and Egypt, over the past year, the number of Syrian children attending school has grown from 169,500 to 489,000. Almost 118,000 children and youth have participated in non-formal and informal education programmes in host countries. This is an increase from around 28,000 in August 2013. There has been an increase in the school-age registered refugee children by 80% from August 2013 to September 2014 (in terms of number this represent an increase of 444,000).

Despite the progress, around 461,000 registered school-aged children are out of school (49% out of the registered school-age population). This number can be higher because of the un-registered school-age children<sup>109</sup>.

When it comes to IDPs, as of September 22, 2014, Camp Management (CCCM) has reported 164,762 IDPs residing in 130 IDP settlements across the northern governorates of Idleb, Aleppo, Ar-Raqqa, Lattakia and Deir-ez-Zor. Between January and September 2014, the number of IDPs in camps has increased from 108,000 to 164,762 (56%). It is reported that health and education are the least served sectors in camps, even though they are mostly accessed outside of the camps.

## Capacity Gaps

The presence of education partners on the ground is urgently needed to scale up education response in hard to reach areas. So far, the Damascus based Education Sector has only 18 active partners and the Education Working Group based in Gaziantep, Turkey has 17 active partners, while the needs are huge and coverage is extensive.

Capacity building of partners is one of the key priorities to be rolled out in terms of education in emergencies, preparedness and contingency planning, information management and principles of humanitarian response. In addition to the above, the MSNA reported that a major barrier to attendance for school-aged children was the inability to cover the costs of teachers'; alternative ways, such as cash assistance programmes were identified as the primary need to be met if education services are to be improved and attendance rates increased. In this regards, the Turkey-based Education Working group is working together with the Cash-Based Response Technical Working Group (CBR-TWG) in developing a harmonized minimum expenditure basket for northern Syria to support families to send their children to school.

## Convergence, complementarity and trends analysis

The huge long terms impact of the crisis on the life of the affected population including children and adolescents requires an integrated and structured approach shared by all actors, humanitarian agencies, sectors/clusters and education working groups to improve the quality of the response, in particular for children in hard to reach areas. The Education Sector maintains that it is critical to use schools and education as the entry point for converging inter-sectorial activities at all levels to boost complementarity, synergy and efficiency of programme delivery, such as Psychosocial support, Water, Sanitation and Hygiene interventions, Risk Education, School feeding and Adolescent participation.

The Education and Child Protection sectors are working under the leadership of MoE and coordination with MoSA (the Ministry of Social Affairs) to ensure that Psycho Social Support (PSS) and Risk Education are mainstreamed in Education, to strengthen the education system to respond to and cope with emergencies and ensure access to quality education for everyone.

To address equity by reaching the most vulnerable groups including those with disabilities, OOSC, at-risk children, those engaged with child labour, those at threat of early marriage, children and

<sup>109</sup> UNICEF data.

adolescents in hard to reach areas, the Education Sector, in line with the INEE Minimum Standards for Education<sup>110</sup>, will focus on expanding community based intervention to strengthen resilience and enhance sustainability.

### 3. Information gaps

#### Operational environment and factors

##### (national and international response capacity, humanitarian access)

The information presented in this documents relies on the preliminary analysis of the EMIS data and on the draft education section of Syria MSNA.

There has been no single education need assessment conducted since 2012. In the absence of qualitative data collection, the Education Sector has relied on EMIS data from the MoE<sup>111</sup>. Currently the Damascus based Education Sector is in the process of conducting the national education sector assessment to review the critical education needs of affected children in terms of access, quality and equity, and strengthen the evidence-based response planning at the sector level. This includes analysis of the statistical data available from the Ministry. The assessment is expected to be finalized by December 2014 and the key findings will inform the national education response strategy and framework. JRANS I and II, SINA and MSNA as well as other sources of information, both qualitative and quantitative, will be used to triangulate the data.

There is a need to coordinate information sharing and reinforce the evidence base within the Whole of Syria (WoS) approach so as to avoid duplication and overlapping of response and boost complementarity and improve identification of gaps and needs. Coordination amongst partners needs to be improved at regional, national and governorate levels to identify emerging gaps and address them within the WoS approach. Coordination within education and across sectors is also challenging with multiple coordination bodies, difficulties in communication with regional bodies and challenges for global education bodies to fully engage.

#### Advocacy

It is an urgent call for key stakeholders including the government, Humanitarian Country Team (HCT), Inter Sector Coordination (ISC) and partners to work together to advocate for equitable access to education by respecting schools as safe havens in line with the following key priorities:

- Urgent advocacy to persuade all warring parties to protect school as safe havens. A recent attack on Akrama Al Makhzomi Elementary school in Homs city, on 1<sup>st</sup> October 2014 took the lives of 40 innocent children.
- Restore the civilian character of the school. The militarization of schools should be ended and the school be fully restored to its purely civilian and educational function.
- Reduce the use of schools as collective shelter. Where schools or other learning facilities are being used as collective shelters, precautions should be taken to mitigate the disruption caused to learners and teachers and the education system in both the short and long term. **Ideally, school buildings should not be used as collective shelters.** Education and Shelter sectors are developing a guidance note in this regard that confirms that prior identification of alternative

<sup>110</sup> INEE stands for International Network for Education in Emergencies promoting access to quality, safe, and relevant education for all persons affected by crisis. The INEE Minimum Standards are the global consensus for good practice in meeting the educational rights and needs of people affected by disasters and crises in ways that assert the dignity of the affected population.

<sup>111</sup> While the census collects basic statistical data on all schools which the Ministry can reach, the data needs to be analysed and interpreted to be of use to partners in planning and targeting appropriate interventions.

locations to be used as shelters should be undertaken in inter-sectorial coordination in order to ensure **that schools are only used as a last resort**. The recent cases of forced evacuation of shelter schools in Homs, Aleppo, Rural Damascus and Damascus for educational purposes should prompt all key stakeholders to agree on a protocol on limiting the use of schools as collective shelters.

- The lifesaving and life-sustaining of Education in Emergencies (EiE). EiE is an essential part of humanitarian response that can be life-saving and life-sustaining. Education is critical in the humanitarian context since it provides children with safe spaces, information and skills, psycho-social support and stimulation that complement nutrition and WASH interventions necessary for their healthy growth in the crisis. It sustains the life of Syrian children caught in current armed conflict or humanitarian crisis by providing a sense of stability, normalcy and hope for the future.



Number of students in Basic Education Schools by Sex, Governorate, and Year

Governorate	2010-2011			2011-2012			2012-2013			2013-2014		
	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls
Aleppo	1,126,688	590,097	536,591	1,164,263	608,019	556,244	341,716	182,375	159,341	489,302	256,134	233,168
Damascus	315,640	161,515	154,125	316,540	162,563	153,977	288,779	146,915	141,864	265,621	134,363	131,258
Dara'a	246,210	126,237	119,973	248,677	127,537	121,140	173,803	88,062	85,741	117,609	59,625	57,984
Deir ez Zour	347,167	184,065	163,102	359,220	190,234	168,986	229,602	123,513	106,089	-	-	-
Hama	371,534	193,598	177,936	374,562	194,970	179,592	307,449	159,032	148,417	375,850	194,845	181,005
Hassakeh	326,878	172,466	154,412	335,387	177,190	158,197	337,094	178,127	158,967	378,534	200,096	178,438
Homs	395,128	204,231	190,897	386,019	199,454	186,565	282,065	146,498	135,567	287,381	148,735	138,646
Idlib	385,400	201,230	184,170	391,691	204,935	186,756	211,211	110,548	100,663	341,273	177,343	163,930
Lattakia	177,428	90,463	86,965	178,545	91,033	87,512	176,553	90,111	86,442	182,007	93,070	88,937
Quneitra	105,422	54,234	51,188	107,527	55,087	52,440	60,245	31,334	28,911	59,867	31,131	28,736
Raqqa	237,896	125,727	112,169	247,532	130,706	116,826	-	-	-	-	-	-
Rural Damascus	537,593	272,058	265,535	544,367	276,480	267,887	332,749	170,321	162,428	386,777	197,858	188,919
Sweida	62,329	32,145	30,184	64,562	33,392	31,170	71,095	36,746	34,349	76,660	39,639	37,021
Tartous	138,963	72,126	66,837	141,456	73,500	67,956	153,139	79,303	73,836	163,001	84,208	78,793
Total	4,774,276	2,480,192	2,294,084	4,860,348	2,525,100	2,335,248	2,965,500	1,542,885	1,422,615	3,123,882	1,617,047	1,506,835

Source: EMIS, MoE

**Annex 2: Number of Schools by Governorate and Districts**

Governorate		District	2010-11	2011-12	2012-13	2013-14
Aleppo	1	Aleppo Center	775	795	102	354
	2	Minbij	400	411	268	288
	3	East Sa'aman				256
	4	Izaz	334	340	67	208
	5	Al Bab	326	328	83	160
	6	Ifrin	286	287	121	138
	7	Ain AL Arab	467	468	103	127
	8	Jarablis	117	116	64	97
	9	Maskaneh (Maskana)	230	238	30	69
	10	West Sama'an				55
	11	Deir Hafer	117	118	17	47
	12	Al Saferah (Al Sfirah)	281	282	6	34
	13	Sama'an	638	658	460	
		Total no of school	3971	4041	1321	1833
		No of district	11	11	11	12
Damascus	14	Mazzeh	108	107	107	110
	15	Midan	162	112	96	90
	16	Dummar	72	79	81	83
	17	Sarouja (Sarwja)	71	75	78	80
	18	Al Muhajreen (al Mouhajrin)	83	77	77	77
	19	Shaghour	62	70	68	69
	20	Rukn Eddin (Rukin Eddin)	55	58	57	57
	21	Old Damascus	58	54	51	53
	22	Al Salhie (Al Slhia)	41	44	42	46
	23	Qanawat	48	55	50	46
	24	Barzeh	59	60	59	42
	25	Kafersouseh (kafarswsieh)	36	36	37	37
	26	Al Qadam (Al Qaddam)	44	43	26	20
	27	Qaboun (Qabboun)	28	27	22	8
	28	Jubar	57	62	51	7
	29	Mukhayyam (Al Moukhaim)	9	49	35	
		Total no of school	993	1008	937	825
		No of district	16	16	16	15
Dara'a	30	Dara'a Center	549	450	243	215
	31	Al Sanamin (Al Sanamien)	231	243	217	150
	32	Nawa		142	131	70
	33	Izra'a	348	215	96	65
	34	Busra		120	65	61
		Total no of school	1128	1170	752	561
		No of district	3	5	5	5
Deir ez Zour	35	Centre of the governorate	806	831	603	
	36	Al Bou Kamal	302	324	277	
	37	Al Mayadeen (Al Miadeen)	304	316	157	
		Total no of school	1412	1471	1037	
		No of district	3	3	3	
Hama	38	Governorate Center	784	805	624	720
	39	Al Salamieh	434	442	330	420
	40	Al Ghab (Al Souklbieh)	355	357	226	334
	41	Mousiaf	286	291	279	305

Governorate		District	2010-11	2011-12	2012-13	2013-14
	42	Mouhardeh	160	162	76	156
		Total no of school	2019	2057	1535	1935
		No of district	5	5	5	5
Hassakeh	43	Hassakeh Center	945	993	1028	1029
	44	Qamishli (Kamshleh)	708	735	753	753
	45	Al Malkieh	353	359	370	370
	46	Raas Al Ain (Ras El-Ein)	351	360	370	370
	47	???				50
		Total no of school	2357	2447	2521	2572
		No of district	4	4	4	5
Homs	48	Governorate Center	412	403	254	226
	49	Villages and Location of the Center	621	610	583	577
	50	Talkalakh	216	211	208	219
	51	Rastan	139	133	21	117
	52	Al Moukharam	162	163	116	114
	53	Palmyra	107	107	116	97
	54	Al Qouseir (Al Quseir)	164	162	78	80
		Total no of school	1821	1789	1376	1430
		No of district	7	7	7	7
Idlib (Idleb)	55	Mara't Al Nouma'an	479	496	236	378
	56	Idlib Center	407	417	161	349
	57	Harim	226	227	154	208
	58	Jisir Al Shoughour	209	213	101	161
	59	Ariha	210	212	110	147
		Total no of school	1531	1565	762	1243
		No of district	5	5	5	5
Lattakia	60	Governorate Center	232	235	231	236
	61	Jableh	332	338	333	328
	62	Lattakia Location (District of Lattakia)	275	288	241	244
	63	Al Qirdaha (Kardaha/Kirdaha)	193	194	194	195
	64	Al Hifeh (Al Hafeh)	239	241	156	152
		Total no of school	1271	1296	1155	1155
		No of district	5	5	5	5
Quneitra	65	Governorate Center	171	176	161	115
	66	Rural Damascus	173	185	80	72
	67	Damascus	60	59	33	37
		Total no of school	404	420	274	224
		No of district	3	3	3	3
Raqqa	68	Governorate Center	970	1029		
	69	Tal Abyad	518	536		
		Total no of school	1488	1565		
		No of district	2	2		
Rural Damascus	70	Governorate Center	514	529	528	336
	71	Qatana	229	236	238	200
	72	Douma	351	373	374	144
	73	Qoutaifeh (Qutaifeh/Al Qoutefeh)	123	126	129	127
	74	Al Tal	118	124	130	125
	75	Al Nabik	92	95	97	79

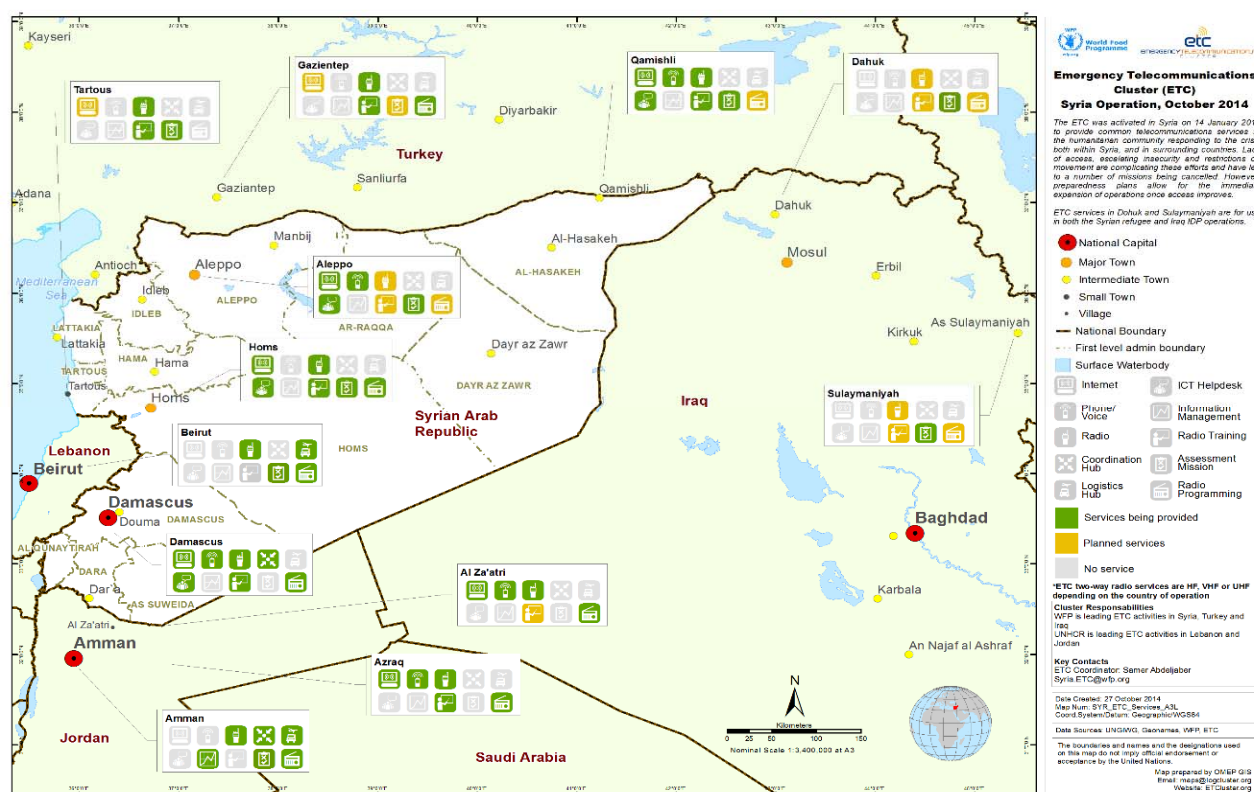
Governorate		District	2010-11	2011-12	2012-13	2013-14
	76	Yabroud	73	76	77	69
	77	Daria (Darayya)	156	169	166	66
	78	Al Zabadani	113	115	114	65
		Total no of school	1769	1843	1853	1211
		No of district	9	9	9	9
Sweida	79	Governorate Center	272	273	288	297
	80	Shahba	143	147	148	152
	81	Salkhad	122	123	126	125
		Total no of school	537	543	562	574
		No of district	3	3	3	3
Tartous	82	Al Sheikh Badir (Shiekh Bader)	172	174	173	176
	83	Banias	353	360	367	366
	84	Drikish	166	167	169	170
	85	Safita	286	290	286	295
	86	Tartous Center	437	457	469	470
		Total no of school	1414	1448	1464	1477
		No of district	5	5	5	5

Note: Red cells indicate unreported statistics.

Source: EMIS, MoE



## Emergency Telecommunications Cluster (ETC)



Syria ETC Service Map (October 2014)

## Situation Overview

The Syria Emergency Telecommunications Cluster (ETC) was formally activated in January 2013 to provide common telecommunication services to the humanitarian community responding to the crisis in Syria and surrounding countries.

The humanitarian community relies on technology services for all aspects of their operations from reporting and coordination, to ensuring the security and safety of staff in the field. Since the Cluster was activated, ETC has deployed common services across the region and prepositioned telecommunication equipment at regional hubs to drive rapid response when needs arise.

As global ETC lead, WFP works in collaboration with partner agencies including UNHCR, UNDSS and UNICEF to deliver common services. Regular Syria ETC teleconferences ensure coordination and information-sharing on a global level, and working group meetings are held at a local level.

The ETC strategy for 2015 is to continue offering common services in operational areas across several countries including Syria, Lebanon, Jordan, Iraq and Turkey. To this end, assessment missions will be an ongoing activity of the cluster to identify gaps and determine ways to fill them. In addition, the Cluster will continue its coordination work between humanitarian actors and dissemination of information to assist the humanitarian community.

## Local Telecommunications Capacity Assessment

The telecoms capacity assessments below are separated by country and provide a brief overview of the telecommunication and internet landscape in Syria and neighbouring countries where the ETC is focused.

### Syria:

#### a. Telecommunication Services (Landlines and Mobile)

The telephone infrastructure in Syria is managed by the state-controlled Syrian Telecommunications Establishment (STE). Landlines are only provided by the STE, while mobile services are provided by two privately-owned mobile operators, Syriatel and MTN.

The crisis in Syria continues to impact the reliability of telecommunications services in the country. Blackouts to internet and telephone services are not uncommon and mobile network coverage has been impacted due to extensive damage to telecommunications infrastructure as a result of the conflict. 2014 has seen a decline in the number of mobile network subscribers due to the ongoing conflict in the country.

## Internet Services

Multiple access methods to the internet are available in Syria. Most users in Syria access the internet via mobile broadband (3G) services from Syriatel and MTN. Other internet access methods such as ADSL, dial-up and leased lines are also available, however, slow speeds and blackouts hamper productivity. International internet gateways and all fixed line infrastructure are controlled by STE, which is also an ISP. The centralisation of control adds to the periodic connectivity problems experienced by users.

The Syrian government filters and blocks websites, and is reported to possess technologies for surveillance of internet usage. Such activities are made easier by the centralised government control of key telecommunications infrastructure.

#### b. Basic Statistics – Syria (Source: ITU 2013)

Mobile Penetration in Syria	56%
Internet Penetration in Syria	26.2%
Landline Penetration in Syria	20.2%

**Jordan:****a. Telecommunication Services (Landlines and Mobile)**

The mobile operator market in Jordan is competitive with three mobile operators, Umniah, Zain and Orange, offering services in the country. Mobile penetration rates are high (above 100 percent) indicating that many users have multiple SIMs. Zain was the first mobile operator in the country to be awarded a 4G license by the government and the operator intends to start offering 4G services by the end of 2014. High taxes imposed by the government on mobile services is a major challenge for mobile operators. Taxes on mobile phones and subscriptions were doubled from 8 percent to 16 percent in 2013.

Fixed line telephone services are offered by one operator, Orange, which owns all of the fixed line infrastructure in Jordan.

**b. Internet Services**

In line with other countries in the region, the overwhelming access to the internet in Jordan is via mobile broadband. The introduction of 4G services from Zain will increase speeds available from mobile broadband and may further increase internet penetration. Fixed line internet access is low in comparison to mobile broadband, however, ADSL, leased line, and dial-up internet access is available. Fixed internet services are available from well over 10 different ISPs although a handful of players dominate the fixed internet market.

All internet traffic flows through government-controlled telecommunications hubs. The Telecommunications Regulatory Commission (TRC) regulates the country's ICT sector.

Recently, Jordan has also refocused its efforts to build a national broadband network (NBN) in the country. The project aims to connect public institutions and participating private companies to a nationwide high speed fibre-optic network.

**c. Basic Statistics – Jordan** (Source: ITU 2013)

Mobile Penetration in Jordan	141.8%
Internet Penetration in Jordan	44.2%
Landline Penetration in Jordan	5.2%

**Lebanon:****a. Telecommunication Services (Landlines and Mobile)**

Lebanon has two mobile operators which are both government controlled under a monopolistic arrangement. The government pays a management fee to Alfa and MTC Touch who operate the mobile networks on behalf of the government.

Fixed line telephone services are operated by the government-owned operator, Ogero.

The conflict in Syria and deterioration in Lebanon's security have put on hold many of the government's deregulation plans.

**b. Internet Services**

The internet backbone network in Lebanon is operated by the government-owned operator, Ogero. A significant number of ISPs operate in the country and offer internet access via ADSL, fibre, WiMAX, WiFi and other technologies. The government's monopoly over the internet backbone in the country allows it to tightly control the activity of ISPs.

Mobile broadband remains the most popular internet access method and both mobile operators now offer 4G services in Beirut. The large volume of mobile internet users places significant pressure on the telecommunications infrastructure often resulting in slow speeds and poor performance of the network.

The Telecommunications Regulatory Authority (TRA) regulates the country's telecommunication sector.



### c. Basic Statistics – Lebanon (Source: ITU 2013)

Mobile Penetration in Lebanon	80.6%
Internet Penetration in Lebanon	70.5%
Landline Penetration in Lebanon	18%

## Turkey:

### a. Telecommunication Services (Landlines and Mobile)

According to the GSM Association (GSMA) Turkey is classified as a “Fast Grower” market with 67.5 million mobile connections in the country. Three mobile operators, Turkcell, Vodafone and Avea (majority owned by Turk Telecom), offer mobile services in the country. Mobile penetration rates are high at 93 percent and competition is healthy in the sector. The mobile market is vibrant due to the large and relatively young population of Turkey.

Multiple fixed line telephone suppliers offer services in Turkey. The dominant player in fixed line services is Turk Telekom. Turkey is also investing in fibre rollout to support the delivery of faster speeds and new services.

### b. Internet Services

Mobile broadband is the most popular internet access method in Turkey today. Competition exists in the internet market, however, Turk Telekom (TTNET) is the dominant ISP in the country. The majority of ISPs resell the TTNET service.

Internet censorship has become an increasing area of discussion in Turkey. In a recent report the organisation Freedom House expressed concern over the growing role of the state in internet governance and questioned the independence of the country’s largest ISP, Turk Telekom, which is 30 percent government-owned.

The telecommunication authority, BTK (also known as ICTA), is the regulatory body for ICT related matters in Turkey.

### c. Basic Statistics – Turkey (Source: ITU 2013)

Mobile Penetration in Turkey	93%
Internet Penetration in Turkey	46.2%
Landline Penetration in Turkey	18.1%

## Needs Analysis

## Syria:

The key operational areas for ETC inside Syria are Damascus, Homs, Qamishli, Aleppo and Tartous. In 2014, ETC delivered radio training in four of the five operational areas. In addition, from 1 March 2014 the Cluster funded the salaries of all inter-agency radio operator staff in the five operational locations.

### a. Security Telecommunication Services

The availability of radio coverage is deficient in most locations due to a combination of either old or insufficient equipment and lack of government approval. The Cluster is in the process of importing telecoms equipment in Syria based on approval advice received from Syrian government authorities. If the equipment is successfully moved into the country, the Cluster will be able to focus on upgrading equipment in approved operational locations which will drive a technical resource requirement into 2015. The Cluster also intends to continue funding the salaries of 31 inter-agency radio operator staff working in the five operational locations during 2015. Support from the Cluster will also be provided for further radio and emergency management training.

In addition, ongoing assessment missions conducted by the Cluster may identify additional projects to enhance the availability of common services in operational areas. This includes radio training services that already started in 2014 where approximately 200 humanitarian personnel were trained.

Difficulties in obtaining approvals for licenses and to deploy telecoms equipment inside Syria constrain the work of the Cluster to deploy services. In particular, the UN radio network in Syria requires significant upgrades in the operational areas. Currently, repeater channels are only available in Damascus and other operational areas are limited to simplex radio channels only. Radio rooms are operating with limited equipment. In addition, the Cluster is barred from using digital equipment by the government.

### Basic Information

Location	Current Services	Required Services
Damascus	Analogue repeater covering main locations	
Homs	Base station with limited coverage	Repeater with additional channels
Qamishly	Base station with limited coverage	Repeater with additional channels
Aleppo	Base station with limited coverage	Repeater with additional channels
Tartous	Base station with limited coverage	Repeater with additional channels

## b. Internet Services

The Emergency Telecommunications Cluster offers internet services in a number of operational areas inside Syria. These services are composed of local internet services as well as satellite data services. These services are mainly considered WiFi hotspots unless we are operating in a UN hub where dedicated services are considered.

### Basic Information

Location	Current Services	Required Services
Damascus	ETC hotspot available at Four Season Hotel	
Homs	ADSL available at UN hub	Satellite data services at UN hub
Qamishly	ETC hotspot available at UN hub	
Aleppo	ADSL available	Satellite data services at UN hub
Tartous	ADSL and 3G services available. No ETC services deployed	Satellite data services at UN hub

## Jordan:

UNHCR provides ETC services to the humanitarian community working at the Zaatari and Azraq camps in Jordan. This is not expected to change in 2015. ETC will continue to host local meetings in Amman in 2015. The local meetings are a valuable forum for inter-agency collaboration and discussion.

In August 2014, following Security Council Resolution 2165 relating to cross border operations with Syria, the ETC conducted an assessment of common services available at the Ramtha-Dar'a crossing to southern Syria. Should the UN presence be expanded at the Ramtha crossing the Cluster is ready to assist with the provision of ETC services.

The UN radio network in Jordan is administered by different parties depending on location. The radio network in Amman is currently hosted by the Jordanian government, however, a UN inter-agency ICT working group has been assessing an option to move to an independent UN radio network in Amman. Subject to higher level endorsement, a project may be initiated to deploy an independent network to cover Amman. The hilly landscape of Amman city creates some challenges in providing seamless radio coverage across the city.

In Azraq and Zaatari camps, UNHCR provides radio network coverage for humanitarian workers to communicate within the camps. In addition, WFP has a radio repeater in its Mafrq sub-office. An assessment at the Ramtha border crossing to Syria conducted by ETC in August 2014 showed that the UN does not have radio coverage at this border location, however, Jordan's mobile network service providers (Umniah, ZAIN and Orange) have mobile network coverage at that location.

### **Lebanon:**

In 2013, the Cluster worked closely with UNDSS on a major upgrade to the VHF radio network in northern Lebanon to support the humanitarian community working for the Syrian operation. Support from the Cluster has continued in 2014 with a smaller project to improve the existing network. In addition, local ETC meetings have been held in Beirut which has been important for coordination between different humanitarian actors.

The Cluster's pre-positioned telecommunications stock in Beirut is in the process of being transferred to Damascus. If the first transfer of equipment is successful, then it is expected that additional pre-positioned stock from other regional hubs will be sent to Damascus via Beirut.

In 2015, ETC will continue to host local ETC meetings in Beirut and work on the ongoing movement of telecommunications equipment to Damascus via Beirut. ETC will also provide technical support to the Logistics Cluster in Beirut to assist with improved mapping capabilities in that location.

### **Turkey:**

Telecommunication services at the camps inside Turkey are provided by the Turkish Red Crescent.

A UN hub was opened in the city of Gaziantep in August 2014. Multiple agencies are now operating out of the new hub site and ETC is ready to provide support with service deployment if required.

Following Security Council Resolution 2165 relating to cross border operations with Syria, the ETC has offered IT and telecommunications support to logistics for aid convoys crossing the Turkish border crossings. At this stage ETC support has not been requested, however, the Cluster stands ready to assist to deploy services should a request be made.

The UN radio network in Turkey is based on UHF and HF technology. The UN has base stations and repeaters in multiple locations in the country. With the recent increase in activity and opening of a UN hub in Gaziantep, close to the Syrian border, an additional repeater may be deployed in that location to increase radio coverage in that location.

### **Iraq:**

In 2014, the Syria ETC provided telecommunications equipment and technical services for the establishment of two radio rooms in Iraq, specifically in Dohuk and Sulaymaniyah, to support humanitarian agencies that are operating in the Syrian refugee camps of Domiz and Arbat. In July 2014 the Iraq ETC was formally activated to respond to the escalating crisis in Iraq. Therefore, in 2015 the activities of the Syria ETC inside Iraq is expected to be minimal.

### **Cluster Strategy Moving Forward**

The Emergency Telecommunications Cluster will continue its coordination, information management, and provision of common services with WFP as a provider of last resort. The Cluster has procured IT and telecommunications equipment which is pre-positioned at regional hubs, therefore, procurement of equipment does not form a significant component of ETC activities in 2015.

The activities in 2015 will focus on building on recent achievements to ensure secure telecommunications services are implemented to facilitate the work of the humanitarian community. This includes augmenting VHF radio infrastructure, further investment in radio training sessions and continuing to build the capacity of the radio rooms in Syria.

## Priority Needs

The mitigation of the operational challenges that disrupt the provision of ETC services in all operational areas within Syria remains on the Cluster's priority list. The challenges for the ETC response in Syria include:

- Logistical challenges of importing telecoms equipment
- Government restrictions on operating telecoms equipment
- Limited radio coverage
- Restricted access due to deteriorating security

In 2015 the Cluster will:

- Maintain and expand common telecommunication services in operational areas
- Fund 31 inter-agency radio operators at operational locations in Syria
- Conduct further radio training and IT emergency management training in Syria
- Share information amongst the humanitarian community relating to common services
- Host regular global and local ETC meetings
- Conduct assessment missions and initiate projects to overcome gaps in service delivery

**Note:** The Emergency Telecommunications Cluster, as a Support Cluster, fills telecommunications service gaps in emergencies on behalf of the humanitarian community, whilst also providing a platform for coordination and sharing of information among partners. As such, it does not have direct beneficiaries.



## Food Security and Livelihoods

### 1. Key Humanitarian Issues

**Food insecurity across Syria is further aggravated:** As the crisis evolves into a new phase of increased geographical fragmentation and isolation, continued degradation of productive sectors, assets, and livelihoods, as well as the shrinking capacity for household to cope with the detrimental impacts of the crisis.

**People in Need increases in the high priority districts:** As of October 2014, it is estimated that 9.8 million<sup>112</sup> Syrians are in need of various levels of food, agriculture and livelihood related assistance, of which 6.8 million are more severely food insecure.

**Meeting basic food needs remains a key issue:** Low food production during the 2014 agriculture season, a consequence of the prolonged conflict and drought conditions experienced this year, will further reduce food availability and lead to an increase in food prices. Food prices are already at an all-time high, above 300 percent for some food commodities in comparison to pre-crisis levels. Combined with the continued devaluation of the Syrian currency and limited purchasing power, in view of the high unemployment rate (54 percent), vulnerable families will continue to face difficulties in meeting basic food needs.

**Adoption of negative Coping Mechanism heightens:** Crisis-affected families are increasingly adopting negative coping strategies in the absence of sufficient means to survive. In addition to drastic reduction in food consumption patterns (eating less frequently and less nutritious foods), vulnerable families have had to withdraw children from school to either beg or engage in informal labour. In extreme cases, children have fallen prey to engaging in armed group activities or early marriages. Displaced families, resident communities hosting IDP families, orphans, the elderly, persons with disabilities, women and children remain at more risk of negative coping mechanisms.

**Palestine refugees severely and disproportionately affected by the conflict:** Palestinian camps and gatherings on urban peripheries throughout Syria, particularly Damascus, Aleppo and

<sup>112</sup> With a margin of error of up to 7%

Dara'a, have seen massive levels of displacement among this community, as residential areas became active frontlines in 2012 and 2013. Prior to the conflict, Palestine refugees experienced significantly higher levels of poverty and unemployment than the Syrian population meaning that, in addition to frequent exposure to armed conflict, their resilience and coping mechanisms have been all but exhausted. Throughout 2014, both Jordan and Lebanon blocked all entry of Palestine refugees from Syria, leaving this already vulnerable population with nowhere to flee.

## 2. Impact of Crisis (Situation of the affected population)

### People in Need and prioritized districts in the Sector:

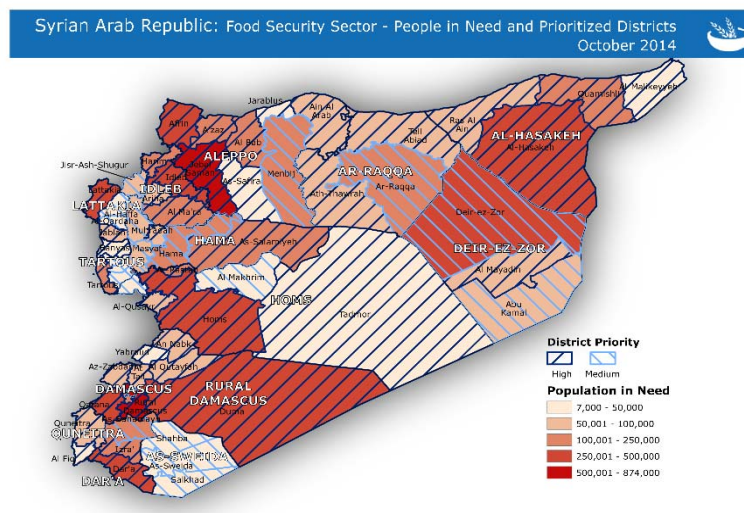
**Methodology:** 'People in Need' numbers were agreed by the Food Security Cluster/Sector technical team. A rigorous exercise covering a four point criteria of reliability, coverage, date of assessment and expert knowledge, was used to draw key information from all available assessment and monitoring data. Based on these criteria, all the 61 districts in Syria were analysed – bearing in mind that available information did not comprise of a detailed recent village-level assessment. The data sources used include the following:

1. MSNA (2014)
2. JFRSNA (2013)
3. FSC/S partner individual area assessments/beneficiary list where available, SINA (2013)
4. OCHA governorates profile<sup>113</sup> (2014)
5. REACH Area of Origin Assessment (2014)
6. UNRWA Result-Based Management System, UNRWA Refugee Registration Information System (Emergency Module), UNRWA field staff.

For the severity ranking to prioritize areas, the MSNA prioritization for the 110 sub-districts was adopted since it is the most recent data from an assessment done in September 2014<sup>114</sup>. However for consistency with the other sources the ranking was averaged and aggregated to district level and the rest of the districts were prioritized based on the WFP Syria PROBIT Model; JFRSNA (2014) and other assessments such as REACH Area of Origin Assessment; and partners field data. This exercise prioritized 41 districts as they scored three or above in the severity ranking. The details are provided in annex 1.

**People in Need:** Based on available information, it is estimated that an overall 9.8 million people are in need of various levels of food, agriculture and livelihood related assistance inside Syria. The impact of the increased outflows of vulnerable Syrians seeking assistance in neighboring countries as a result of intensified conflict should be further analyzed, but the data available at the moment are not sufficient to draw final conclusions.

Of the 9.8 million people who are food insecure, it is estimated that around 6.8 million people are severely food insecure, in the high priority districts, As-Safira in Aleppo, Ar-Rastan and Tadmor in Homs and Az-Zabdan and Duma in Rural Damascus with acute needs, representing a 7.9 percent increase from last year's estimate of 6.3 million people. This too reflects greater displacement in-country, as people flee increased conflict and seek refuge in urban settings, as well as a greater



<sup>113</sup> Detailed NFR available on how food security sector People in Need were determined.

<sup>114</sup> This is only 40% of the total number of sub districts and at times not all sub districts were covered within a district.



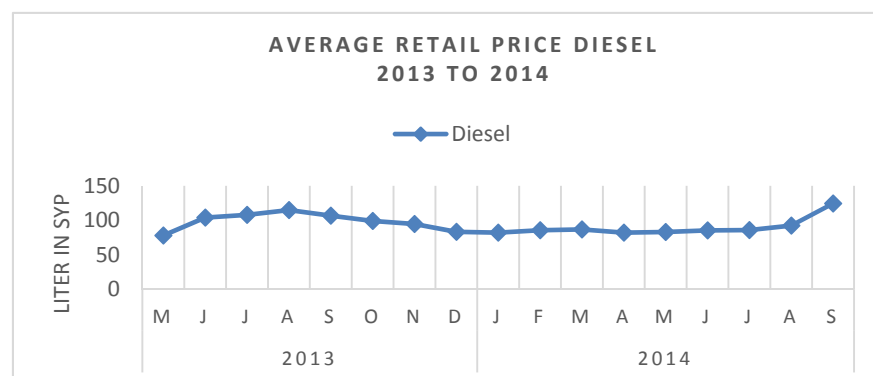
Out of approximately 560,000 Palestine refugees registered in Syria, 462,000 are considered to be in need of food assistance. Over 50 percent of the refugees registered in Syria have fled their homes, with ongoing displacements in the governorates of Damascus, Aleppo, Homs, Hama and Dara'a. The collapse of livelihoods, caused by the conflict and the ongoing economic contraction throughout Syria, has left a large majority of Palestine refugees with insufficient assets to procure adequate food. UNRWA's recent cash assistance evaluation indicated that cash-for-food grants were regularly used for other essential costs, such as rent.

It is further expected that pre-existing vulnerabilities would have been exacerbated by the effects of the crisis and displacement. These include: children (particularly those below the age of five years), female-headed household, the elderly, people with disabilities and the chronically sick. Female-headed households, the proportion of which has increased as a result of the conflict, often have greater difficulty in accessing food assistance or livelihood opportunities, due to limitations to mobility posed by cultural and safety consideration, competing time pressures of caring for children, lack of prior work experience or having skills that are not appropriate for the context after displacement.

Vulnerability of Palestine refugees throughout Syria, is anticipated to deepen significantly throughout 2015<sup>116</sup> due to high rates of displacement combined with erosion of asset base, coping mechanism and livelihood opportunities.

Throughout 2014, prices of key commodities have remained high in comparison to pre-crisis levels. WFP price monitoring data shows price increases in wheat flour and rice of more than 300 percent in September 2014 compared to 2011. Since mid-2014, the average retail prices of both commodities have continued to rise steadily and a sudden uptick is being observed in the last quarter of the year, attributed to conflict and drought impacting food production.

In the absence of an aggressive import strategy to meet demand, food prices are

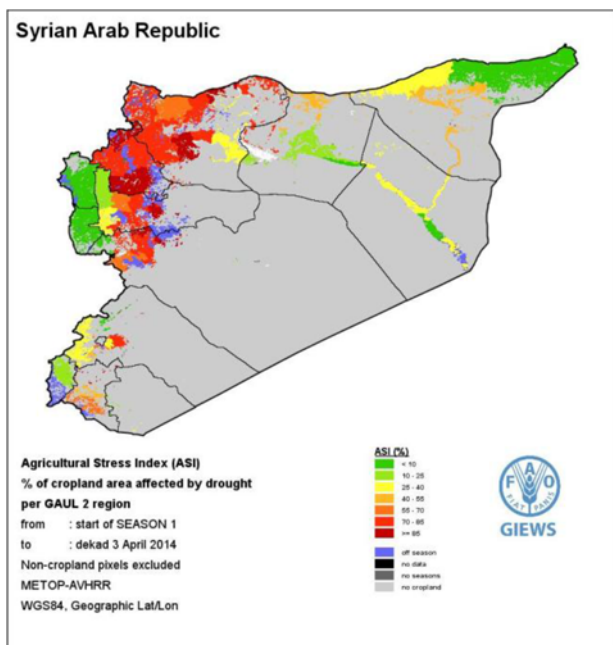


116 UNRWA humanitarian needs overview



expected to increase well into the lean season when vulnerable families would have depleted their own resources. In general, similar trends are observed with other basic commodities, which will further worsen household food security given the high reliance of families on markets. This could potentially result in continued population movements in search of humanitarian assistance or income generation opportunities.

**Drought conditions compound impact of conflict on local food production:** The adverse effects of the conflict on local productive capacities – which prior to the conflict had left Syria with



an exportable agricultural surplus – have significantly reduced farmers' ability to supply the population with food and agricultural produce. The crisis has reduced the availability and increased the price of agricultural inputs, including equipment, seeds, fertilizer and labour, while also damaging and destroying farm equipment - particularly significant for irrigated crop production of staples such as wheat, barley, cotton and horticultural crops. The conflict has displaced farmers, forcing them to abandon their agricultural land, and resulted in power shortages - all which serve to significantly affect local productive capacity.

In addition, drought conditions in the western part of the country during most of 2014 have further compounded the effects of the conflict. Well below-average rainfall during key periods of the cropping season significantly reduced the harvest of some of

Syria's key agricultural areas, notably Aleppo, Hama, Idlib, Homs and Da'ra governorates.

FAO estimates place the 2013/14 cereal harvest at some 2.4 million tonnes - about 2 million tonnes of wheat and 400,000 tonnes of barley and other cereals. This is a sharp reduction of 31 percent when compared to the 2012/13 harvest, which was already below the five-year average. Equally important is the reduction in the amount of cereal traded by the General Establishment for Cereal Processing and Trade (GECPT). Through this trading, farmers are able to sell their produce, receiving an income that provides for sustainable and increased agricultural production as well as a secure livelihood. Without such an income, farmer capacity to invest in production and supply to markets in Syria will decrease significantly. The annual quantity of domestic wheat bought from farmers through the GECPT decreased by some 65 percent between 2011 and 2013 - from an estimated 2.8 million to 1 million tonnes in 2013. As of July 2014, only 620,000 tonnes have been procured from farmers. In light of reductions to local food production, the cereal import requirement is expected to increase to 4.53 million tonnes for the market year July 2014 to June 2015 as compared to the previous market year projection of 4 million tonnes. Of this, the wheat import requirement in 2014/15 is tentatively forecast at about 2 million tonnes.

**Livestock sector similarly deteriorates:** The livestock sector, which accounted for some 35–40 percent of Syria's total agricultural production before the conflict, has been similarly affected. The national sheep flock is thought to have fallen by 30 percent and the national cattle herd by 40 percent with less than 35 percent of the country's poultry units still operating and at least 50 percent of jobs in the poultry sector had been lost. Moreover the crisis is resulting in poor and further deteriorating veterinary services. Vaccination campaigns and preventive programs could be implemented with limited geographical coverage (50 percent or less) leaving remaining livestock without immunity against contagious diseases. This resulted in very high prices of meat, milk and other important animal products.

Low crop and livestock production combined with the ongoing conflict will further strain Syria's already fragile food security situation and increase the number of people in need of assistance and push others to use negative coping mechanisms. The main implications are:

- An increased dependence on imports at a time when Syria's import capacity is severely diminished by the collapse of the real economic growth (-18.7 percent a year) and international reserves (-87 percent) from 2011 (the beginning of the war) to 2013.
- Reduced reliance of rural households on their own production and an increased reliance on markets for staple food supply across all households.
- Increased household exposure to already highly volatile and erratic food price patterns, as well as strained food availability on markets.
- The poor prospects of the cereal harvest will likely impact on the bread prices which had largely remained stable due to government subsidies and also food assistance but had started increasing because of the fuel increases.

Areas hosting large numbers of IDPs, such as Deir-ez-Zor City, Ar-Raqqa, Al-Hasakeh, Qamishly and Lattakia, are placing a greater strain on the hosting infrastructure, including health facilities and electricity, as well as putting pressure on functioning markets and livelihoods, resulting overall in an increased lack of food. Some 60 percent of public bakeries, which prior to the conflict supplied bread to a large proportion of the population at subsidies prices, have been damaged.

**Insecurity hampers marketing and transportation of available produce:** As the nature of the conflict evolves and moves across different parts of the country, the delivery of food assistance has met a variety of obstacles, some of which have required partners to negotiate with various armed groups to allow for safe passage, while others have resulted in destroyed trucks or taken the lives of drivers caught in the conflict. Persistent road insecurity and spiking fuel prices during the second half of 2014 continue to disrupt the market supply chain – particularly in the northeast – further complicating the marketing and transportation of the produce that is available. Import restrictions on fuel, coupled with the on-going conflict, have led to steady price increases. Horticulture production remains depressed, as a result of various constraints, including challenges in transporting and marketing of perishable products. In light of the upcoming winter period and with insecurity showing no signs of decreasing, fuel prices can be expected to continue to rise over the coming period.

**Conflict-induced inflation, currency depreciation and displacement erode purchasing power:** Increased transportation costs have also contributed to food inflation, causing the price of staple food items, such as sugar, rice, tea, vegetable oil and lentils, to rise sharply. Markets remain particularly vulnerable to intensified conflict, with those witnessing intense and heavy clashes, such as Idleb, Deir-ez-Zor and Al Hassakeh, particularly affected by price instability.

In addition to higher food prices and depreciation in the national currency, continued forced displacement is critically serving to reduce the purchasing power of affected Syrians. So far, an estimated 6.4 million people have been forced to leave their homes to seek employment and food in different parts of the country (in addition to the over 3 million people seeking refuge throughout the region). During displacement, the possibility of finding work or undertaking any kind of economic activity is significantly reduced, leaving people with little or no income to purchase essential foods or other items and contributing to ever higher levels of vulnerability.

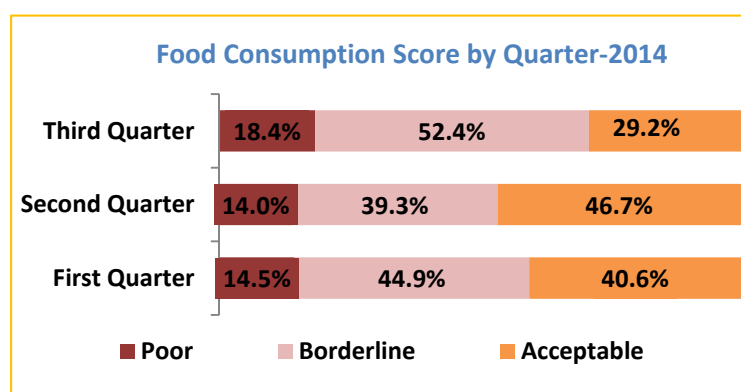
**Higher dependence on assistance and negative coping strategies point to increased need for resilience focus:** In light of the above, the dependence on external assistance has continued to increase over the past year, with humanitarian partners scaling up operations to meet the ever rising needs. Despite best efforts, insecurity continues to prevent access to large portions of the country, with affected populations increasingly forced to resort to negative coping mechanisms,

such as eating less preferred food, reducing the number of meals, limiting portions, selling assets, taking high-risk/illegal jobs and child labour.

In five percent of the assessed sub-districts (MSNA 6 out of 121) there are reports of use of wild food, hunt, or harvest immature crops or collecting food from wild plants, although still limited this is a clear indicator of a deterioration of the situation.

Rural areas reported a higher frequency of using wild food, hunt, or harvest immature crops or collecting food from wild plants compared to urban areas. Five percent of the assessed sub-districts (6 out of 121) report to have adopted this extreme coping mechanism, for example the 'distress sale' of productive livestock by herders, at a rate that compromises the sustainable reproduction of a herd.<sup>117</sup>

Analysis of monitoring data collected by WFP during the third quarter of 2014 indicates a remarkable decline in beneficiaries having acceptable food consumption from 47 percent to 29 percent whilst there is a corresponding increase in percentages of beneficiaries with borderline (from 39 percent to 52 percent) and poor food consumption (14 percent to 18 percent). The main reason for the deterioration in consumption is likely due to the reduction of rations in food baskets during the months of July, August and September. This implies that most of these families are surviving mainly on food assistance, a situation which could be worse for other vulnerable households not receiving any food assistance.



Four years into the conflict, all factors indicate a further deterioration in food security conditions over the coming period. In response, food actors will need to continue strengthening coordination and advocacy efforts to expand the coverage of aid, particularly in areas currently inaccessible due to insecurity. Secondly, and crucially, further efforts are needed to rebuild and strengthen the productive capacities of the population through

resilience focused activities. Such measures crucially include efforts to improve local food access and affordability, particularly among displaced families and host communities, and to repair damaged rural infrastructure where security permits, including irrigation canals, water troughs and market roads.

### 3. Information Gaps

- At present there are no comprehensive assessments available with consistent data from the entire country from which the food security situation can be adequately and consistently derived as per Food Security indicators. There is also not enough information on livelihoods inside Syria at present.
- While a more comprehensive assessment, both in depth and coverage, is required to improve the information available on food security and livelihoods, lack of reliable population data will persist as there is currently no sufficient methodology to account for internal displacement figures.
- The severity scale provided attempts to combine a number of standard indexes into a single question and is based on 'best available data.'
- Gender, age, disability, protection mainstreaming and Accountability related analysis is scanty.

<sup>117</sup> MSNA Validation Report



## HEALTH SECTOR

### 1- KEY HUMANITARIAN NEEDS

- Improved access to trauma and injuries care for a projected 1,500,000 injured by end of 2015 since the onset of the crisis.
- Continued support to the Expanded Programme on Immunisation (EPI) to enhance vaccination coverage and improve herd immunity, particularly for measles and polio.
- Improved access to medicines, medical supplies and equipment as per the Essential Medicines List (EML) 2014/2015.
- Strengthened and coordinated preparedness, surveillance and response to outbreaks of communicable diseases.
- Increased access to a package of health care services for the IDPs and host communities including Reproductive Health, Child Health, Communicable and Non-communicable diseases, basic mental health services and nutrition.
- Enhanced support to NGOs, CBOs, and the private sector to provide services, including referral services in hard-to-reach areas.
- Strengthened health information system to strategically guide sector planning, prioritization and decision making.

### KEY CHANGES IN HUMANITARIAN NEEDS

The fourth year of the crisis in Syria continues to disrupt the health system despite concerted efforts by humanitarian aid agencies to alleviate the health impact on the people of Syria. The effect of the crisis continues to adversely impact the health system across the country. Access to health services is critically hampered resulting in low uptake of health care delivery, thus worsening an already existing high burden of different types of diseases and injuries. Furthermore, the private sector which hitherto provided medical services to about 50%<sup>118</sup> of the population has also been constrained by the crisis as most private health service providers have either been displaced or left the country for several reasons including financial benefits, constant attacks and/or safety concerns. There is an acute drainage of health professionals; consequently, prices of available services have shot up beyond the reach of average Syrians.

The Economic and Social Commission for Western Asia (ESCWA) report (September 2014), indicated that Syria was most adversely affected in 2013 since the inception of the crisis in 2011. The lower poverty rate, which according to Syrian Centre for Policy Research was 12.3% in 2007, increased to 43% in 2013 and is projected to reach 60% by 2015 if the crisis continues. This figure would reach 89.4% when using the upper poverty line. This is consistent with the findings of the recent assessment of the Primary Health Care (PHC) services which indicates an increase in the workload of 50% of public health workers in public health centres due to displacement of populations to safer areas. According to ESCWA report (September 2014), the achievement of the Millennium Development Goals (MDGs) which was on track for achievement by the year 2015, has not only derailed but become impossible due to the ongoing crisis. The reduced capacity of the public and private health facilities to provide basic health services to the population contributes to increased mortality and morbidity, higher risk of outbreaks of communicable diseases, increased risk from vaccine-preventable diseases, and increased vulnerability to mental ill-health, psychosocial distress and disorders. In addition, incidences of malnutrition and complications of chronic diseases are on the increase and deteriorating child and reproductive health outcomes are reported.

<sup>118</sup> MOH, National health Account data, 2010



The level of destruction sustained by the Syrian public health system has resulted in United Nations Relief and Works Agency (UNRWA) becoming the sole provider of healthcare for most Palestine refugees in Syria, putting additional pressure on already strained services. The destruction of facilities and drainage of qualified health staff, combined with higher costs of medical supplies, hospitalisation services and reduced options for referral continue to severely impact UNRWA's capacity to provide adequate health services to the 560,000 Palestine refugees still residing in Syria.

## Population in Need

With an estimated 12.2 million people in need with 7.6 million Internally Displaced Persons (IDPs), the number of people in need has increased exponentially and their suffering has also been worsened by the limited access to health services and medicine. As an example, 35% of assessed sub-districts (45 out of 127), reports life-threatening health problems, out of which 10 are in the highest severity category, five (5) in the critical life-threatening problem, 8 are rural areas, with half of them in Aleppo and half in Al-Hassakeh.(MSNA)

## Vulnerable Groups

Children under 5 are considered to be the age group most at risk of health concerns, especially in rural areas, followed by the elderly (60+ years) and children between the ages of 5 and 12 years. Ranking vulnerable groups generally, the chronically ill, persons with disability and child-headed households were identified as being the most vulnerable social groups at risk of health concerns<sup>119</sup>.

Moreover, women need to access all health care services, including reproductive health services, antenatal care, emergency obstetric care, breastfeeding promotion, prevention and management of gender-based violence (GBV) and identification of protection threats.

Men in particular need access to trauma care, psychosocial and mental health services. IDPs and host communities should have access to communicable diseases preventive services including awareness campaigns and hygiene support.

Besides this, extreme stress on infrastructure systems and severe deterioration of urban functionality has left many towns without social and public health services. These systemic disruptions have also become a cause of further displacement.

## Communicable Diseases and Immunisation

According to MoH data, coverage of OPV3 in pre-crisis period in 2010 was 99% but dropped sharply to 68% in 2012 due mainly to the disruption of critical components of health service delivery including destruction of health facilities, attrition of health staff, damaged cold chain equipment, irregular supply of electricity, shortage of vaccines and lack of incentives for outreach services by the mobile teams.

Consequently, twenty-five (25) cases of polio were confirmed in Deir-ez-Zor governorate, five (5) in Aleppo, two (2) in Al-Hassakeh, and three (3) in Idlib in 2013; precipitating a multi-country response to contain the outbreak. Prior to this, the last case of polio was reported in Syria in 1999.; precipitating a multi country response to contain the outbreak. Nine (9) polio vaccination campaigns were conducted to contain the outbreaks since November 2013. As a result, only one laboratory confirmed case of polio has been reported since January 2014 in Hamah. Independent monitoring data for August 2014 showed that vaccination coverage reached 93% as reported by the parents and 86% evidenced by the presence of finger mark on each child.

Yet, according to Syrian MoH, it is expected that 150,000 may not have been accessed in hard-to-reach and besieged areas due to insecurity.

<sup>119</sup>Multi-Sectoral Needs Assessment, SAMI, September 2014 [Of note, the study covered only 127 sub-districts out of a total of 294 in the country]

Acute Flaccid Paralysis surveillance recorded an improvement as non-polio AFP rate improved from 1.7 per 100,000 in 2013 to three (3) per 100,000 in 2014 at the national level. The rate of adequate specimens improved from 68% in 2013 to 91% in 2014. Nonetheless, AFP surveillance needs to be reinforced to promptly detect any possible case of wild polio virus.

The decrease in the routine vaccination in hard-to-reach areas has resulted in confirmed outbreaks of measles and pertussis. Between January and September, 2014, more than 10,000 suspected cases of measles were reported from EWARS/EWARN sentinel sites across the country, mostly reported from Deir ez-Zor, Aleppo and Ar-Raqqa. Pertussis outbreaks were detected in January 2014, in Deir ez-Zor and Ar-Raqqa governorates due to the low coverage of DPT vaccination and it is still ongoing. This would also raise a concern about potential outbreaks of other vaccine preventable diseases such as Diphtheria.

Water-borne diseases are on the increase due to the deterioration of water and sanitation services particularly in Aleppo, Rural Damascus, Deir-ez-Zor, Idleb, and Yarmuk camp mostly inhabited by Palestinians inside Damascus. Typhoid fever outbreaks and a significant increase in the number of diarrhoeal diseases were registered. Response measures took place in most of these locations; however, sustainable interventions need to be considered in close coordination with the WASH sector.

Cutaneous Leishmaniasis is endemic in Syria and showed a remarkable increase from 40,000 cases in 2012 to 71,996 cases in 2013 with Aleppo, Idleb, Deir ez-Zor and Hama reporting the highest number of cases. More consolidated efforts are needed to secure medicines for the population in need and to distribute Long Lasting Impregnated Nets (LLINs) in the affected areas. It is estimated that 750,000 Ampules of Glucantime would be needed for 2015.

### **Noncommunicable Diseases (NCDs):**

Prior to the crisis, the Syrian Arab Republic was in epidemiological transition, whereby communicable diseases were diminishing and giving way to lifestyle and age-related chronic illnesses such as hypertension, diabetes and cancer.<sup>120</sup> Within the current context, however, lack of access to care and medicines increases the complications related to NCDs, worsens the prognosis and decreases the survival rates. No recent update is available on the prevalence of different types of NCDs, however, anecdotal data indicate a high prevalence of diabetes, hypertension, cardiovascular diseases and asthma. A community based survey is required to identify the burden of NCDs and to guide the planning of control measures accordingly.

In some governorates (Damascus, Latakia, As-Sweida and Hama), MoH has initiated an integrated approach to ensure adequate management of NCDs within PHC facilities. There is a need to expand this approach in all governorates especially in hard-to-reach areas. This includes building/strengthening the capacity of PHC providers for diagnosis, management and referral of NCDs.

### **Trauma and Injuries:**

The number of people injured continues to rise due to escalating violence and extended hostilities. It is estimated that over 191,000 people have been killed, and almost 1 million people injured since the beginning of the crisis in Syria (UNOCHA 2014). This number is expected to rise to 1,500,000 by end of 2015. An assessment of Dara'a governorate in January 2014 showed that the most reported health problems are conflict-related (24%)<sup>121</sup>, with 20% of sub-districts assessed in Area of Origin (AoO) data state injuries as the most important health concern<sup>122</sup>.

Health agencies continue to provide lifesaving medicines, supplies and surgical kits.

These efforts, however, are compromised by lack of surgeons, orthopaedics, anaesthesia specialists and the worsening security situation that impedes access. There is a critical need to

<sup>120</sup> MOH registered 15,107 cancer cases during 2008-09 compared to 10,555 in 2002. The incidence rate was 76/100,000 population (National Cancer report, 2011). Diabetes mellitus, had an estimated prevalence rate of 9.8% of the population, is the most prevalent non-communicable disease (National Diabetes Programme Statistics, MOH, 1998).

<sup>121</sup> Dara'a governorate MSNA, January 2014

<sup>122</sup> Area of Origin Assessment, UNOCHA regional August 2014



rehabilitate emergency points and theatres in over-stretched but less volatile areas. Due to sanctions, the national Blood Bank faces shortage of supplies required to ensure safe blood transfusions. Hard-to-reach areas are reporting severe shortage of safe blood products and supplies as the national blood bank cannot reach many of the hard-to-reach areas

Injuries arising from conflict, particularly those that are not promptly treated are the main causes of disabilities. No figure is available, but anecdotal information suggests that high prevalence of disabilities occur amongst the injured particularly in areas of high conflict. The delay in management is mainly due to restricted access to health care services and limited funding. A National Plan for Prosthetic Devices and Artificial Limbs across Syria is under development.

## Mental Health

Based on WHO estimation of the percentage of mentally affected people during crises (World Mental Health Survey 2000), about 3-4% (i.e. approximately 600,000 persons) of the Syrian population would be suffering from severe mental disorders; another 20% (i.e. approximately 4,000,000 persons) are expected to be suffering from moderate mental disorders, while 20-40% would be experiencing mild psychological distress.

Currently, only two public hospitals and one referral centre in the country provide specialised mental health services. Only 10% of PHC centres provide basic mental health services. MoH data indicate that the number of persons seeking mental health services is increasing, especially those suffering from depression, anxiety, psychosis and stress related conditions. It is imperative to build the capacity of the general physicians working in non-specialised health care settings on the management of five priority conditions: stress related conditions, depression, psychosis, suicide and other unexplained medical complaints in order to overcome the shortage of mental health professionals at PHC levels.

## Reproductive Health

Among the 12.2million affected people (UNO CHA), **3.05** million are at the reproductive age and 488,000 are pregnant women. As a result of the crisis, many public health facilities providing Reproductive Health (RH) care services, including emergency obstetric care are either damaged; suffering from shortage of essential medicines, supplies (including contraceptive) and equipment; or are difficult to access. Sixty-three percent (26 out of 41) of public Basic Emergency Obstetric Care Centres are non-functional<sup>123</sup>. The barriers women experience in accessing RH care services include lack of information about where and when to seek care, difficulty in access to health facilities, and high cost of services where available and accessible; all of which jeopardize timely interventions, particularly for safe delivery. Prior to the crisis, Caesarean-section rate was 26.4%<sup>124</sup> nationally. Currently, this has increased to 45% in some hospitals in 2013<sup>125</sup>. According to the ESCWA (September, 2014), maternal mortality rate has increased to 62.7 deaths per 100,000 births in 2013 compared 58 deaths per 100,000 births in 2010 as a result of poor RH services.

At the health facility level, cultural sensitivity remains a concern in delivering RH services due to the limited number of female health workers. In over 32% of the public PHC centres<sup>126</sup>, services are provided in shared rooms where the issue of privacy is of utmost importance, especially when dealing with women and children seeking adequate and dignified medical support after surviving GBV.

<sup>123</sup> Primary Health Care Centre Assessment, MoH and WHO 2014

<sup>124</sup> Family Health Survey, 2009.

<sup>125</sup> Reproductive health report on Al-Tawleed Maternity Hospital, MOHE and UNFPA 2014

<sup>126</sup> Primary Health Care Centre Assessment, MoH and WHO 2014

## Malnutrition

The nutrition sector conducted a Rapid Nutrition Assessment (RNA)<sup>127</sup> in all governorates in 2014 except Ar-Raqqa in an effort to enhance analysis and inform response. The results of the RNA revealed a Global Acute Malnutrition (GAM) rate of 7.2% and Severe Acute Malnutrition (SAM) rate of 2.3% indicating a 'poor nutrition situation' based on WHO's classification. Governorates of Al-Hassakeh, Hama and Tartous demonstrated the highest SAM rates (>3%) while Aleppo, Damascus, Deir ez-Zor, Quinaitra and Rural Damascus showed SAM rates of >2.5%. The RNA also showed high rates of stunting among IDP children at 22.3% with the severely stunted at 7.9%. The percentage of underweight was 13.8% including 3.6% severely underweight. A comparison to the last nationwide survey could not be made since this assessment was only carried out among IDPs in formal and informal shelters and concentration areas only.<sup>128</sup> Stunting, lack of food diversity and an increase in the number of consultations for anaemia have also been reported through the 2014 Multi-Sectoral Needs Assessment (MSNA)<sup>129</sup>.

## Critical gap in health care delivery:

### Primary, Secondary and Tertiary Health Care:

The PHC centres assessment conducted across the country indicated a high workload in over 50% of the functioning health centres. Furthermore, electric shortages were reported in more than 40% of the centres and only 12.3% of the facilities had functioning generators.

According to the latest report from HeRAMS, 21% (376) of the health centres were partially functioning and 18% (311) were non-functioning, while 35% (38 out of 109) of the public hospitals were reported as partially functioning and 22% (24 out of 109) were completely out of service<sup>130</sup>.

## Health Accessibility

Accessibility to health facilities has significantly deteriorated. A quarter of the public hospitals and one-fifth of the public health centres have been reported as inaccessible, especially in contested and hard-to-reach areas<sup>131</sup>. Moreover, 75% of areas assessed reported a decrease in functionality of health facilities<sup>132</sup>. The Multi-Sectoral Needs Assessment revealed that some patients have to travel 20 - 160 km to reach the nearest hospital as most are located in the centre of the sub-districts<sup>133</sup>.

## Health Service Availability

Lack of medical staff, medicines and medical equipment were consistently observed across 10 governorates, especially in rural areas<sup>134</sup>. Twenty-five percent (25%) of areas assessed reported in AoO data cite these causes as a reason for the decrease in functioning health centres<sup>135</sup>. Sixty-eight per cent (68%) of public PHC Centres require urgent medication and 60% for equipment as reported in the PHC Assessment, 55% of public hospitals are reportedly not functional or functioning partially due to shortage of staff, equipment and medicine<sup>136 137</sup>. Further infrastructure damage and logistic constraints impeded delivery. Forty per cent (40%) of public PHC centres reported significant disruptions or lack of electricity and only 12.3% reported having a functioning generator<sup>138</sup>, whereas 9% of areas according to AoO data indicated lack of

<sup>127</sup> Rapid Nutrition Assessment, UNICEF, 2014

<sup>128</sup> Rapid Nutrition Assessment, 2014

<sup>129</sup> Multi Sectoral Needs Assessment 2014

<sup>130</sup> HeRAMS Report, September 2014

<sup>131</sup> HeRAMS Report, September 2014

<sup>132</sup> Area of Origin Assessment, UNOCHA regional August 2014

<sup>133</sup> Multi Sectoral Needs Assessment 2014

<sup>134</sup> Multi Sectoral Needs Assessment 2014

<sup>135</sup> Area of Origin Assessment, UNOCHA regional August 2014

<sup>136</sup> Primary Health Care Centre Assessment, MoH and WHO 2014

<sup>137</sup> HeRAMS Report, September 2014

<sup>138</sup> Primary Health Care Centre Assessment, MoH and WHO 2014

electricity was the main reason for disruption to health services and 35% due to conflict related damages<sup>139</sup>.

## Availability of Health Workers

Analysis of the availability of health workers (medical doctors, nurses and midwives etc) per 10,000 population by governorate showed that in nine (9) governorates, health workers per 10,000 population is > 22 which is below the global standard and eight (8) of them are below 30% of the global standard<sup>140</sup>. The depletion of qualified health staff has caused not only a dearth in availability of health personnel and overwhelming of existing staff resources, but also an increase in task shifting whereby unqualified staff perform specialised duties (MSNA, SINA 2013)<sup>141 142</sup>.

Wide disparity exists between male and female health workers – doctors. Currently, there is 71% male versus 29% female doctors. Lowest proportions were in Ar-Raqqa and Deir ez-Zor, further challenging vulnerable female patients to access necessary health care, especially in some areas where male doctors are not allowed to treat or examine female patients<sup>143</sup>. Moreover, the capacity of emerging local NGOs is limited in healthcare delivery, and thus requires capacity building to improve the quality of service provision.

## Availability of Medical Equipment

Hospitals are constrained by shortage or malfunctioning of medical devices/equipment (HeRAMS). Forty per cent (40%) of public PHC centres reported shortages of equipment and 60% have inadequate laboratory equipment. According to the PHC assessment, maintenance service was improper in nearly 50% of the PHC centres with significant problems in three governorates; namely Damascus, As-Sweida and Tartous<sup>144</sup>.

Lack of medical equipment and specifically assistive devices such as mobility aides and wheel-chairs for persons with disabilities were cited as the fourth most mentioned problem in availability of services according to MSNA<sup>145</sup>.

## Medicine:

There is a critical shortage of life-saving medicines and medical supplies, including medications for NCDs such as diabetes, hypertension, asthma, epilepsy and cancer. Sixty-eight (68%) of the assessed PHC facilities reported an urgent need for medicines. The annual estimate as per the priority medicine list for Syria indicates the need to a value of US\$ 300 million as per the EML. Efforts have been made to secure part of the needed medicines during 2014 that covers 6.16% of the estimated needs.

Moreover, the imbalance between the Syrian pounds and US\$ has negatively impacted on the ability of the population to pay for medicines, especially the most vulnerable IDPs and families in hard-to-reach areas. Besides, there is significant rise in the price of medicines (25% - 50%).

## CHALLENGES

Several challenges are encountered in the course of delivering health services in the current emergency situations. Below is a snapshot of the key challenges.

<sup>139</sup> Area of Origin Assessment, UNOCHA regional August 2014

<sup>140</sup> HeRAMS Report, September 2014

<sup>141</sup> Multi Sectoral Needs Assessment 2014

<sup>142</sup> Syria Integrated Needs Assessment, 2013

<sup>143</sup> Multi Sectoral Needs Assessment 2014

<sup>144</sup> Primary Health Care Centre Assessment, MoH and WHO 2014

<sup>145</sup> Multi Sectoral Needs Assessment 2014

## Access

Conflict and violence impede access to many areas, negatively affecting the following activities:

- The provision of medicines and medical supplies including NCD medicines and surgical items;
- Reaching out to under 5 children for vaccination services;
- Timely detection and proper investigation and response to disease outbreaks;
- Capacity building and supervision of the health staff in some areas;
- Supporting the NGOs operating in hard-to-reach areas to provide proper health services;
- Communication and access to information, e.g. instability of tele-communication network affecting completeness and timeliness of data sharing and reporting.

## Data for planning

Availability of data is critical for planning health intervention programmes in emergency situations. Collection, collation, analysis and utilisation of updated data to drive programme decisions is often mired by the factors below:

Lack of reliable data on the burden of trauma and injuries and the prevalence of NCDs and other diseases at different levels (national and subnational);

Difficulties in estimating population figures at national, governorates and district levels due to large population movement;

Inability to conduct assessments due to insecurity in some locations.

## Collapsed or affected health system

The impact of the crisis on the health system include:

- Inadequate power supplies for the maintenance of cold chain and sustaining the functionality of the medical equipment at peripheral level especially in the hard-to-reach and besieged areas;
- Shortages of qualified health personnel;
- Lack of essential medicines including medicines for cancer, factor VIII, kidney transplantation medicines and those for cardiovascular diseases, etc. within the limited available resources. Previously, these were provided free of charge by the health authorities.

**Bureaucracy and regulations:** Strict procedures and protocols are required to execute simple tasks. These include:

- Bureaucratic procedures and delays in obtaining facilitation letters government authorities required for the movement of medicines and medical supplies;
- Strict regulations and lengthy processes related to medicines procurement (including for the blood and blood products and narcotics) hinder timely response;
- Complex procedures related to the procurement of vaccines impede the efforts to address shortage of vaccines and increased related cost.

## Increased cost of operation

- Depreciation of the Syrian pound against foreign currencies, coupled with unpredictable fluctuations in the exchange rate of the USD against Syrian pounds;
- Increasing costs for additional security measures such as procurement and use of AVs, SRF for windows, cost-sharing for common UN premises etc.

## Opportunities

- Strong partnership and standing agreements with Syrian Arab Red Crescent, INGOs and private sector;
- The increased level of trust between the humanitarian actors and relevant stakeholders;
- The high level commitment for Global Polio Eradication Initiative;

- Presence of facilitators and focal points in different governorates recruited and trained by the humanitarian agencies;
- Moving towards field and more decentralised operation through the UN hubs in Homs, Tartous, Qamishly, and Aleppo.

### Lessons learnt

- Monitoring the quality of humanitarian response, by a third party, provides an opportunity for objective evaluation;
- Increasing partnership and collaboration with NGOs have a great effect in improving the outcome of the response efforts and reaching population in need;
- Networking and coordination among different NGOs operating in the same areas are crucial to optimize the use of the limited resources (e.g. adopting a referral system among different NGOs);
- Expanding partnerships with private sector for the provision of health services improves access to health care for the affected population;
- Needs assessments provide data which inform response planning and decision making (PHC needs assessment, Rapid Nutrition Assessment);
- Obtaining information about the exact model and specifications of equipment and medical supplies facilitates the procurement process and ensures acceptance and suitability of the delivered items;

The decentralised presence of UN agencies is critical to improving quality and timely response as well as monitoring and reporting.

## NEEDS ASSESSMENTS

- HeRAMS, Q2 report 2014
- Assessment of the PHC services in Syria, Sep 2014
- Multi Sectoral Needs Assessment, SNAP 2014
- AoO Assessments, Regional OCHA, August 2014
- The Rapid Nutrition Assessment mid-2014
- ESCWA report “ The conflict of Syria, implications on the Macro-economy and MD” Sep 2014
- EPI/MOH data on vaccination coverage 2014
- EWARS data 2014
- Essential Medicines List 2014
- Inputs obtained through UNFPA monitoring mission missions and data collected to cover the gaps on information

Anecdotal evidences and feedback obtained through different implementing partners World Mental Health Survey 2,000

## PRIORITY NEEDS AND SPECIFIC GROUPS

**(e.g. women, girls, boys and men, the displaced, host populations)**

While all populations have the right to receive appropriate health care, the priorities vary among different groups and across the regions. Below are highlights of added needs for specific groups:

Women: Access to Reproductive Health (RH) services including antenatal care, Emergency Obstetric Care, support to pregnant and lactating women, prevention and management of GBV, access to services by survivors of GBV, identification of protection threats, gaps of services provided to older persons especially older women.

Nutrition, women and girls empowerment



Girls: Access to health care services, Adolescent health services and protection against GBV and mental health services, access to information on services provided, women and girls empowerment

Boys: Access to health care services, Adolescent health services and protection against GBV and mental health services.

Men: Access to health care services, particularly trauma and injuries care; psychosocial and mental health support for men; services provided to older persons especially older men.

People with disabilities: huge gaps in services provided and access to health care.

Host communities: Preventative services for communicable diseases including surveillance and preparedness, awareness campaigns, hygiene support.

Displaced populations: Free-of-charge life-saving service delivery, vaccination, prevention services for communicable diseases including surveillance and preparedness, awareness campaigns, hygiene support.



## Nutrition Sector

The Syria nutrition sector has been consolidating evidence on the nutrition situation to design relevant responses. Nutrition surveillance activities alongside intervention have been ongoing, guided by the sector nutrition strategy developed in 2013. The interventions are implemented by the Ministry of Health (MoH), Syrian Arab Red Crescent (SARC), Non-Governmental Organizations (NGOs) with support from UN agencies.

### Nutrition Situation Analysis

According to the Syrian Family Health Survey (2009), the nutrition situation of children under the age of five was poor. An estimated 23 percent of children under-five were stunted, 9.3 percent wasted and 10.3 percent underweight. A trend showing deterioration can be noted from the pre-crisis data available.

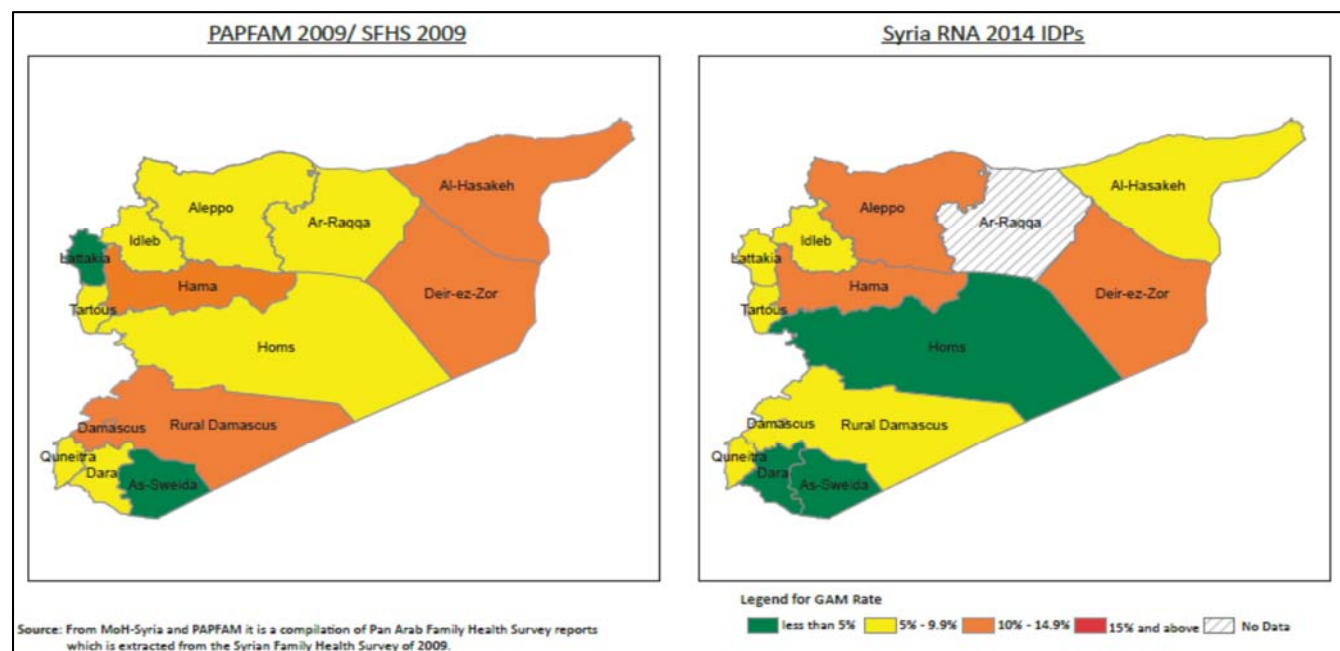
Nutrition Status of U5 children			
Indicators	2000	2006	2009
Underweight	6.9%	9.7%	10.3
Stunting	19.3%	22.4%	23%
Wasting	3.3%	8.6%	9.3%

Exclusive Breastfeeding stood at 42.6 percent while the proportion of newborns introduced to breastfeeding within their first hour was 42.2 percent (SFHS, 2009). Micronutrient deficiencies were also recorded in Syria, presenting risks for sub-optimal growth among children; e.g. anemia prevalence among 0-59 month old children is 29.2 percent (MOH, nutrition surveillance system report 2011), 8.7 percent is the

Vitamin A deficiency rate (MOH, 1998) and 12.9 percent is the iodine deficiency prevalence (MOH, 2006). Maps of the Global Acute Malnutrition (GAM<sup>146</sup>) prevalence/ rate are presented below showing the latest available analysis on the nutritional vulnerability. The Syria Family Health Survey (2009) shows the global acute malnutrition rates as of 2009 while the Syria RNA 2014 map shows the global acute malnutrition rates for the IDPs in July/Aug 2014. The two maps should not however be directly compared as they represent the situations at different times and context while the rapid nutrition assessment (RNA) only considered internally displaced populations.

<sup>146</sup> Global acute malnutrition is a nutrition indicator for nutrition situation used in emergency context.



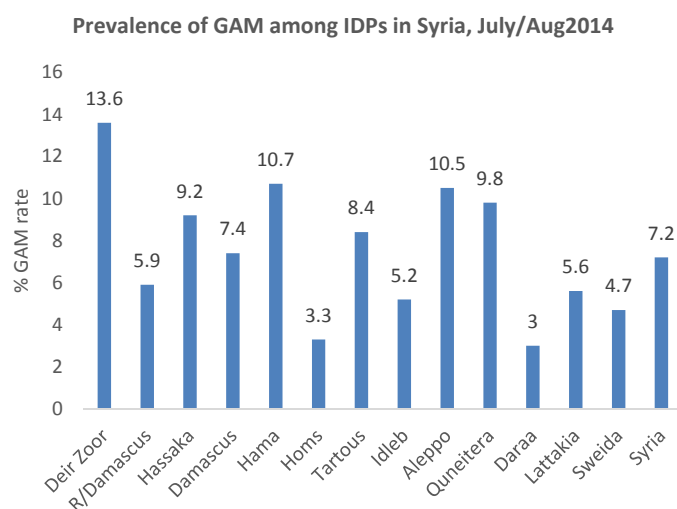


With the ongoing humanitarian situation, there have been indications of worsening food security, sanitation, and health, as well as sub-optimum infant and young child feeding practices. Overall, nearly 4 million women and children in Syria from the local and IDP communities are vulnerable and in need of preventive and curative nutrition services. These include acutely malnourished children, micronutrient deficiencies, sub-optimal infant and young child feeding, children at increased risk of under-nutrition as well as the pregnant and lactating women.

### Impact of the crises on nutrition: Risk for acute malnutrition

The prolonged crisis in Syria has resulted in massive displacement accompanied with a disrupted health system resulting from damaged health facilities, dynamic movement of health workers and shortages in medicines and medical supplies. In addition, IDPs have been living in poor health conditions, overcrowded settings and have had insufficient chances of receiving basic services such as health services and food availability and accessibility.

Based on the population displacement patterns, people in need including IDPs have increased, which has further amplified the risk of undernutrition within the community as a result of deepening economic crises together with underlying factors including poor basic services such as clean water, hygiene and sanitation, health, overcrowding etc.



Given the increased risk of mortality associated with acute malnutrition, a series of Rapid Nutrition Assessments (RNA) on the internally displaced populations in 13 governorates (except Al Raqqa), were conducted between March and July 2014, recording an overall poor nutrition situation, according to WHO categorization for acute malnutrition. The results indicate a global acute malnutrition (GAM) rate of 7.2 percent and severe acute malnutrition rate (SAM) of 2.3 percent (*Ref: Graph for details and maps above*). The governorates of Al-Hasakeh, Hama and Tartous showed the highest severe acute malnutrition rates above 3 percent while Aleppo, Damascus,

Der-E-zor, Quneitra and Rural Damascus showed SAM rates above 2.5 percent. The assessment also showed high rates of stunting among IDP children at 22.3 percent with severely

stunted at 7.9 percent while the percentage of underweight were 13.8 percent including 3.6 percent severely underweight.

There is need for treatment services for the acutely malnourished cases identified and with the insufficient nutrition services in some of the locations, there is a clear concern that some cases of acute malnutrition (alongside micronutrient and stunting) go undetected or are not reached. In order to understand the impact on overall nutrition related morbidity and mortality, the nutrition sector has worked in the course of 2014 to improve the national surveillance system to detect and report on cases requiring curative care and follow up.

### **Deteriorating infant and young children feeding practices**

The poor/sub-optimal infant and young child feeding (IYCF) practices contribute to under-nutrition and the impact of sub-optimal IYCF on undernutrition is greater in the contexts of emergencies. RNA show that only 41.6 percent of mothers continue to breastfeed children up to two years. Reports on infant formula distribution in some locations were reported in 2013 and could still be taking place. These inappropriate IYCF practices contribute to risks of diarrheal diseases among infants, insufficient micronutrient intake as well as stunting in children. It's worth noting that stunting prevalence was on the increase before the crisis hence likelihood for further increase, due to the crisis is feared. There is a need for an Infant and Young Child Feeding (IYCF) strategy and policy in Syria to provide a framework for the ongoing interventions that promote appropriate IYCF practices including dissemination of IYCF messages through different systems employed by implementing organizations or departments, IYCF trainings for MoH and NGOs staff, promotion of the systematic counselling services and ongoing breastfeeding messaging and monitoring and control of breastmilk substitute distribution. IYCF needs to be systematically and fully integrated into CMAM and all other prevention activities, particularly health and food security services to ensure access to a nutrient dense age appropriate foods and antenatal and postnatal care the support optimal child in the first 2 years of life. There is insufficient momentum and progress on the achievement related to IYCF following the crisis, including limited understanding and use of the existing global policies and strategies. Promotion of appropriate IYCF practices, alongside action to support caregivers to access appropriate complementary feeding foods, should be the priority for the coming year. MOH requests technical support in the development of the national IYCF strategy and guidelines.

### **Micronutrient situation**

Though there has not been a recent national micronutrient survey, the above reported rates of micronutrient deficiencies, indicate that there were concerns before the crisis. The deteriorating access to health care services, declining IYCF situation, pockets of food insecurity, etc. have the potential to further worsen the micronutrient situation for the vulnerable women and children.

### **Impact of food insecurity on nutrition and coping mechanisms**

Due to the protracted conflict and economic and financial sanctions, livelihoods are disrupted and family and community coping strategies, which have served as a critical safety net for Syrians since the beginning of the crisis, are eroding thus inevitably leading to the adoption of harmful coping mechanisms such as selling of assets, reducing frequency of meals and buying cheaper food items that are less nutritious. The deteriorating economic activity, access to basic social services and food is also undermining community resilience exposing vulnerable members such as children, pregnant women and lactating mothers to acute malnutrition and exacerbating stunting and micronutrient deficiencies. The poor members of the community and the IDPs are most affected.

A high percentage of IDP families were found to have very little access to protein rich food items such as meat, eggs and milk-based products ranging from 62.9 percent to 41.1 percent. Most available food items consumed were staple foods like wheat including bread and rice (95 percent) and oil and sugar (86.4 – 70.3 percent). The percentage of IDPs who could partially buy food

items and who also had access to food aid was 79.8 percent. Only 14.9 percent of IDPs were living on their own and not receiving any food aid while 3.7 percent of IDPs were completely dependent on food aid. Food aid sources included government, UN partners, and other organizations. Although a high percentage of IDP families (71.2 percent) had adequate food rations for whole families lasting one week, 28.8 percent did not have enough food for even one week.

Almost all families were using different coping mechanisms during periods of food shortage; e.g. 82 percent of the families were purchasing cheaper food while 70 percent had decreased number and portions of meals; thus pointing at reduced purchasing power of the families. A high percentage of IDP families also resorted to borrowing money and food, selling land and equipment to overcome the food shortage. About 10 percent of families were sending their children to work while another 10.8 percent of families sent their children to other homes to get food.

### **Irregular access to basic services and their potential implication on nutrition**

The main concern of lack of access to basic services to complement nutrition specific intervention is the exposed risk to stunting to children that have been born during the crisis and in general the under-five year old children. The number of IDPs moving from Al Raqqa and Deir-ez-Zour to secure areas in other governorates due to the escalation of the fighting and air strikes has dramatically increased. This is in addition to the large number of people who crossed the border into Turkey. Al Hassakeh governorate also experienced displacement within and refugees crossing the border from Iraq. In other parts of the country such as Homs, Rural Damascus and Aleppo governorates, the number of IDPs has been increasing due to the fighting. As a result of displacement the number of women and children exposed to acute malnutrition, exacerbating micronutrient deficiencies and stunting, may rise due to restricted access to basic services such as health, water and hygiene sanitation which has direct link to nutrition.

The burden on the host community has been increasing as a significant proportion of IDPs are living within the host community, thus increasing the burden on host communities, who are equally suffering from the consequences of the conflict. Recently, some of the governorates have been receiving large number of IDPs such as Idleb receiving around 30,000 IDPs from areas of Hama that are experiencing fighting, while places like Duma in Rural Damascus also has large number of IDPs despite its restricted access to basic services. Tartous, Lattakia and Aleppo are also hosting significant number of IDPs.

These food security challenges alongside the declining health, and water and sanitation situations have the potential to further depress the already poor nutritional conditions. There is a need to promote an integrated response to reduce nutrition vulnerability and maintain low prevalence of malnutrition. This includes delivery of a package of nutrition, health, water and food to women and children, and provision of shelter for protection from harsh weather, as well as to provide privacy to continue breastfeeding.

### **Nutrition surveillance for close nutrition situation monitoring**

There is a clear need for close monitoring of the nutrition situation and the major influencing factors through health facility based screening, rapid assessment in IDP camps or on populations of high nutrition vulnerability, formative research to where possible to establish child feeding and coping mechanism and where possible undertaking a comprehensive nutrition survey. This will inform the response as well as facilitate early detection and referral of malnourished cases from the community. Quality nutrition data on the population in hard to reach areas or besieged areas is urgently needed.

Prior to the conflict, in 2009, a national nutrition surveillance system was established to regularly report on acute and chronic malnutrition (stunting) among children under five years of age visiting health facilities during their routine immunization. The system also provided parents with

information and a service to monitor child growth. However, with the health system damaged during the conflict and the subsequent shortage in nutrition personnel, the national nutrition surveillance system has suffered in terms of quality and coverage and therefore needs to be strengthened.

### **Information management gap and limitations**

The nutrition sector has faced challenges in receiving credible nutrition information on the status of women and children and response coverage from inaccessible areas. In addition, receiving data from the few programmes implemented in those areas also proved to be difficult.

In the course of 2014, the nutrition sector trained partners on nutrition data collection tools including surveillance, Community Management of Acute Malnutrition (CMAM) and Infant and Young Child Feeding (IYCF). The nutrition sector is collecting nutrition surveillance data from health facilities and screening data from communities. However, there is a great need to improve the quality of data collection from health centers and create capacity to analyze the information, in order to better understand the nutrition situation and related trends and help guide nutrition programming and assess progress on response coverage. Capacity to facilitate a systematic response data submission from programme sites, its entry and analysis and feedback to inform programmes is critical.

### **Response Capacity**

At the beginning of 2014, there were limited numbers of trained partners with the capacity to carry out technical nutrition interventions throughout the country. Most of the response was based on blanket supplementary distribution in view of the limited capacity to facilitate more targeted responses that would require nutrition screening. The Syria nutrition sector managed to address some of the technical capacity gaps for partners including but not limited to local NGOs (SARC, SFPA, Al Taalouf, Al Batoul and Al Birr), one international NGOs (IMC), UNRWA, MoHE and MoH staff on aspects of CMAM, IYCF and Surveillance. Despite the effort, the technical capacity within the country is still insufficient as focused governorate level capacity strengthening on IYCF, micronutrient and CMAM intervention are yet to be delivered in governorates. In particular, there is urgent need for capacity strengthening in CMAM, IYCF and micronutrient interventions. In addition to having extracts of the international guidelines availed in Arabic for easier reference by the health workers.

The nutrition sector had only 11 partners at the beginning of 2014 but the number of partners participating in nutrition related activities has increased to 24. Their ability to access some highly vulnerable population and their capacity to expand are limited, particularly due to security restrictions and the ongoing active conflict in many parts of the country. Absence of international NGOs with technical nutrition experience further constrains capacity development and effective and efficient implementation of nutrition interventions throughout the country. While capacity strengthening continues, advocacy for more INGOs and CBOs need to be pursued.

In 2015, the Nutrition sector will endeavour to address the above technical gaps on nutrition through strengthening capacity of nutrition response with a focus on partners with outreach and community activities to better serve populations in need in hard to reach and contested areas. Partnerships need to be fostered within and across sectors in order to scale up both the nutrition and the integrated response.

### **Way forward**

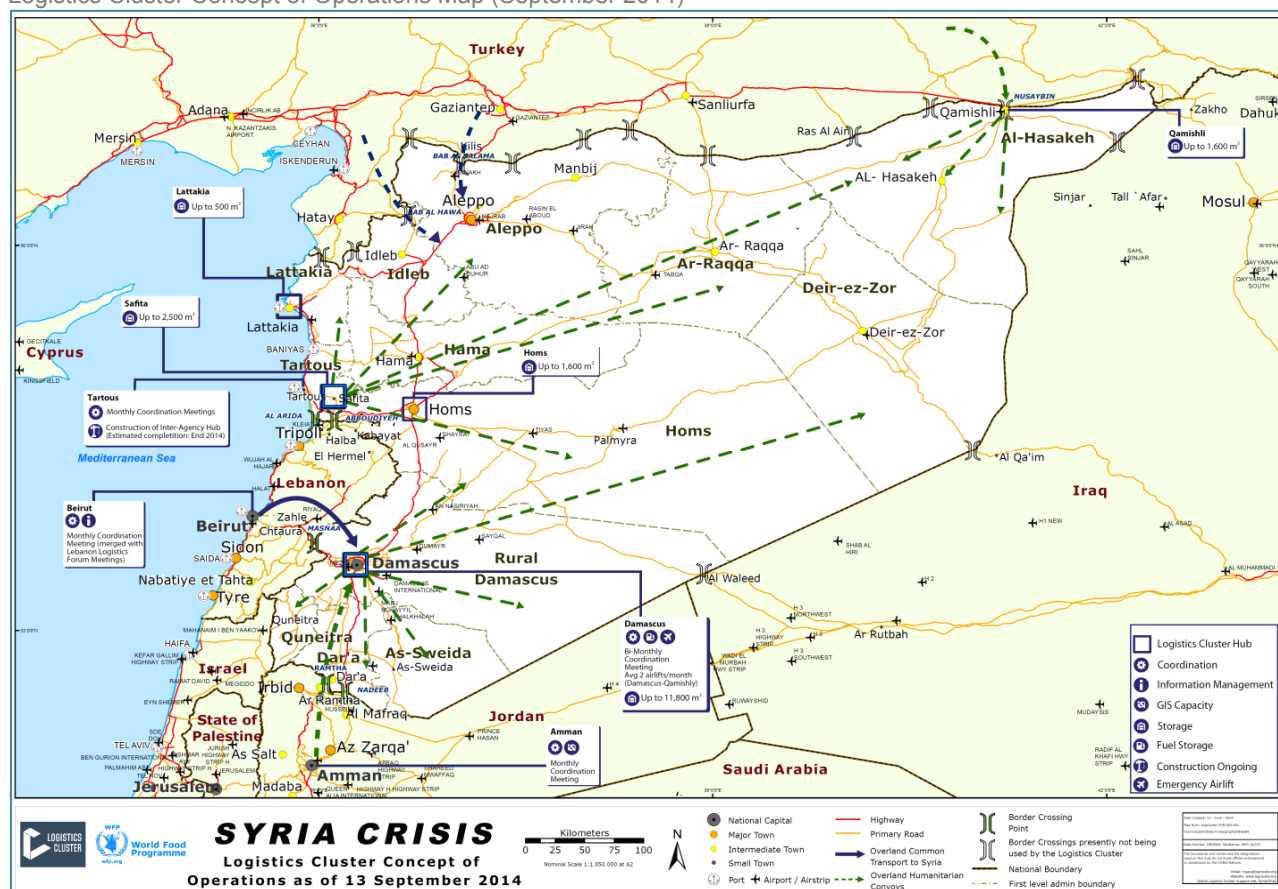
The priority technical and strategic areas of focus include strengthening the nutrition surveillance system for in-depth understanding of the situation and monitoring of the situation, as well as investing on preventive nutrition services (IYCF, micronutrient and promotion of multi-sectoral integration) to avert further deterioration. The screening activities conducted will facilitate identification and treatment of the acutely malnourished cases.





## Logistics:

Logistics Cluster Concept of Operations Map (September 2014)



## Situation Overview

The Logistics Cluster was formally activated in January 2013 to provide the humanitarian community with a logistical coordination and information management platform, as well as common services to fill logistics gaps in the emergency response for Syria.

The current situation in Syria and the region requires a holistic analysis of logistics needs for the response across several countries, in particular neighboring countries Lebanon, Jordan, and Turkey, and in line with the 'Whole of Syria' approach for 2015. Changing regional dynamics, the unpredictability of regional border crossings; logistics access constraints; an unstable transport market; the evolving security situation, and the need for coordination of an increasing number of humanitarian actors across the region, are some of the key challenges to be met by the Cluster's regional approach for 2015.

## Needs Analysis

The Logistics Cluster operates within an often austere and ever changing security environment, with varying transport routes and access to delivery points. The transport market is precarious, with transporters often refusing to go into certain hotspot areas, or increasing service rates to cover the additional risk. Drivers may often indicate a willingness to go to certain areas one week, but later find themselves unwilling to risk their lives and assets the next. The provision of adequate warehousing solutions is also challenging, as insecurity in certain areas has led to the relocation of storage facilities as and when required, and could expose warehouse facilities to looting and damage in those areas.

Preparations for this unpredictable environment need to include robust contracts set up in a flexible way so that if an area gets cut off from one route, contracts for multiple routes are in place for transporters to reach the target location. In some cases, the insecurity is not on the route itself, but at the destination, requiring strong efforts from all parties involved to achieve success. Warehouse hubs are required across the country, allowing deliveries to continue unhindered even if one or more of the warehouses becomes inaccessible.

There is a need for strong cooperation and close coordination between the government and humanitarian community in 2015, to streamline facilitation/approval procedures to the best extent possible and enhance efficiency of deliveries.

## **Logistics Access (Inside Syria & Regional)**

### **Syria Access – Ports and Roads**

The main points of entry by sea to Syria are the Ports of Tartous and Lattakia located in the northwest part of the country. Overall, Tartous Port has been the principal port of entry for WFP. Due to the crisis, fewer international liners continue to call Tartous Port, and the international port management company which oversaw the management of the port, departed Syria at the end of 2012 as a result of insecurity. The port is currently management by a national company. Organizations such as UNICEF and UNRWA continue to use Lattakia Port as the main entry point for their operations as it is closer to their suppliers in Turkey, resulting in lower costs, and more suited to their programmes and target locations. Given its central location, the port is logistically viable as a staging area to reach locations in both northern and central Syria. In addition, the Cluster/WFP's warehousing Hub in Tartous has sufficient storage capacity to service the current storage needs of the humanitarian community. Brief closures of the Syrian Ports (Lattakia in particular) during the past year have been at short-notice and affected port uplift operations during the period of closure. However, they have generally not lasted more than 24 hours, and therefore have not had an adverse effect on the overall response.

The access situation on the ground has improved in some areas (such as rural Damascus) during the latter part of 2014, partly due the achievement of Joint Humanitarian Convoys. The success of these convoys is an important lever to advocate for unimpeded access to areas not permissible to the humanitarian community. Road access to the northeastern governorates via Damascus (Hassakeh and Deir Ezzour) continues to be extremely difficult however.

### **Commercial Transport - Syria**

Transport costs to governorates such as Raqqa are elevated, mainly as access is not straightforward and alternate routes are longer (more distance covered), thus requiring higher payments to transporters to access locations there. Raqqa often needs to be accessed via routes starting from Damascus or the coastal areas (Tartous/Lattakia) instead of nearby locations. In general, transport to hotspot areas has higher rates due to insecurity along the route and/or at the destination. Sporadic closures along key routes such as the Damascus-Homs Highway (witnessed during the course of the year) also disrupt cargo transport operations. Blockages at areas such as Palmyra severely limit road transport from Damascus to the east and northeast of the country. Emergency airlifts to isolated areas such as Hassakeh governorate are expensive, and such costs could be mitigated via improved road access to the area (such as via the Turkey/Syria Nusaybin crossing).

### **Lebanon Access – Ports and Roads**

The utilization of Lebanon's Beirut Port has gradually increased for both commercial and humanitarian cargo pipelines, presently bearing a significant share of the burden in terms of imports by sea for Syria, and is expected to continue into 2015. The Beirut Port Authority is expanding its Container Terminal in line with the expected increase in cargo. Tripoli Port is also expanding its container handling capacity, and could be utilized more in case of congestion at Beirut Port in the future. It should be noted however, that the security situation in the Tripoli area, prevents Tripoli Port from being considered a valid option for the time being.



Al Masnaa Border Crossing (eastern part of Lebanon) has been the most regular and consistent border crossing point from Lebanon into Syria for the operation so far. However, there have also been intermittent road closures depending on the security situation. The International Highway in northern Lebanon, leading to the 'Al Arida' Border Crossing (to access Tartous/Lattakia in Syria) faced sporadic openings and closures during September and October 2014 due to local protests. Similarly, the main highway leading to the 'Al Masnaa' Border in eastern Lebanon (to access Damascus in Syria) faced several lengthy closures during September and October 2014, requiring diversions of aid cargo via the north when possible. In general, the closures only remained for a brief period and have not significantly hampered the humanitarian operation. However, if the situation in Syria continues to deteriorate with heightened crises at the border areas, possible spill-over into Lebanon could result in some border crossings closing (especially in the north – Al Arida and Abboudiyeh), creating challenges for transport from Lebanon into Syria.

### **Jordan Access – Roads/Ports**

In a situation where the Lebanon corridor faces access constraints, the attention could shift to the Jordan Corridor to Syria as a contingency. This corridor has faced issues in the past due to sporadic openings and closures of the main 'Jaber/Naseeb' border crossing, and lower cost-efficiency for organizations such as WFP. However, UNHCR and UNICEF continue to use this crossing regularly for movement of humanitarian cargo into Syria at present, with some challenges faced in customs clearance for pharmaceutical products. The security situation at the crossing will be a critical factor in determining its use, especially in light of the situation in end-October 2014. Transporters in Jordan have been identified by WFP, and have been successfully used to transport cargo into Syria when required, border access permitting. The transporter roster developed by WFP provides Logistics Cluster participants with options should the need arise. Aqaba Port is stable, and currently faces no congestion. It is not widely used by the humanitarian community for this emergency, but could be utilized further as an alternate Port to Beirut/Tartous if access via the other routes/corridors deteriorates in the future.

### **Additional Corridors of Access**

Despite recent gains, certain locations such as Hassakeh and Deir Ezzour governorates in north-eastern Syria remain inaccessible by road from Damascus. From a logistics perspective, having as many viable corridors as possible into Syria is beneficial. Following Security Council Resolution 2165, the humanitarian community needs to continue to push for aid convoys via the Turkey border crossings of Bab-al-Hawa and Bab-as-Salaam. From Jordan, the use of the Ramtha-Dar'a crossing to southern Syria also needs to continue, especially to reach locations such as Dar'a and Quneitra governorates.

The Nusaybin border crossing is a vital entry point into northeastern Syria, currently the most isolated part of the country. The humanitarian community is currently using this crossing for delivery of food aid to Hassakeh governorate, and must continue to utilize it in 2015.

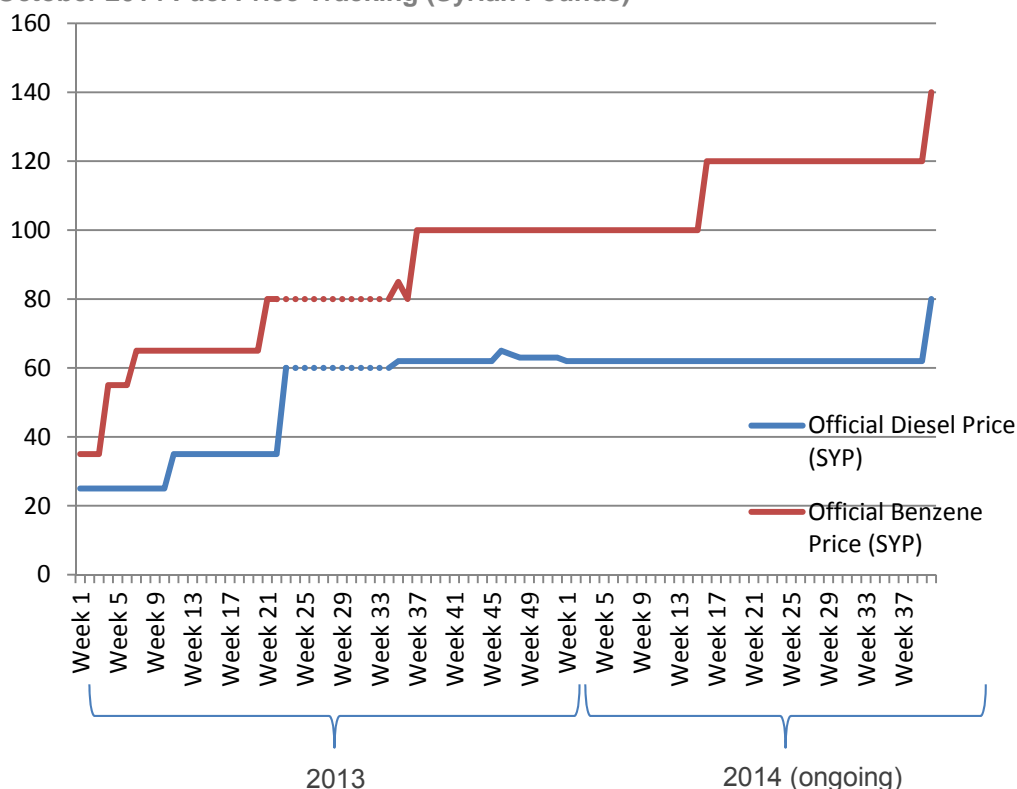
Currently, there are no logistics gaps in Jordan, Lebanon or Turkey. Transporters are available, and there is ample warehousing capacity. There is a need to continue updating regional lists of suppliers and logistics service providers, as a contingency in case of future requirements.

For the Turkey to Syria sea route, at Mersin Port Berths 2, 3, 4, 5 and 6 will be closed shortly for construction work (estimated time of completion is one year, ending by approximately the end of 2015). These berths will be converted into container wharves for deep sea ships (16 m draft). With the port operating at less than full capacity during the construction phase, some congestion is expected in the coming months and organizations planning to use the port will need to plan accordingly. This will affect conventional cargo (bulk or break bulk) only, and container lines services will not be affected in any significant way.

## Fuel

Fuel price fluctuations and shortages have a severe impact on trucking operations. Official fuel prices have increased greatly in the past year. As of October 2014, the official price for diesel is 80 SYP, and the official price of benzene (petrol) is 140 SYP. This reflects a 220 percent increase for diesel and 260 percent increase for petrol over prices at the beginning of 2013. The graph below illustrates the increase in official fuel prices from January 2013 to October 2014:

January 2013 to October 2014 Fuel Price Tracking (Syrian Pounds)



## Warehousing

Warehousing solutions will require continuing flexibility in 2015, as the situation on the ground has resulted in some warehouse locations being rendered inaccessible in the past (e.g. Adra). Common warehousing capacity across the country in line with the humanitarian community's needs, will need to be maintained to store items on behalf of partners, including essential medical supplies, clothes, plastic sheeting, blankets, mattresses, school items, seeds, hygiene kits, soap, and supplementary food. As of October 2014 the average utilisation rate of cluster storage was between 80-85 percent with the current utilization rate set to continue in 2015.

In case of future inter-agency warehousing requirements in the region (Jordan, Lebanon, Turkey), the Cluster has rosters of transporters/warehouse providers available, and will continue to coordinate closely with partners in case storage needs to be augmented. At present, the logistics capacity is sufficient in neighbouring countries to support the response.

## Airlifts

Humanitarian airlifts remain an important transport element of cluster services as a result of access constraints and insecurity along overland transport routes. Damascus to Qamishly airlifts were conducted in 2014 in order to reach the isolated governorate of Hassakeh, and further airlifts will be required in 2015 to reach this location, especially if road access continues to be an issue. One of the constraints this year has been access to Damascus Airport for logistics staff due to the security situation in the surrounding area, which can delay the coordination of airlifts.

## Cluster Strategy Moving Forward

The Logistics Cluster will continue its coordination, Information Management, and provision of common services by WFP as a provider of last resort (land transport, humanitarian convoys,

cross-border convoys, contingency fuel stocks, fuel for winterization activities, airlifts and storage). The Cluster is also gradually moving to a cost-recovery modality for some services, while keeping critical ones such as convoys, warehouse storage and a limited number of airlifts free-to-user.

In 2015, the Logistics Cluster will continue the storage and transport of gender-focused relief items such as Female Health and Hygiene Kits for UNFPA, UNRWA, and UNICEF in support of their gender programmes in Syria. For all its contracts with transporters and storage providers, the Logistics Cluster/WFP includes a specific clause on Sexual Exploitation and Abuse (SEA).

## Priority Needs

Joint Humanitarian Convoys (both inside Syria and cross-border) are a high priority activity, and locations will be selected based on locations identified by the Inter-sector Coordination Group (ISC), and evaluated on the basis of field assessments, SARC Reports, and inter-agency data triangulation. Convoys, as one of the critical activities in 2015, will remain free of cost for the end-user.

**Note:** The Logistics Cluster, as a Support Cluster, fills logistics gaps in emergencies on behalf of the humanitarian community, whilst also providing a platform for coordination and sharing of key logistics information among partners. As such, it does not have direct beneficiaries.



## Shelter/NFI Sector

### 1. Situation of the affected populations

Internally Displaced Persons (IDPs) are typically compelled to leave behind many of their assets and seek shelter. Lack of access to adequate and dignified shelters and basic household items negatively affects the quality of life for IDPs. The intensity and protraction of the crisis lead to the depletion of physical, human and financial resources of all stakeholders, including public service providers, and consequently, to the impoverishment and increasingly dire living environments and circumstances for a larger range of the Syrian population.

The most influential impacts on the Shelter/NFIs Sector are:

- Physically destroyed dwellings as well as other civilian infrastructure;
- Lack of basic household items, and low quality and high prices when available;
- Disrupted livelihood of persons whose houses are destroyed or affected;
- Movement of persons, either due to destruction of their homes or fear:
  - (Multiple) Internal displacement;
  - Refugee displacement across borders;
- Increasing strain on hosts and host communities;
- General impoverishment not only of displaced, but the whole Syrian population;
- Weakening ability of the population to cope with the continued crisis; and,
- Increased dependency of larger populations and social classes on external support and assistance providers.

The evolving and protracted conflict is the main driver for the above.

Some mostly urban or densely populated areas are heavily affected by physical destruction of buildings and infrastructure, resulting in massive outflows of the population. Some places, such as Homs and Rif Damascus, have witnessed return of citizens to their place of origin or places they own. Movements of persons out of areas of origin has created increasing strain on hosts and host communities, often beyond their capacity to physically, financially and durably cope with this additional stress on declining resources.

The intensity of conflict is an important indication of the shelter situation, with areas experiencing frequent fighting in the past three months prior to the assessment indicating higher levels of damage to private homes compared to sub-districts with lower levels of conflict. The lack of goods in the markets is another indicator which is influenced by the levels of fighting, with 85 percent of sub-districts assessed through the MSNA where heavy conflict has taken place reporting availability issues, compared to 65 percent in areas where less fighting was reported. More than half of the IDPs are living in areas with reportedly higher persons in need of shelter assistance, such as Aleppo and Idleb (44 percent and 17 percent respectively) are living in rented accommodation<sup>147</sup>. Also, populations living in besieged areas are unable to access humanitarian aid and lack basic items. When available, the quantity and quality of the items are of serious concern despite the high prices.

Damage to the infrastructure has led to the disruption of the basic public services in the country; in particular water sanitation and electricity have negatively affected the population in general. The primary source of potable water has shifted from wells to distribution of trucked water in many parts of the country (as per MSNA, November 2013 - September 2014). Additionally, depriving people of access to water in numerous ways has been also used as a weapon of war by the parties to the conflict. Consequently, emergency distribution of jerry cans and water tanks took place on several occasions in 2013-14.

Markets have been severely disrupted, preventing communities from accessing essential non-food items. In areas where items are available for purchase, prices have increased due to interruptions in the supply chain, making it difficult for vulnerable families who have lost their sources of income to purchase essential items. The high cost of fuel is also of concern to the displaced population and host communities across the country.

Access to non-food items is also mainly impeded by a lack of money, income or resources which is the priority access concern in almost all MSNA assessed areas (92percent), regardless of whether the area has experienced fighting in the 30 days before the assessment. The exception is Quneitra, where physical constraints to the markets (roads damaged, too far, etc.) and lack of adapted services for persons with restricted mobility ranked higher in the 2 sub-districts assessed. Another exception is Hama, where a security constraint restricting movement to the markets is one of the main priority concerns.<sup>148</sup>

Access to the beneficiaries in need remains a constraint across the majority of Governorates. This creates negative coping mechanisms and further deterioration of the situation. Reduced access to markets in areas of insecurity and weak markets in areas of continued conflict has further strained the humanitarian situation

Palestine refugees have been severely and disproportionately affected by the conflict. The location of Palestinian camps and gatherings on urban peripheries throughout Syria, particularly Damascus, Aleppo and Dera'a, have produced massive levels of displacement among this community, as residential areas became active frontlines in 2012 and 2013. Prior to the conflict, Palestine refugees experienced significantly higher levels of poverty and unemployment than the Syrian population meaning that, in addition to frequent exposure to armed conflict, their resilience and coping mechanisms have been all but exhausted. Throughout 2014, both Jordan and Lebanon blocked all entry of Palestine refugees from Syria, leaving this already vulnerable population with nowhere to flee.

<sup>147</sup> Syria MSNA – Sectoral Profile – SHELTER / NFI

<sup>148</sup> Ibid.

Tens of thousands of Palestine refugees continue to live in areas of active conflict, such as Yarmouk, Khan Eshieh and Qudsaya in Damascus Governorate; Dera'a Camp and the surrounding villages in Dera'a Governorate; and Neirab Camp / Eastern Aleppo City in Aleppo Governorate. These communities live in a state of profound vulnerability, with civilian communities frequently overwhelmed by armed engagements and exposed to life-threatening levels of deprivation.

The overwhelming majority of IDPs are either being hosted by families and friends or occupying unofficial shelters, unfinished buildings and makeshift accommodation in the open air, in addition to informal settlements (e.g. tented camps). Approximately 125 camps on the border with Turkey shelter some 170,000 individuals. There are not enough collective shelters, nor transit shelters. According to the Ministry of Local Administration (MoLA), as of October 2014, there are 977 official collective shelters<sup>149</sup> accommodating 183,270 individuals (34,045 families) which corresponds only 2.40 percent of the total IDPs population (i.e. 7,632,500). It is also clear that structures used for collective shelters since the outbreak of the crisis cannot be made available to host IDPs in the long run, due to the necessity to reconvert them to their original purpose, e.g. schools, or simply due to the fact that they are overused and thus rapidly deteriorate.

Affected populations encounter a variety of needs, according to their specific situations. IDPs not living with hosts or in rented structures are in need of suitable and dignified physical shelters. IDPs living with hosts or in host communities are likely to face constraints to pay rents, public services, or constrain their hosts' living environment or deplete their financial capacity. On the other hand, persons returning to areas of origin may face difficulties in rehabilitating partially damaged structures or in raising funds for purchasing building materials and equipment. Likewise, hosts are prone to face financial and other resource limitations stemming from long-term assistance to IDPs.

Given that most displaced persons fled with very few items and the coping capacity of host communities is increasingly eroding, there is urgent need to increase support to IDPs and host communities, especially vulnerable groups such as women, children, disabled, elderly and Palestine refugees and those living in the open air (e.g. reportedly around 300 displaced families live in the open air without proper shelter). With the upcoming winter, an increasing focus on the provision of lighting and backup electricity solutions as well as basic household items, including winterized items, are a Sector priority.

The lack of jerry cans, clothes (for children), blankets / bedding items, hygiene kits and kitchen sets are the most reported NFI needs. In particular, jerry cans are currently not available in the markets. The availability of items differs from one governorate to another and the needs depend on the kinds of accommodations available (e.g. MSNF outcome shows shortage of child clothing was reported in Rif Damascus, while this was not the case in Quneitra; the main items lacking in Lattakia while jerry cans, bedding items and kitchen sets were available).

People continue to be displaced multiple times, while some started to return to and remain in the places of origin. Among the people who returned to the place origin, it is noted that some family members return in order to see if it is feasible / possible to bring the rest of family members back. Likewise, some family members remain in the place of origin to keep their properties while the rest stay in the places of displacement. This dynamic also affects the needs and planning for the sector.

Similarly, as the conflict enters its fourth year, there is a need to not only assist the newly displaced but also those who have been displaced since the beginning of the conflict. This protracted nature of displacement is expected to affect the needs and planning for the sector in 2015.

The number of people requiring Non- Food Items (NFI) is significantly higher than those requiring Shelter support. Approximately 9,965,000 people are estimated to be in need of NFIs assistance in the country.

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<sup>149</sup> Collective shelters recognized by Syrian Government



Alongside humanitarian needs, increasing gaps in the Shelter/NFIs sector in Syria have raised considerable protection concerns. While the purchasing capacity is being depleted on one hand, those living in remote areas also do not often easily access to market and essential services. Women and children, including unaccompanied or separated children, are considered at particular risk of SGBV, among other protection concerns, while shared, overcrowded accommodation and camps are often poorly lit and set up without consideration to gender issues, while services for survivors are limited. Shelter / camp management, and community initiatives and empowerment require enhancement to address protection issues including SGBV as well as psycho-social welfare for the population. Inter-sectoral responses are crucial in particular, with WASH and Protection, to ensure needs beyond shelter /NFIs to enable the beneficiaries to live in safety and dignity.

Regarding the area assessed through MSNA (114 sub-districts and 12 city-areas out of 272, in Governorates: Hasakeh, Deir-Ezzor, Raqqa, Hama, Idleb, Aleppo, Latakia, Dara'a, Quneitra, Rural Damascus) it indicates that out of a total of 15.6 million people living in 126 sub-districts and areas, 2.7 million are in need of NFI assistance, including 205,000 in acute need, while 1,640,000 people are in need of Shelter assistance, of which 93,000 people are in acute need. Twelve of the 126 sub-districts assessed by the Sector have been ranked as life-threatening, while 14 sub-districts are reported to have a life-threatening NFI situation. Around 84 percent of the assessed population reported moderate need for shelter and NFI assistance. Only a very limited number of the visited areas reported having no needs.

Demographically, the crisis not only affects IDPs but also individual hosts and host communities. Female-headed households, households without breadwinners / working-age family members, including the elderly with small children, are the main vulnerable groups for the Shelter / NFIs sector.

Hard to reach and besieged areas such as Aleppo, Idlib, Ar Raqqa, Al Hassakeh, Deir-e-Zor, Dara'a and Quneitra are most affected by the conflict and in need of Shelter / NFIs support.

Four years of conflict have decimated the resilience and livelihoods of Palestine refugees throughout Syria. Combined with high rates of displacement, vulnerability is anticipated to deepen significantly throughout 2015, without sustained and increased humanitarian funding. In 2014 alone, UNRWA was forced to cut its planned rounds of 12 cash distributions to only four, exposing Palestine refugees to greatly increased threats of deprivation and poverty.

Access to shelter remained one of the most critical humanitarian needs for Palestine refugees in Syria throughout 2014. Over 50 percent (280,000 individuals) of the 560,000 Palestine refugees registered in Syria have fled their homes, with ongoing displacements in the governorates of Damascus, Aleppo, Homs, Hama and Dera'a. The reliance on expensive rental accommodation continued to deplete savings and erode resilience among a community already deeply and disproportionately affected by the conflict. Palestine refugee families were increasingly forced to choose between adequate shelter and other essential expenditures, such as food. Over 10,000 Palestine refugees remained in UNRWA collective shelters throughout 2014.

Palestine refugees continued to suffer chronic shortages of essential NFIs. As a result of very high rates of displacement, most Palestine refugee families have lost both their homes and their possessions, leaving them without access to even the most rudimentary cooking equipment and bedding. Destruction of livelihoods and erosion of savings have left a majority of families without sufficient income to procure essential consumable NFIs with most family expenditures diverted to rental and accommodation costs. Lack of NFIs inflicted intense suffering on Palestine refugees throughout the year with a corresponding increase in vulnerability, particularly in relation to public health and psychosocial wellbeing.

## 2. Information gaps

Currently, figures on affected population, people in need (PIN), numbers of refugees and IDPs, disaggregated per governorate and districts, as well as people/families reached through shelter



and NFI assistance are the most relevant quantified and reliable sources. In addition, the OCHA “Governorate Profiles” provides some information to complement the numeric information. UNHABITAT is working on elaborate city profiles, capturing comprehensive information on settlement patterns, the infrastructure situation, effects of the crisis and consequences, coping options and mechanisms, etc. in several cities.

The most important information gaps related to shelter are:

- Missing numeric information on specific groups in needs;
- Reliable aggregated and disaggregated data referring to population groups, vulnerability, movements, type and degree of vulnerability and d affection, etc
- Quantified geographical distribution of groups in need; Access and trends to be able to plan future service delivery to more areas;
- Access to government information from verifiable sources

Restriction in the conduct of assessments and field monitoring (either through direct/indirect methods) due to access constraints which have limited efforts to provide a comprehensive picture of needs, and periodic assessment of the efficiency and effectiveness of humanitarian assistance.

The comprehensive needs assessment planned since early 2013 is still pending in Syria. An MSNA was conducted by the agencies working in Southern Turkey through enumerators in 126 sub-districts/cities in 8 Governorate. The outcome of the severity scale in the areas where both means were applied show mostly the same in the NFIs sector.

While the sample is rather small, MSNA was conducted in comprehensive manner and is considered to present the situation in the assessed areas. Nevertheless, some shortcomings were indicated such as a small sample of female population. The areas assessed outside MSNA relies largely on the information form and the assessment from the sector agencies with the local community and local agencies working in the respective area. While there are a number of areas where direct access was not possible, the information collection and direct assessment involves the local community and local agencies are considered to provide the overall picture of situation and the needs in the area.

A sector specific needs assessment with the same methodology throughout the country is needed.

## **Operational environment**

### **1. National and local capacity and response**

Communities use a variety of mechanisms to cope with the deteriorating shelter and NFI situation. IDPs often involve themselves in ad-hoc repairs to prolong the life of their tents and minor repairs in the shelters.

There are a number of local agencies and local charities providing numerous support to IDPs and other affected populations. These national partners have hands-on knowledge of the population and its needs as well as the situation in the areas, and are able to work closely with local communities and local councils. Therefore, their reach is essential to continued operations.

However, most of these national agencies are either not registered with the government not allowed to engage with the international organizations. For the distribution of NFIs, given those agencies are formally not able to work with the UN and international agencies, they work under the umbrella of formally recognized local NGOs including SARC, in order to receive the support.

Turkey based National and local support from the Shelter and NFI Working Group is given through close cooperation with International NGOs and the Syrian NGO Alliance. Although there are a number of National actors working directly with the beneficiaries there has been a ‘direct’

disconnect which the Working Group is making strives to change. National staff capacity building will be emphasized until the end of 2014 and moving into 2015.

While cross border operation is conducted largely by international NGOs in Jordan, they rely on their national partners in Syria. Majority of the need assessments is done by local partners who feed the information to international NGOs thus providing vital information for the cross border operations.

In government controlled areas, strict regulations for shelter response make it difficult to provide quick and effective action. This applies for both central and local levels. One major shortcoming is the disconnectedness between central (Ministry) and local (Governorate) levels.

There are a few national NGOs involved in shelter response. During the past three years, the Sector has seen the strengthening of the capacity and lessons learned from emergency shelter response, however, physical response and procedural and management aspects are insufficient. Recently, new actors and NGO partners expressed interest in assisting in shelter response, particularly in urban reconstruction and rehabilitation, where IDPs returning to areas of origin, hosts or both could be considered for assistance. (e.g. cash for work ).

National partners working with Turkey based support are focusing efforts on shelter rehabilitation and refurbishment in urban and rural locations as well as winterization efforts in camps/settlements. Recent efforts have been focused on winterization and emergency weather protection and more focus is being directed towards National partner shelter initiatives and capacity building.

The magnitude of the crisis has impacted the ability for state and single actors to quickly re-establish normality even through reconstruction. Collective efforts by all stakeholders are therefore needed in order to promote effective re-establishment of structures and social systems. In this regard, the private sector, which was previously only marginally involved in shelter response, will play an increasingly important role.

## 2. International capacity and response

There are approximately 10 UN and international agencies working in the Shelter / NFIs sector within Syria. UN Agencies and international organizations/NGOs are thus far the major international players in Syrian shelter response. IOM, UNHABITAT, UNRWA and UNHCR represent international agencies, who each assume different key mandates. This allows coverage of “mainstream shelter activities” – e.g. provision of emergency shelter to specific target groups, but also opens fields for specific objectives as per capacity and key mandates of each organization. In particular, UNHABITAT’s city profiling and assessment works open options for targeted response to beneficiary groups in specific locations. IOM aims to reach moving groups and populations in hard to reach areas, while UNRWA serves one particular group of concern through a combination of tailored interventions.

Currently, there is little, if any at all, direct and bilateral inter-governmental or donor cooperation in the Syrian shelter response. This could be an option to be pursued further, especially in the context of urban rehabilitation as a holistic concept.

Overall operational capacity of NFI activities does not meet the entire sector needs. Mainly, the agencies face the financial constraints to meet their targets. Geographical coverage of NFIs support is higher than the shelter support, and further coordination among the agencies is necessary in order to ensure maximizing the limited resources.

UNRWA retains access to the vast majority of Palestine refugees in Syria through its network of 4,000 national staff in Damascus, Aleppo, Dera’a, Homs, Hama and Latakia. The agency has established the capacity to distribute a broad spectrum of humanitarian assistance across Syria with extreme rapidity, efficiency and operational rigor. However, in an environment of acutely

constrained resources, the wellbeing of Palestine refugees in Syria remains at severe risk and, without consistent funding, may decline significantly throughout 2015.

There are approximately 20 International NGOs based in Turkey working in the Shelter / NFI sector. Although the capacity is adequate to meet the current NFI-related needs in accessible governorates (mainly Aleppo and Idlib), operational capacity is likely to be strained if access constraints are lessened.

The Working Group in Turkey acknowledges the need to shift its assistance to more transitional solutions. Once the transition towards more shelter-oriented interventions takes full effect the overall shelter capacity will need to be strengthened.

Approximately 6 International NGOs provide assistance from cross border in Jordan; they either work directly or through local partners inside Syria. Some of local partners have a relatively large capacity and ensure coordination amongst agencies. Accordingly, no duplication of activities has been noted. However, there are significant gaps in the areas where no assistance was reached.

### 3. Security and access constraints

Security and access constraints remain a major concern throughout all phases of programmes and processes.

Turkey based support has been restricted to Aleppo and Idlib for several months and portions of these governorates are becoming insecure for National counterparts to function in an ongoing manner which is a necessity for programmatic oversight.

Shelter / NFI activities, like any other operational activities, require unhindered access to assess and implement programmes for the intended beneficiaries. Safety and Security needs to be measurable, durable and in place for:

Staff of UN Agencies and implementing partners;

International and National NGOs staff for implementation and monitoring and evaluation efforts,

Partners ability to access to the beneficiaries and the beneficiaries ability to access the support,

Programs themselves,

Assets.

The situation in Syria is volatile, and the accessible areas continue to change with the evolving conflict development; thus the area accessible one day may no longer be accessible the following day. Agencies engaged in both cross-border and cross-line delivery closely monitor the security situation in the areas. A shift in priority areas of assistance may occur depending on the security situation and the consequent accessibility.

Currently, procedures imposed to assess, design, plan, implement and monitor shelter and NFI responses are extremely regulated and cumbersome to be put into practice. While this can partially be justified to ensure protection and security, procedures need to be reviewed and simplified through sector-government interaction. This is a high priority for the shelter and NFI sectors' agenda for the remainder of 2014 and 2015.

The ongoing conflict makes it difficult to draft a common response plan for all of Syria. Therefore, area and population specific schemes and modalities, which will be subject to government approval, will have to be developed and adopted for each planned intervention area.

Remote assistance by the Working Group International partners, directly due to security issues, minimizes Monitoring and Evaluation (M&E) efforts. Therefore the effectiveness of the sector response is difficult to assess. Programmatic shifts are necessary and these shifts are initiated by M&E feedback. Without continuous program monitoring the activities are not able to change concurrently with the situational changes.



## Impact of the Crisis

### Background

Before the conflict Syria had a high drinking water coverage of 92% in urban areas and 86% in rural areas<sup>150</sup>, and of sanitation of 96% urban and 80% rural. This was due to the large number of developed and modern water supply and sewage networks. WASH systems were all state owned and required substantial annual expenses to undertake preventive maintenance and day-to-day operations. These systems were completely reliant on electricity for their operation.

The protracted conflict continues to affect the supply of safe drinking water. According to the Ministry of Water Resources, the total production in all 14 governorates is believed to have dropped to 40%, from 1.3 billion m<sup>3</sup> per year before the conflict.

While the substantial breakdown of infrastructure contributes to reduced amount of drinking water available, demographic shifts & high population movement have also contributed to acute shortages of water in areas with high IDP populations.

### Impact on WASH Infrastructure

The impact of more than three years conflict on WASH infrastructure has been devastating, hampering service provision by disruption to the equipment, spare parts and water treatment chemical supply chains, as well as power supply and Operations and Maintenance (O&M) capacity nationwide.

It is estimated that 80%<sup>151</sup> of water infrastructure is in need of rehabilitation and maintenance. Indiscriminate bombing and shelling in areas witnessing heavy conflict have both left infrastructure inoperable, and prevented access to repair and maintain services.

Major water production and distribution sources being targeted and exploited as weapons of war, an alarming emerging events of 2014 (Aleppo, Damascus, Homs governorate). In the case of Aleppo where water supply was cut off due to political tensions or demands by parties, children and women in their thousands have been queuing for hours at public buildings and private wells to fill containers.

The main challenges for the water authorities to conduct timely repair and systems maintenance are the lack of spare parts, reduced financial resources, access and skilled personnel. Due to sanctions, water authorities are unable to support supply of treatment chemicals, spare parts, generator sets (back up due to power failure), accessories and other vital spare parts which are being imported by humanitarian actors to fill gaps. These limitations are even problematic in areas where access to the water supply schemes is unrestricted. In areas where the conflict is more intense, the continued departure of skilled personnel adds an additional constraint to the maintenance of schemes.

Insufficiencies in fuel supplies and the rising prices of fuel for standby power generation, further contribute to reduced availability of safe water and environmental sanitation services in areas where power supply is limited or highly erratic.

<sup>150</sup> WHO/UNICEF JMP: Coverage Estimated Improved Water Supply, Arab Republic of Syria, 2012.

<sup>151</sup> national sector workshop , Damascus, April 2014

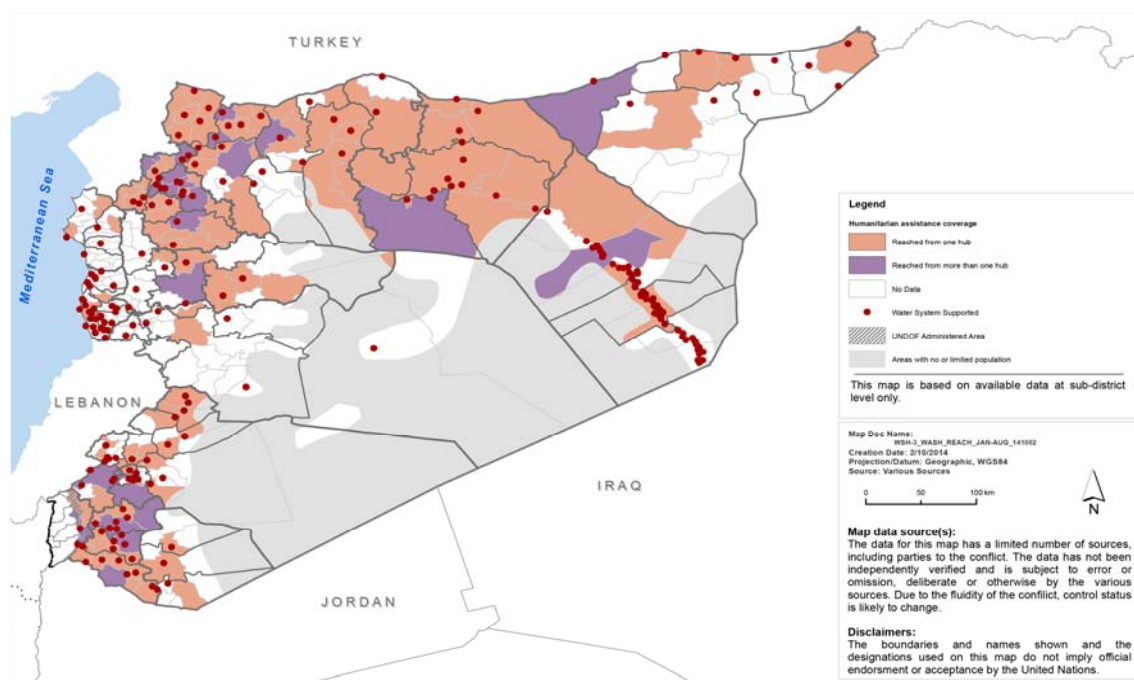
Furthermore, 2014 has seen the worst drought episode<sup>152</sup> recorded in over 50 years, which has depleted ground water sources in the country where it is estimated that 38% of drinking water supply is derived from wells and 20% from springs. For instance, the minimum average discharge of Fijeh spring, in the outskirts of Damascus, supplying water to 2 million people in Damascus and rural Damascus, has reduced by over 70% in summer of 2014 against the long-term average. In rural Damascus 37% of recorded wells are out of service due to drought and power shortages. Drought is particularly affecting shallower aquifers and wells, often used as backup solutions for water supply.

153	Pre/start-Crisis	Current
Average rural water consumption <sup>154</sup> (l/c/d)	129	30
Average urban water consumption <sup>155</sup> (l/c/d)	150	100
Hours of water supply	20	6
Governorates most susceptible to water scarcity	Hassakeh (60-90% displacement), Raqqa, Dier Az Zour in 2008/9)	Potentially all those reliant on groundwater sources
Governorates most reliant on groundwater	Hassakeh, Rural Damascus, Dara'a	Hama, Damascus, Homs, Tartous, Sweida, Daraa, Quinetra, Hassakeh, Lattakia
Governorates most reliant on surface water	Raqqa, Dier Az Zour, Homs	Raqqa, idleb, Dier Az Zour, Aleppo
Wastewater system coverage (estimated)	70%	30%

Map showing all water supply networks (red dots) assisted by WASH

**Syrian Arab Republic: WASH INTERVENTIONS** Jan - Aug, 2014

WASH WORKING GROUP



152 Standardised Precipitation-Evapotranspiration Index (SPEI) from Global Drought Monitor

153 national sector workshop , Damascus, April 2014

154 Ranging between 50 to 3 l/c/d

155 Ranging between 125 to 50 l/c/d



## Water Supply

As a consequence of the combined effect of infrastructure breakdown, an increasing proportion of the population now depends on trucked water provided by the public and private sector, which is not regulated and has witnessed increases in prices, or are resorting to unprotected water sources.

In areas where water trucking is the main source of water, the main water issue reported was the increase of water prices. As long as the prices of fuel for generators are high and electricity is intermittent this will remain a serious concern. Limited storage capacity mainly affects host communities or areas with limited water supply (once a month) IDPs who live in collective shelters, open spaces and unfinished buildings with no or limited services attached.

Water quality is a major concern because of the disrepair of the distribution network, and the lack of control of alternative water sources. According to the Ministry of Water Resources, water establishments have reduced capacity to effectively monitor drinking water quality in their governorates. A large number of water and wastewater utilities are not capable of carrying out water quality tests on existing drinking water sources due to the lack of personnel, test equipment and consumables.

Water treatment facilities are not always fully operational, due to damages or shortages of chemicals. This is particularly serious when the source of water is represented by surface water, like rivers. Water was unsafe for drinking in majority of assessed areas in Deir-ez-Zour governorate that depends mainly on Euphrates River water.

Water purification tablets for disinfection at household level are, for many Syrians, the only way to ensure water quality at the point of consumption, but proper training on the correct use of such treatment supplies is not always provided to the beneficiaries.

## Sanitation

Used to extensive access to modern sanitation facilities, Syrians have high standards in their hygiene habits, as well as high expectations and needs for their perceived well-being. For example, Palestine refugees reported anxiety and depression in regard to their inability to maintain personal and domestic hygiene.

In sanitation, power outages, the breakdown in operations and maintenance of wastewater treatment facilities, and damage to the network result in discharge of raw sewage into the surrounding environment, including fresh water bodies, increasing the risk of surface water contamination. This is of particular concern in Deir-ez-Zour, Raqqa, Rural Damascus, Aleppo and other areas that rely on surface water or shallow aquifer sources. Reports of sewage being disposed in the open are come especially from Hama, Ar-Raqqa, Al Hasakeh, Aleppo and Quneitra, where high numbers of people are reported to be living in unfinished buildings and in open spaces. All these governorates also report high numbers of skin diseases.<sup>156</sup>

In rural areas soak pits (or open stabilization ponds) are one of the main sewage disposal methods, and are less vulnerable to damage, however these are hard to implement due to scarce resources and access constraints in large areas of the country.

Moreover, the collection and proper disposal of rubbish has ceased in many places leading to the accumulation of garbage in public spaces. This is largely related to the reduced capacity of municipalities to dispose of solid waste due to a lack of equipment, fuel and salaries for employees. This reduction in capacity has led to the absence of sanitary garbage disposal services, such as garbage dumping sites and incineration/ burial services.

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<sup>156</sup> MSNA, 2014



## Hygiene

Limited access to and availability of essential hygiene products especially soap is inhibiting good regular hygiene practices among the affected population. This problem can be explained by the disruption of production of these materials locally in Syria, especially in industrial governorates such as Aleppo and parts of Rural Damascus. The raw materials for the industry are chemical substances that are subject to international sanctions, limiting the amounts available for manufacturing.

The second biggest issue is that there are insufficient places to wash or bathe, particularly for people who live in collective shelters, unfinished buildings and self-settled camps. Of particular concern are the IDP populations in camps and collective centers where conditions exacerbate the risk of diarrhea and other communicable diseases. In some of the collective shelters in Aleppo, reportedly the ratio of people per latrine and a bath unit can reach 50-100 people (5 times more crowded than optimal). Over 75% of the users of such facilities are said to be women and children.

There is a significant difference between areas of conflict and non-conflict areas in availability of hygiene materials. In areas with frequent fighting reported only 86% of the population reported having issues in availability of hygiene materials, which only 44% of the population in non-conflict areas reported issues.

## Health Consequences

The combined factors of poor sanitation, damaged water and sewerage networks, diminishing solid waste collection services, and limited access to hygiene materials have exposed and continue to expose communities to very high public health and environmental health risks.

According to Ministry of Health figures, water-borne diseases are on the rise nationally, particularly in areas where there have been prolonged water shortage. This includes the first polio outbreak in Syria since 1999, which began in September-October 2013. Sporadic disease outbreaks have occurred in areas such as Yarmouk where 30% of cases tested were confirmed for typhoid in September 2014 in the EWARS system. Similar rates of typhoid have been reported in Deir-Ezzour, Aleppo, Raqqa and rural Damascus. The highest rates of skin disease, typhoid and watery diarrhea reported in the EWARS system in 2014 are from the governorates of Deir-Ezzour, Rural Damascus, Aleppo and Idlib.

## People affected and vulnerable groups

For what the support to safe water supply systems is concerned, the WASH sector is still considering all population as in need of assistance. The reasons are:

- To support the parts of the populations that are more vulnerable, the entire system need to be sustained. Due to sanctions, the Ministry of Water Resources does not have the means to procure essential supplies for the treatment and disinfection of water, backup generators and some spare parts, therefore those gaps must be covered by humanitarian organizations.
- Where water systems become unreliable or unavailable, the population reverted to unprotected or uncontrolled sources of water (water trucking, shallow wells, surface water) that require household water treatment and storage, unavailable locally.

The total number of people in need of Humanitarian WASH has been estimated as 11.5 M People. This figure includes all IDPs and the HNO estimation of PiN except the sub-districts where the WASH ranking was 0 or 1 (no need of humanitarian assistance).

In terms of vulnerability, displaced people in collective shelters, damaged and unfinished buildings are the group most at risk for lack of safe water and sanitation services, followed by IDPs. This can be explained by crowding in collective shelters, inadequate water infrastructure, lack of storage capacity and high dependence on unaffordable water trucking.

Tens of thousands of Palestine refugees continue to live in areas of active conflict, and the dedicated UN agency UNRWA retains access to the vast majority of them from within Syria office in Damascus and other area offices.

Women and children are particularly affected by the lack of adequate numbers of toilets, bathing spaces and hygiene items. This places these groups at higher risk of protection and health issues.

In urban areas, IDPs living with host families are most at risk due to the pressure they place on extended families, water facilities and thus the reduced quantities of water available per person per day. The majority of urban centers assessed reported issues of water availability

### Information gaps

The nature of the crisis has placed a great strain on the ability of the sector to gather information on the ever-changing situation on the ground, and to monitor ongoing activities, including restricting the possibility to conduct sector assessments.

The complexity of conducting operations in Syria requires a three hub approach, with consolidation of the Whole of Syria picture at sub-regional level. Within Syria, the lack of sufficient numbers of operational partners on the ground, visa restrictions and severe limitations to the outreach of international organizations to implement and monitor projects has limited the response in many ways, as many can operate only from their country offices in Damascus.

For a range of reasons several implementing partners do not report reliably and comprehensively about their activities, these reasons include confidentiality, and a lack of capacity.

From outside Syria, for operations conducted cross border from the hubs in Turkey and Jordan, NGOs are particularly concerned by the sensitivity of the information regarding their activities. Strict confidentiality agreements are in place, and are enforced by coordination bodies to meet partners' concerns, and promote good coordination and complementarity of interventions, both within and across the hubs. Currently only 60% of WASH activities are routinely reported, however the sector is working to improve reporting completeness.

The HNO ranking has been compiled with information from cluster/sector partners from three hubs inputs based on the severity scale provided by OCHA), Area of Origin survey and Multi Sector Need Assessment.

Damascus inputs, and MSNA were considered more authoritative and were given priority, while other sources were used for arbitration. When the main sources were both available, and had no more than 1 scores of difference (or 2, with lower reliability score), the highest score of the two was used. If the deviation was higher, and a third source was available and in agreement with one of the main, that score was used, and reliability of data was downgraded. For other cases, feedback was requested to the origin of the data, or NGOs working in the area, for clarification and additional inputs.

Overall, the different sources (especially the main ones) were mostly in agreement within 2 marks ( see complete methodology attached).

For one sub district (Masaada), no information was made available, by any source.

## ANNEX II

### PEOPLE IN NEED / INTERNALLY DISPLACED PERSONS METHODOLOGY

#### Scope

The HNO provides estimates of People in Need (PiN) and Internally Displaced Persons (IDPs) by sub-district for all fourteen Governorates in Syria. This note describes the methodology used to calculate the reported estimates and its limitations.

#### Affected Population

PiN constitute affected population directly or indirectly adversely impacted by the crisis and who have varying needs from immediately life saving/humanitarian to more developmental/early recovery livelihood needs. They include IDPs in need, returnees in need, affected local communities host and non-host,

Internally Displaced Person (IDP)- persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized State border.

#### Methodology

The estimates of PiN and IDPs are based on the latest available assessments and data for sub-districts in Syria. The assessments or humanitarian profiling used are the Multi-Sector Needs Assessment (MSNA), which covers 114 sub-districts, the Governorate Profiles, which covers all the sub-districts. In addition, a third source of data used was the humanitarian profiles for parts of the southern governorates (i.e. Dar'a and Quneitra). Furthermore, in a few areas, the data was triangulated with recent developments that occurred after the data collection of the previous assessments.

The HNO data took into consideration the confidence levels associated with the different assessments to drive a weighted average number that was then triangulated with the latest information coming from the field.

It is important to note that the overall PiN figures generated do not represent an aggregated PiN figures for a specific sector, nor the maximum sector PiN figure per geographical area, but rather a proxy for needs across sectors.

The IDP numbers reflect displacements caused by the crisis and most of the IDPs tend to be particularly in need of humanitarian assistance and are included in the overall PiN, however in a few cases a portion of the IDPs are excluded from the overall PiN as they are considered not in dire need of life-saving assistance.

#### Limitations

Estimations of PiN and IDPs in the HNO are limited in their reliability, including inherent limitations associated with MSNA and the Governorate profiles. Neither of the two methods is based on probabilistic assessment or direct registration but rather snapshot of estimations of actors on the ground.

The MSNA data was based on key informant interviews and covered 114 sub-districts with a margin error estimated to +/- 20%. The governorate profiles data, resulted from joint review between OCHA field offices in Syria, UN agencies as well as key humanitarian partners, inclusive of local NGOs with local knowledge of the situation. The estimates took into consideration a wide range of information sources, such as; UNHCR data on refugee areas of origin, SARC, humanitarian assessments, local committees and open sources.

## ANNEX III

### HARD TO REACH METHODOLOGY

The current revision of Hard to Reach (HTR) areas has jointly been undertaken by OCHA offices in Syria, Turkey, and Jordan, as well as the office of the RHC in Amman, and used to inform the access analysis of the Syria 2015 Humanitarian Needs Overview.

The definition of Hard to Reach areas and besieged developed by OCHA endorsed by the Syria HCT remains unchanged.

#### Definitions

**Hard to Reach areas:** For the purposes of the Syrian conflict, a 'Hard to Reach area' as an area that is not regularly accessible to humanitarian actors for the purposes of sustained humanitarian programming as a result of denial of access, including the need to negotiate access on an ad hoc basis, or due to restrictions such as active conflict, multiple security checkpoints, or failure of the authorities to provide timely approval.

**Besieged locations:** For the purposes of the Syrian conflict, a 'besieged area' as an area surrounded by armed actors with the sustained effect that humanitarian assistance cannot regularly enter, and civilians, the sick and wounded cannot regularly exit the area.

It is important to note that failure to access by humanitarian actors for other reasons than those listed in the definitions (i.e. lack of capacity or will on the part of humanitarian actors) does not make an area hard to reach, but represents a gap that needs to be addressed programmatically.

#### Changes introduced to the Hard to Reach locations and areas methodology

- Previously, HTR locations did not take into account accessibility for actors operating cross-border. With SCR 2165, the revised list has now been adapted to take into consideration current conflict dynamics as well as the accessibility by all actors, including cross-border actors operating from Turkey and Jordan.
- Previously, only the number of People in Need residing in the 287 locations identified as HTR were counted as living in Hard to Reach areas, leaving out some other People in Need, living in surrounding areas that were also Hard to Reach, but for which no specific location was identified (small villages etc.). The revised list provides a more realistic picture of the number of People in Need living in Hard to Reach areas by counting all People in Need in areas considered Hard to Reach. This has been done by identifying the geographical locations that are Hard to Reach within each sub-district in Syria, based on the agreed definition, and counting the total number of People in Need living in these areas, or a percentage of it, in cases Hard to Reach areas straddle administrative borders, as well as specific locations when applicable (besieged for example). The number of People in Need is calculated based on the methodology developed for the 2015 HNO<sup>157</sup>
- For the purpose of facilitating reporting and operational tracking, a list of 133 HTR and besieged locations is also provided, representing either the sub-district capitals of HTR areas in rural areas, or neighborhoods in the case of HTR areas located in urban settings.

In line with the approach, as of 26 October, it is estimated that 4.8 million people are in need of assistance in Hard to Reach areas and locations and 212,000 people in 11 locations remain besieged by the Syrian Government and armed opposition groups.

<sup>157</sup> See methodology in Syria 2015 HNO, annex III.

**Comparative table: former and new People in Need in Hard to Reach areas and locations**

Governorate	SHARP MYR PIN June 2014	Preliminary HNO PiN October 2014	Old HR PIN June 2014	New PIN in HR areas October 2014	% Change
Al-Hasakeh	582,000	632,000	552,500	181,700	-67%
Aleppo	2,575,000	2,824,000	1,273,500	1,506,650	18%
Ar-Raqqa	490,000	741,000	490,000	741,000	51%
As-Sweida	133,500	118,500	-	-	
Damascus	820,000	750,000	34,100	112,500	230%
Dar'a	517,000	602,000	316,200	29,620	-91%
Deir-ez-Zor	711,000	794,000	670,000	794,000	19%
Hama	533,000	636,000	222,750	33,200	-85%
Homs	748,000	699,000	254,750	233,140	-8%
Idleb	1,117,000	1,428,000	317,500	-	
Latakia	363,500	466,000	46,500	6,000	-87%
Quneitra	87,000	80,000	101,000	35,400	-65%
Rural Damascus	1,654,000	2,135,500	391,500	1,186,300	203%
Tartous	472,500	278,000	-	-	
<b>Grand Total</b>	<b>10,803,500</b>	<b>12,184,000</b>	<b>4,670,300</b>	<b>4,859,510</b>	<b>4%</b>

## Key changes in HTR areas and locations by affected governorate

### Al-Hasakeh

The permanent presence by UN through the UN hub in Qamishli, as well as the opening of Nusaybin border crossing contributed to the expansion of the humanitarian reach in Al-Hasakeh Governorate. Five Hard to Reach locations including Al-Malika, Jawadiyah, Amuda, Qamishli, and Darbasiyah are no longer considered Hard to Reach and are easily accessible by humanitarian partners. Al-Hasakeh City became largely accessible with the exception of the Gweiran neighbourhood, where active conflict is reported, and Yarobiyah become largely accessible from Qamishli, with the exception of a few rural areas where fighting is reported. Recent security developments in Iraq, due to the expansion of ISIL, have yet not allowed the use of the Yaroubiyeh border crossing for UN cross-border operations, despite the latter is authorised under UNSCR 2165.

### Aleppo

Aleppo remains the governorate with highest number of People in Need living in hard-to-reach areas. The governorate has experienced recently an expansion of areas under ISIL, which contributed in increasing the PiN in areas hard to reach.

Six sub-districts were removed from the previous list of Hard to Reach, as those are reachable by cross border operations from the north; these sub-districts include Afrin, Bulbul, Jandaris, Mabtali, Raju, and Sheikh El-Hadid.

Due to the recent ISIL offensive in Ain Al Arab, the PIN in this sub-district decreased (more than 170,000 people reported as refugees in Turkey and several thousand newly displaced people reported in Afrin).

The PIN in Hard to Reach locations in Al Bab increased due to the fact that the whole sub-district is now under the control of ISIL.

The Eastern part of Aleppo City (currently under opposition control) is being closely monitored and remains as Hard to Reach, due to the fighting in Handarat hill. 300,000 people are at risk of being cut off from any assistance should the government forces be able to take over Handarat hill.

The two Shia enclaves, Zahra and Nubl remain besieged by armed opposition groups, with an estimated 26,000 People in Need of humanitarian assistance. The number of People in Need in those locations decreased (from 45,000) on the basis of the close monitoring that took place after the two locations were accessed in May with actors on the ground, as well as subsequently through community members.

### **Ar-Raqqa**

All the governorate area is under ISIL control and the PIN has been revised in line with the HNO indicating the increasing humanitarian needs.

### **Damascus**

With the exception of Hussenieh (previously included in the Hard to Reach list of locations, has now been deleted because of shifting frontlines), Hard to Reach locations in Damascus remain unchanged. Key neighbourhoods and areas such Jobar, Qaboun, Qadam have witnessed an escalation of conflict and front-lines have shifted thus expanding the Hard to Reach area and leading to an increase in the PIN.

In addition, Yarmouk camp remains besieged with an estimated 18,000 people. United Nations Relief and Works Agencies for Palestine Refugees in the Near East (UNRWA) is allowed to distribute limited supplies three days a week only if security conditions and approval by the parties to the conflict is granted.

### **Dar'a**

While active fighting and escalation of conflict is reported in the south, cross-border actors have indicated feasibility of gaining access to the great majority of areas under opposition control. The decrease in People in Need present in Hard to Reach areas represent therefore their outreach. Ten locations remain classified as Hard to Reach and PiN for those were revised in line with the HNO PIN.

### **Deir-ez-Zor**

Most of the governorate is under ISIL control and the PIN has been revised, in line with the HNO, indicating the increasing humanitarian needs. Of concern is the situation of civilians living in the government-controlled part of Deir-ez-Zor City due to the recent advances of ISIL and the destruction of critical infrastructure (e.g.. bridges) which would have enabled the crossing for the civilian population between government and non-government controlled areas. 100,000 people are at risk of being cut-off from assistance.

### **Hama**

The decrease in numbers of People in Need living in Hard to Reach areas is mainly driven by access opportunities from cross border operations, thus several previously Hard to Reach areas have been therefore deleted.

### **Homs**

While some areas became accessible due to shifting frontlines, key opposition stronghold locations such as Al Waer, Rastan, Talbiseh, Al Gantho and Terr Mallah remain Hard to Reach. With the exception of Al Waer, the current list has grouped the small adjacent located villages under the main towns that are part of the same homogenous rural areas.

### **Idleb**



As reported by cross-border actors, despite the conflict, all the locations previously included, are actually accessible by cross-border actors, hence no Hard to Reach locations have been included. On 30 October, al-Nusra Front and allied groups launched an offensive on specific FSA-affiliates groups, leading to the expulsion of the latter from Idleb. This has raised fears of further al-Nusra Front offensives against other FSA-affiliates, or armed opposition groups in general, including along key access routes, including Bab al-Hawa crossing, possibly rendering locations hard-to-reach. However, at present, humanitarian actors continue to operate throughout Idleb and the brief clashes have had no sustained impact on humanitarian access. OCHA will continue to monitor the situation and reassess accordingly in the even of sustained conflict and access restrictions.

### **Lattakia**

The decrease in the numbers of People in Need living in Hard to Reach areas is mainly driven by the access gained from cross border operations within two of the previous three locations considered as Hard to Reach.

### **Quneitra**

The decrease in the number of People in Need living in Hard to Reach areas is mainly driven by the access reported by cross border operations, despite the deterioration and escalation of fighting. The following areas Quneitra, Western Samadaniyeh, Hadar, Jaba, Jbata Elkhazab, Khan Arnaba, and Um Batna remain Hard to Reach.

### **Rural Damascus**

In overall, the governorate has witnessed a 29% increase in the number of People in Need of humanitarian assistance compared to the estimate for June 2015.

The increase in Hard to Reach areas is due to the escalation of hostilities amongst Syrian Government forces and armed opposition groups, as well as increased access constraints at several governmental check-points, as reported by actors operating from within Syria. Key affected areas are Qalamoun area, Zabadani area, East Goutha besieged, the broader Goutha area, as well as the Southern parts of the governorate.

Due to existing conflict lines, in the current list, eight additional locations, with a total estimate of 600,000 People in Need of assistance have been added under the category as Hard to Reach. Out of those, Kisweh (262,500 people) followed by At Tall (150,000 people), Al Guzlanieh (80,000 people), Qudseya (29,000 people), Sasa (24,500 people), Ein el Fijeh (20,000 people), Haran Al Awameed (15,000 people), Esal al Ward (8,000 people), Nabek (6,000 people) and Beit Jan (4,000 people) and are contributing to the overall increase.

In the current list, five Hard to Reach locations have been deleted, namely Jeroud, Qara, Rankous, Ramadan Palestine Refugees camp and Qatana that are now accessible, due to shifting frontlines. However, these locations had a small humanitarian caseload of 20,000 People in Need. With the exception of Moadamyeh, which is under a local truce agreement, and is no longer considered besieged but Hard to Reach the Government of Syria continues to besiege several locations in East Goutha and Darayya. An estimated 167,500 people remain besieged and are in dire need of humanitarian assistance.

Inside East Goutha, the humanitarian situation and needs have dramatically deteriorated with severe shortages reported in all life-saving sectors, due to intensification of aerial bombardments, consolidation of control and ground offensive by Government forces in key locations including Jobar, Mileha, Adra Umelya/Adra Al Balad, Yabroud and Rankous.

This ground offensive has also resulted in the cut-off of supply routes for the opposition inside East Goutha area. In addition, the Syrian government has further tightened the control of check-

points around East Goutha, particularly in Al Wafeedin Camp and Najha, thus completely preventing all possibility for civilians to leave the area (the bribing system is no longer effective).

Due to the on-going military offensive, the humanitarian caseload within East Goutha besieged locations has actually changed and displacement has been reported within the besieged locations. In Darayya, where an estimated 4,000 people remain besieged, attempts of local agreements have failed and the remaining civilians remain cut-off from any humanitarian assistance.

During the months of April and May 2014, some of the local agreements in Qaboun and Berzeh allowed access to those areas; however, these agreements have now broken down and hostilities have reportedly resumed.

#### Revised list of besieged locations:

The only change in the revised list of besieged locations is the change of status of Madamiyet Elsham from besieged to Hard to Reach following a truce between the Government of Syria and Non State Armed Groups controlling the area, allowing some supplies as well as movement of civilians.

Governorate	District	Sub district	Community	New Estimated PIN*
Aleppo	A'zaz	Nabul	Nabul	17,500
Aleppo	A'zaz	Nabul	Zahraa	9,000
Damascus	Damascus	Damascus	Yarmouk (non-official PR, Besieged)	18,000
Rural Damascus	Rural Damascus	Arbin	Arbin (E.Gouta)	10,000
	Darayya	Markaz Darayya	Darayya (E. Gouta)	4,000
	Duma	Duma	Duma (E. Gouta)	95,000
	Rural Damascus	Kafr Batna	Hammura (Kafr Batna – E. Gouta)	15,000
	Duma	Harasta	Harasta (E. Gouta)	17,000
	Rural Damascus	Maliha	Maliha (E. Gouta)	0
		Kafr Batna	Saqba (E.Gouta)	15,000
		Arbin	Zamalka (E. Gouta)	11,500
			<b>TOTAL</b>	<b>212,000</b>