

2017

HUMANITARIAN NEEDS OVERVIEW

PEOPLE IN NEED

13.5M

DEC 2016



**SYRIAN
ARAB REPUBLIC**

This document is produced on behalf of the Strategic Steering Group (SSG) and humanitarian partners working under the Whole of Syria (WoS) framework. It provides the SSG's shared understanding of the crisis, including the most pressing humanitarian needs and estimated number of people who need assistance.

While this provides a consolidated evidence base that helps inform joint strategic planning, many of the figures provided throughout the document are estimates based on sometimes incomplete and partial methodologies.

The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city, area, or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Photo credit: Thaer Mohammed/AFP

Cover photo: In the neighbourhood of Sakhur, in Aleppo City, a man reacts as rescuers look for victims under the rubble of a collapsed building.

This version was issued on 1 December.



<http://www.unocha.org/syria>



<https://www.humanitarianresponse.info/en/operations/whole-of-syria>



<http://www.hno-syria.org>



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PART I: SUMMARY

-  Humanitarian needs & key figures
-  Impact of the crisis
-  Drivers, needs & key figures
-  Breakdown of people in need
-  Severity of need
-  Gaps analysis
-  Access and operational challenges
-  Operational capacity
-  Assessment methodology

PEOPLE IN NEED

13.5M

PEOPLE IN NEED IN BESIEGED AND
HARD-TO-REACH AREAS

4.9M

0.97M

People in need in besieged areas

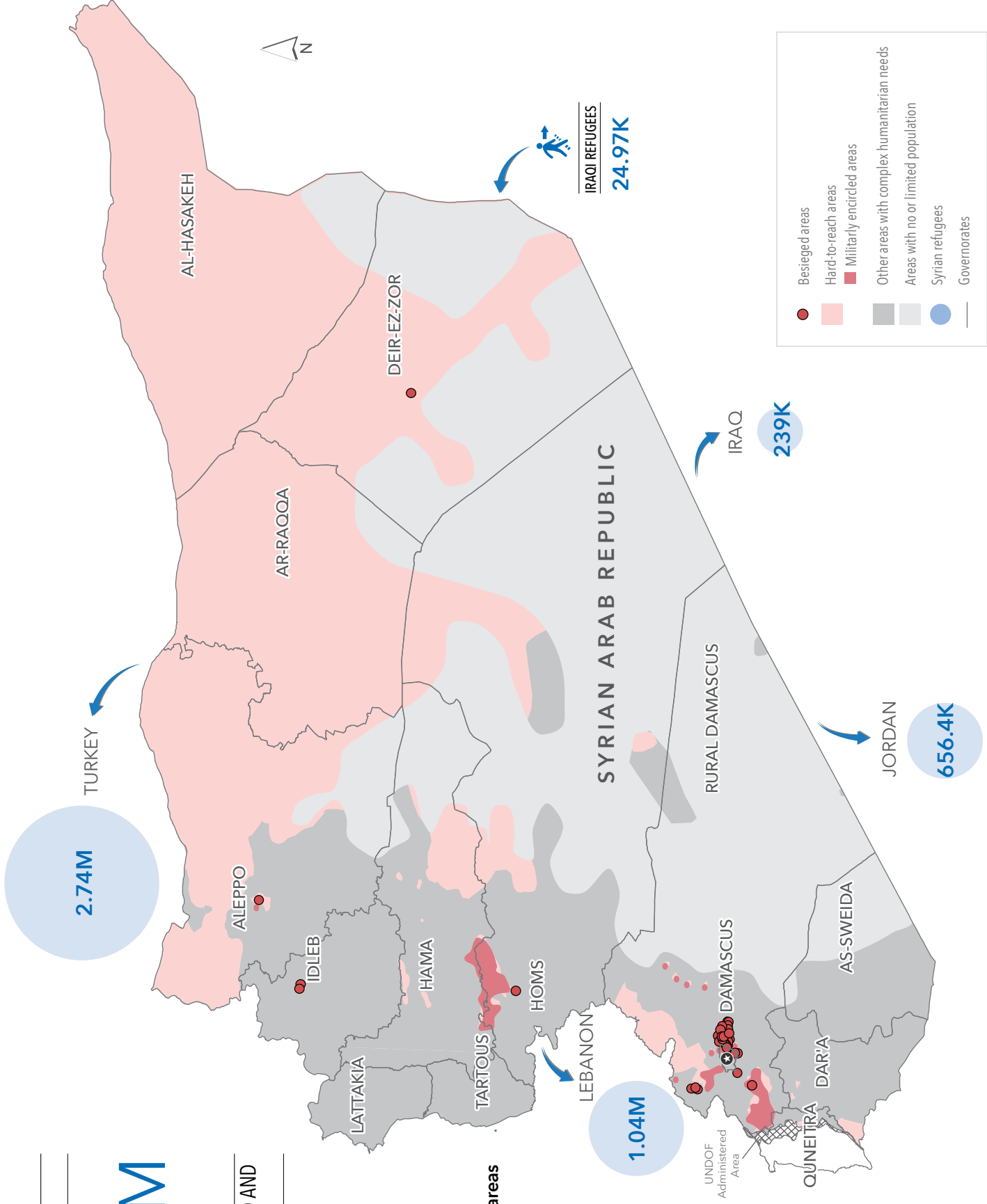
3.9M

People in need in other
hard-to-reach areas

Including 0.94 million in
militarily encircled areas

PEOPLE WITH SEVERE NEEDS

5.7M



HUMANITARIAN NEEDS

As the Syria crisis enters its sixth year, civilians continue to bear the brunt of a conflict marked by unparalleled suffering, destruction and disregard for human life. 13.5 million people require humanitarian assistance, including 4.9 million people in need trapped in besieged and hard-to-reach areas, where they are exposed to grave protection threats.¹ Over half of the population has been forced from their homes, and many people have been displaced multiple times. Children and youth, millions of whom have known nothing but conflict, comprise more than half of the displaced, as well as half of those in need of humanitarian assistance. Parties to the conflict act with impunity, committing violations of international humanitarian and human rights law.





Protection needs of civilians

Syria is the largest protection crisis of our time. Since the onset of the conflict in 2011, hundreds of thousands of people have been killed.² Some 30,000 people³ suffer conflict-related trauma injuries every month, roughly 30 per cent of whom develop permanent disabilities.⁴ Parties to the conflict repeatedly breach international humanitarian law (IHL) and international human rights law (IHRL). In some instances, attacks appear to directly target civilians and civilian infrastructure, are indiscriminate, or breach other IHL rules protecting civilians. Tens of thousands of Syrians are missing since the conflict began, thousands in circumstances suggesting forcible displacement. Others have been subject to torture and other forms of ill treatment in detention.⁵ The Islamic State of Iraq and the Levant (ISIL) and affiliated groups use suicide bombs in civilian areas outside its control, while in ISIL areas of influence, public beheadings, physical mutilation, the sexual enslavement of women and girls, indoctrination and forced recruitment of children continue unabated.⁶ Persistent and extreme violence, forced displacement, family separation, lack of civil documentation, and an increase in poverty, further limiting coping mechanisms, have extended the scope and severity of protection threats faced by people in Syria.



Life-threatening needs among displaced and other conflict-affected communities

Mass conflict-induced displacement has led to significant demographic change within Syria. In addition to some 4.8 million⁷ people registered as refugees in neighbouring countries, 6.3 million people are displaced within Syria itself.⁸ Meanwhile the rate of displacement continues unabated. On average, 6,150 people were displaced per day between January and August 2016.⁹ Over one million displaced people live in collective shelters, camps or makeshift settlements as the option of last resort.¹⁰ Among conflict-affected communities, life-threatening needs continue to grow. Neighbouring countries have restricted the admission of people fleeing Syria, leaving hundreds of thousands of people stranded in deplorable conditions on their borders. In some cases, these populations are beyond the reach of humanitarian actors.



Needs of people living in besieged and hard-to-reach areas

Approximately 974,080 people in need of humanitarian assistance, including 411,000 children and 6,250 Palestine refugees,¹¹ live in 16 besieged areas within Syria.¹² Civilians living in besieged locations are denied their basic rights, including freedom of movement and access to adequate food, water, and health care. Frequent denial of entry of humanitarian assistance into these areas and blockage of urgent medical evacuations result in civilian deaths and suffering. Others have been shot by snipers, killed, or injured while fleeing in search of food and safety. 3.9 million people in need live in hard-to-reach areas that humanitarian actors are unable to reach in a sustained manner through available modalities.¹³ Of people living in hard-to-reach areas, 935,500 are in militarily encircled locations,¹⁴ subject to further constraints of freedom of movement and access to basic assistance. A further 1.4 million people in need, including 700,000 children,¹⁵ live in areas controlled by ISIL, where access remains highly restricted due to insecurity and restrictive policies vis-à-vis humanitarian actors.



Livelihood needs and lack of access to basic services

Their lives and livelihoods shattered by almost six years of conflict, many people in Syria endure a struggle for survival. For millions of people, coping strategies have been exhausted, stretching their resourcefulness to its absolute limit. An estimated 69 per cent of people now live in extreme poverty, supporting their families on less than US\$2 per day, of which an estimated 35 per cent live in abject poverty,¹⁶ characterized by severe deprivation of the basic food required to survive.¹⁷ Access to essential services, including health care, safe water, and education, has been severely disrupted. Families are resorting to unsustainable and unsafe means of survival, including forced and/or early marriage, child labour, child recruitment, survival sex, and temporary marriages.¹⁸

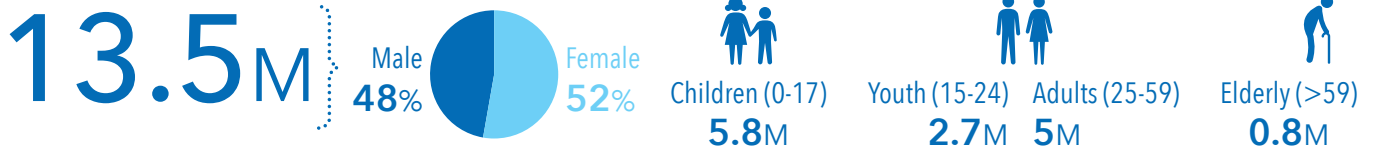
Besieged area

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.

Hard-to-reach (HTR) area

an area not regularly accessible to humanitarian actors for the purpose of sustained humanitarian programming due to the denial of access, the continual need to secure access, or due to restrictions such as active conflict, multiple security checkpoints or failure of the authorities to provide timely approval. Some areas within the hard-to-reach category are subject to specific access constraints because they are militarily encircled. These areas are physically surrounded by single or multiple armed actors, with the effect of constraining access for both supplies and people to and from the area, such that sustained humanitarian programming is not possible.

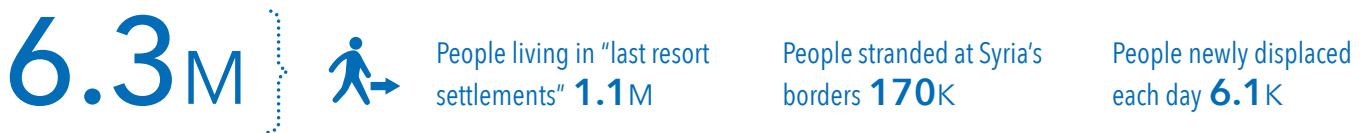
NUMBER OF PEOPLE IN NEED OF HUMANITARIAN ASSISTANCE



NUMBER OF PEOPLE IN NEED IN HARD-TO-REACH AND BESIEGED AREAS



NUMBER OF INTERNALLY DISPLACED PERSONS



PEOPLE LIVING IN POVERTY



PEOPLE NEEDING HEALTH ASSISTANCE

12.8M



CHILDREN OUT OF SCHOOL

1.75M



PEOPLE WHO ARE FOOD INSECURE

7M



PEOPLE LIVING WITH PERMANENT DISABILITIES

2.8M



OF CONFLICT-RELATED TRAUMA CASES PER MONTH

30K



OF PALESTINE REFUGEES DISPLACED

280K



IMPACT OF THE

CRISIS

More than five years after the start of the conflict, intense hostilities persist across many parts of Syria. Parties to the conflict continue to commit violations of international humanitarian and international human rights law. Economic collapse continues to drive the immense humanitarian crisis across the country.

Unrelenting hostilities/violence

Conflict remains the principal cause of Syria's humanitarian crisis. All areas of the country, north, south, east and west, are impacted by the continuing conflict, which has grown more violent over the last year, resulting in thousands of deaths and injuries, increased internal displacement, large-scale migration to Europe and beyond, lost livelihoods, mounting humanitarian needs and diminished humanitarian access to many areas. Two separate cessation of hostilities agreements, brokered by the Russian Federation and the United States, provided a temporary platform for the de-escalation of hostilities and brought about a notable reduction in violence in many parts of the country. However the eventual collapse of both agreements saw a resumption of violence, with devastating impacts on civilian populations.

Violations of international humanitarian law and international human rights law

A defining feature of the conflict and humanitarian crisis in Syria has been the repeated breach of International Humanitarian Law (IHL), designed to limit the effects of armed conflict on civilians. Over the course of 2016, parties to the conflict have continued to attack densely populated areas, sometimes indiscriminately or otherwise unlawfully, targeting civilians or civilian infrastructure, such as medical facilities. From January to September 2016, there were 101 reported attacks resulting in damage to hospitals and health care centres across Syria.¹⁹ In the first half of 2016, the UN verified 38 attacks on education facilities and personnel.²⁰ Attacks, many of which are in breach of IHL laws and customs, result in the death of humanitarian aid workers and the destruction of infrastructure. At least 66 humanitarian workers were killed and 114 wounded in the first nine months of 2016.²¹ Obstructions are placed on the ability of humanitarian actors to access people in need, resulting in unnecessary deaths.

Above and beyond the suffering arising from hostilities, civilians' suffering is compounded by less visible human rights violations. Parties to the conflict continue to subject civilians to campaigns of harassment, arbitrary arrest, abduction, detention, torture and ill treatment.²² Since the beginning of

the conflict, tens of thousands of Syrians are thought to have been subject to enforced disappearance.²³ Survivors describe horrendous ordeals of torture and abuse, while relatives of victims face protracted suffering in their efforts to uncover where they are, how they are being treated and even whether they are still alive. In ISIL-held areas, civilians continue to be subjected to executions and other inhumane punishments for alleged violations of strict codes imposed by the group.²⁴ Women and girls are also raped and subjected to sexual enslavement.

The drastic decline of the economy has exacerbated Syria's humanitarian crisis. In the course of almost six years, the conflict has devastated Syria's economy, resulting in economic losses of more than \$254 billion.²⁵ Conflict has damaged or destroyed Syria's economic infrastructure, impeded access to sources of income, disrupted markets, and triggered currency depreciation. Economic losses from the disruption to the education system are estimated around \$11 billion, equivalent to about 18 per cent of Syria's 2010 gross domestic product (GDP),²⁶ further damaging long-term economic prospects.

An assortment of unilateral sanctions - some of the most far-reaching ever imposed - has severely limited trade opportunities.²⁷ Complex financial and legal requirements often preclude the delivery of humanitarian assistance and can restrict humanitarian actors from importing basic equipment and material essential to maintaining life-saving services. Unilateral sanctions and export controls prohibit the importation of a range of 'dual-use' items. Consequently, many projects delivered by the UN, international non-governmental organisations (INGO), and their implementing partners in areas such as water supply, sanitation, agricultural production, power supply and the reconstruction of hospitals/homes rely on access to controlled dual-use goods and are likely to require specific licenses. According to UNDP, such import restrictions alone have led to a decline in the efficiency of water operations of more than 40 per cent relative to pre-crisis levels.²⁸

Food production has been drastically reduced, with the total area of land under cultivation having shrunk by 40 per cent.²⁹ Compounded by difficulties in distributing food staples, a third of the population is now food insecure.³⁰ Government revenues have plummeted largely due to the decrease in oil

exports and the disruption of trade. As a result, the country's GDP has contracted by 55 per cent, with a further contraction expected.³¹ A fragmented war economy based on short-term opportunism and predatory behavior – profiteering, kidnapping, theft, illegal taxation, and diversion of assistance – has also contributed to the economy's decline.

Outlook for 2017

In the absence of a political solution to the conflict, intense and widespread hostilities, particularly in Aleppo and ISIL-controlled areas, are likely to persist in 2017. A scale of population movement similar to that seen in 2016, worsening socio-economic conditions and inter-communal relations, as well as deepening vulnerabilities and protection concerns are anticipated. The likely protraction of these drivers of conflict will preclude improvements in social infrastructure, market accessibility and the availability of livelihood opportunities. In this climate, millions of people living in Syria will continue to depend on humanitarian assistance.

While local agreements have translated into some improvements in humanitarian access, access to besieged and militarily encircled areas through cross-line modalities remains contingent on political negotiations, further undermining the principle of unhindered humanitarian access to people in need. In the absence of a political solution, sieges, with disproportionate effects on the well-being of civilians, are likely to continue. The use of heavy weaponry against populated areas and a lack of access to vital supplies, including food, water, basic hygiene supplies and medicine, will endanger civilians' well-being in besieged areas. With limited options and increasingly scarce vital resources, civilians will experience malnutrition and disease outbreaks, as well as the more visible and immediate threats to life presented by frequent attacks and the continued use of improvised and heavy weaponry in densely populated areas.

While people living in hard-to-reach and encircled areas may have intermittent access to humanitarian assistance, the absence of routine and predictable aid often leaves families struggling to meet basic needs. With fewer options available, families may be forced to resort to further desperate and unsafe coping strategies as a means of survival. In many areas, violence permeates all levels of society, leaving men, women and particularly children exposed to multiple, serious protection threats.

Conflict-induced mass displacement will also continue to drive humanitarian needs in Syria. People fleeing violence will struggle to escape internally or across Syria's borders. While those who move internally will struggle to access livelihoods and services in overburdened host communities, those who select to cross borders are increasingly denied entry, leading them to resort to illegal and dangerous means. Competition over increasingly scarce services and livelihood opportunities, both internally and in border areas, has the potential to aggravate social and economic tensions within communities. With millions of Syrians unable to return to their homes due to the conflict, humanitarian actors will need to ensure that host communities are provided with the necessary assistance and social services to accommodate these people, in line with the 'do no harm principle' and the promotion of social harmony.

The level and scale of suffering endured by people living in Syria is unconscionable. Despite facing a volatile and insecure

operating environment, funding shortages, administrative hurdles, and other challenges impeding the timely delivery of aid, humanitarian actors continue to extend a lifeline to millions of people each month. However with humanitarian and protection needs growing in scale, severity and complexity, no amount of humanitarian assistance and protection services can substitute for a political solution to the conflict.

“ It is now a legitimate question to ask whether there is any level of disaster and death that can be visited upon the Syrian people that might prompt the parties to this conflict – and, by extension, the international community – to identify a red line that will not be crossed. ”

Stephen O'Brien, Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, 29 September 2016

At the beginning of 2016, it was difficult to conceive that the situation for those in Syria could get any worse. Nonetheless, the combination of unrelenting hostilities, continued violations of IHL and IHRL, including obstructions to humanitarian access and the effects of economic collapse, have seen an already catastrophic humanitarian situation deteriorate yet further.

The conflict has displaced 6.3 million people in Syria, forced from their homes and communities seeking protection from violence, access to basic services, and re-newed livelihood opportunities.

Since the beginning of the crisis, over half of the country's population has been forced from their homes. At least 4.8 million people have sought refuge in the region and beyond,³² and 6.3 million people are internally displaced.³³ Rates of displacement continue unabated. On average, every day between January and August 2016 an additional 6,150 people were forced from their homes or areas of residence.³⁴

Newly displaced people are often required to flee at short notice, leaving behind many of their belongings. While the majority are still able to find refuge with host families, shelters

are often extremely overcrowded and lacking basic amenities. A recent rapid assessment in the south of Syria found that almost half of respondents were sharing with three or more families, while 20 per cent of the 169 people surveyed (48 women and 121 men) had no shelter at all.³⁵ Due to a lack of access to cash, among other issues, new IDPs also face significant barriers in accessing food and other essential items, although these may be available on the market.³⁶ Faced with limited options, people may therefore return to their homes in conflict-affected areas once immediate risks appear to have passed, only to have to flee again days later. This gives rise to a pattern of short-term, cyclical displacement in conflict-affected areas across the country.

170,000 people now stranded at Syria's borders with Jordan and Turkey in desperate conditions

As Jordan and Turkey have increasingly restricted admission to their territory, hundreds of thousands of people have been left stranded on Syria's borders in deplorable and dangerous conditions. These people include some 100,000 IDPs in Azaz and an estimated 70,000 people living in makeshift settlements in Rukban and Hadalat on Syria's southeastern border with Jordan. The majority of those stranded on the southeastern border are women and children. Many had been displaced within Syria before arriving at the border and would likely seek asylum in Jordan if they were able.

Following an unprecedented cross-border improvised explosive device (IED) attack on its border guards in Rukban on 21 June, the Government of Jordan (GoJ) sealed its northern border, disrupting humanitarian access and delivery. However provision of water continued, and there was a one-time food distribution in August. As this document was going to press, arrangements are in place for UN agencies and NGOs in Jordan to resume humanitarian assistance to the population at the border.

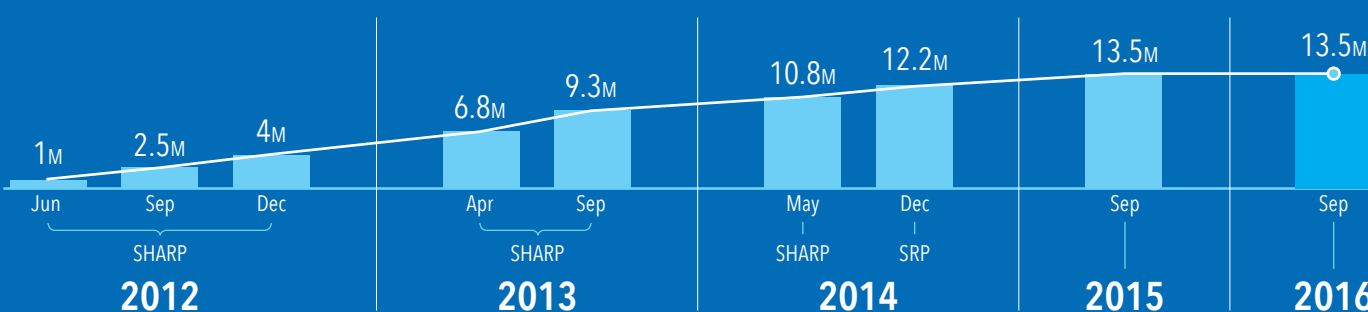
The conflict has led to significant, protracted displacement and family separation. Many IDPs facing protracted displacement often have tremendous needs and face immense challenges in accessing livelihood opportunities in host communities, where residents are themselves grappling with economic hardship. These circumstances leave IDPs exposed to exploitation and dependency. As frontlines have shifted, many IDPs have moved multiple times in search of safety, while others have experienced secondary or tertiary displacement as their financial resources become depleted and are forced to move into cheaper, poorer quality and more crowded accommodation. Broadly speaking, with each displacement, overall vulnerability increases.

The estimated 1.1 million people living in camps, informal settlements, and collective centres are particularly vulnerable.³⁷ Over the last six months, some long-established IDP sites have become less secure and two direct attacks were reported: on 5 May, two rockets struck a civilian IDP settlement in Idleb, killing 26 people and wounding 23 others, while on 14 April, ISIL overran the IDP settlement near the border with Turkey in Aleppo, razing it to the ground.³⁸ There were no casualties, as the settlement had been evacuated earlier, but the tents were burned and destroyed. Conditions in the sites remain dire: 57 per cent of collective centres are without sufficient water, 50 per cent lack sufficient sanitation facilities, and 54 per cent are over-crowded.³⁹

974,080 people are trapped in besieged areas

Throughout Syria, parties to the conflict, particularly the Government of Syria (GoS), continue to use siege as a military tactic, inflicting indiscriminate and direct suffering on the civilian population. In appalling conditions, men, women, and children within the 16 besieged areas are particularly vulnerable to malnutrition and waterborne and communicable diseases. Health risks such as trauma injuries and infectious disease outbreaks are compounded by the lack of access to regular medical services, care and treatment. Throughout 2016, the removal of medical

TOTAL PIN BY YEAR



supplies from aid convoys and restrictions on medical evacuations continued, resulting in civilian deaths. The use of starvation as a method of warfare by depriving the civilian population of good essential for survival is prohibited by IHL, and may amount to a war crime.⁴⁰

Humanitarian and protection needs are growing to unprecedented levels in terms of scale, severity, and complexity

Since October 2015, the number of people unable to obtain the basic food required to meet their needs has risen from 6.3 million to nearly 7 million.⁴¹ Limitations in the water network supply have resulted in almost 50 per cent of the population meeting the majority of their water needs from alternative sources, including costly commercial water trucking and unsafe open wells.⁴² 12.8 million people across Syria are without adequate health assistance.⁴³ Some 30,000 people suffer conflict-related trauma injuries each month.⁴⁴ One in three children is now out of school, and a further 1.4 million are at risk of dropping out.⁴⁵ One in four schools has been damaged, destroyed, occupied, or shut down.⁴⁶ 5.8 million people require some form of non-food item assistance, with adequate housing no longer available in over a third of the country.⁴⁷ With no end to the conflict in sight, these needs are set to continue to define the lives of people living in Syria during the coming year.

“ I got injured but I only think about my family and kids - what will happen to them? I don't have the right to think about myself; I don't have the right to worry about myself. ⁴⁸ ”

Woman in Aleppo Governorate.


Today, all segments of the Syrian population are vulnerable, albeit in different ways. In some areas, their freedom of movement is severely limited based on religious and social factors. Women and girls face risks of sexual violence, exploitation, abuse, harassment, and domestic violence. Men and boys face restrictions on their freedom of movement due to insecurity and lack or loss of documentation. When violence escalates, men are often not permitted to pass through checkpoints and often find themselves trapped under fire. Men and boys are the primary targets of campaigns of arrest, detention, disappearance, and recruitment to the conflict.

“ When my friends and I go out to play we are insulted by people who say that we have grown up and should stay in the tent. ⁴⁹ ”


Girl in Aleppo Governorate.


Meanwhile, the elderly and persons with disabilities and mental health disorders, particularly those with insufficient family and community support, are at increased risk of social exclusion, poverty, and violence due to limited mobility, discrimination, and a lack of availability of services designed to meet their specific needs. Palestine refugees also face extreme vulnerabilities. Of the 450,000 Palestine refugees remaining in Syria, 280,000 are displaced. Overall, 95 per cent are dependent on the United Nations Relief and Works Agency (UNRWA) for assistance to survive. There is a growing number of people in Syria who have lost or lack civil documents, face impediments to their mobility and obstacles in seeking safety and accessing basic services, livelihoods, and assistance. Internally displaced persons, particularly those living in IDP sites such as collective centres, face heightened protection risks.

October 2015

 Cross-line and cross-border convoys reach the “Four Towns”: Madaya, Zabadani, Foua, and Kefraya.

December 2015

 Emergency medical evacuations take place from “Four Towns” via Lebanon and Turkey.

 UNHCR reports that more than one million Syrian refugees fled to Europe by sea in 2015.

January 2016

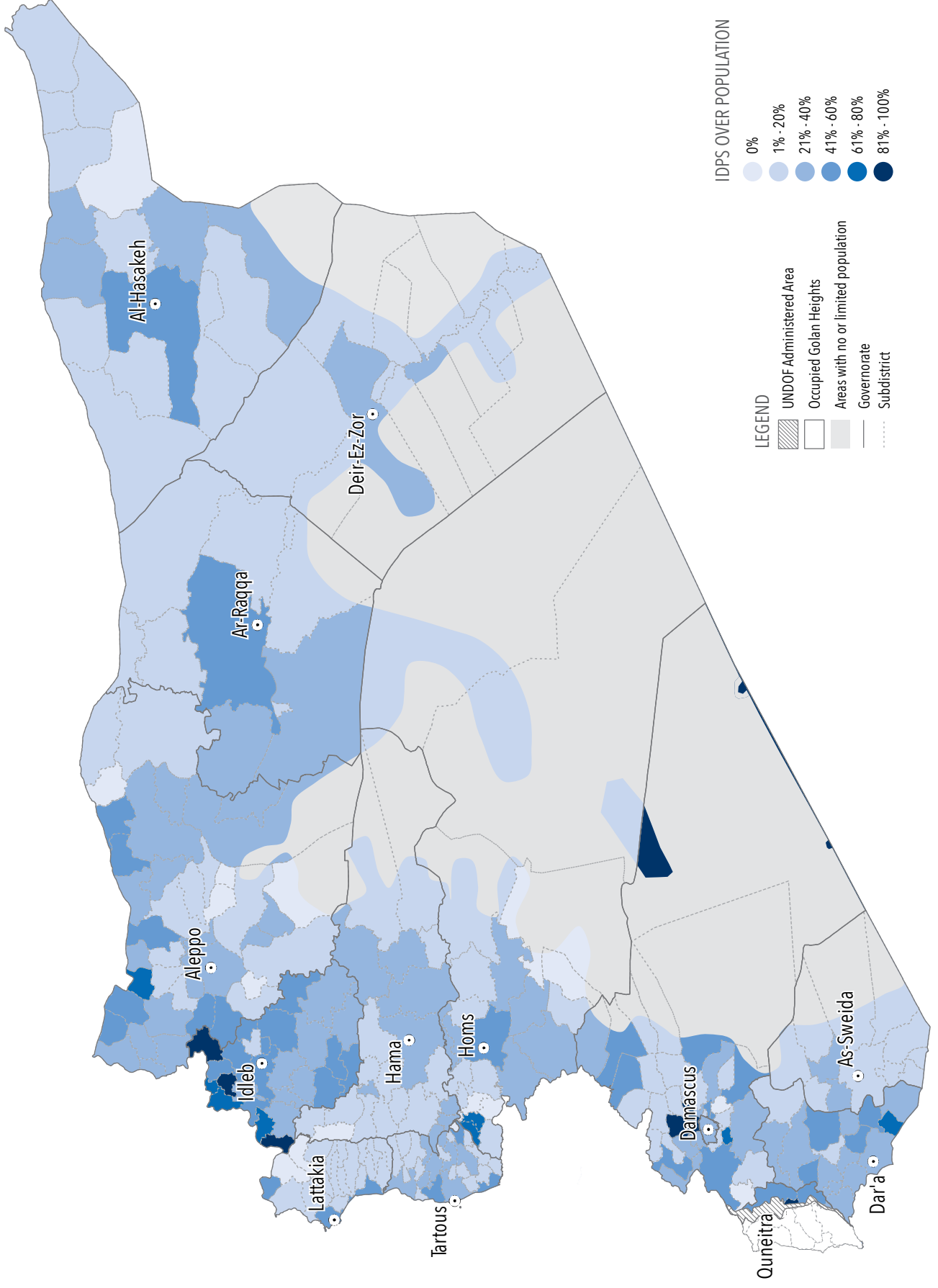
 More than 45,000 people besieged in Madamiyet Elsham.

More than 40 people reportedly die from starvation in Madaya over previous months, following lack of approvals by the GoS to provide humanitarian aid.

February 2016

 First US-Russian brokered “Cessation of Hostilities” agreement comes into effect.

INTERNALLY DISPLACED PERSONS



People seek livelihoods and security in urban areas

Half a decade of conflict has had a profound impact on urban and rural parts of Syria respectively. Many urban areas have undergone complete changes in their make-up. Those which have been significantly affected by conflict have been hollowed out, as residents have fled violence, destruction and the collapse of basic services. Other areas promising relative security and consistency of services have experienced vast population influxes. The net result has been a significant concentration of the population in urban centres, accompanied by large IDP movements. In response to changing conflict dynamics, urban areas now host 64 per cent of the overall population, including 70 per cent of the IDP population, putting beleaguered services and infrastructure under yet further strain.

Abduction, detention, attacks on hospitals, schools and other civilian infrastructure, as well as the denial of aid, are among the violations of children’s rights documented on a daily basis.

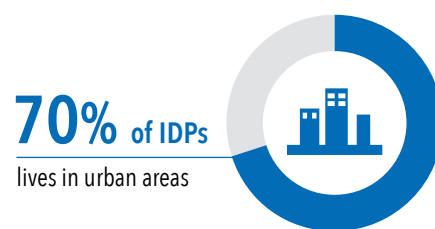
As the conflict persists, children face increasing risks of violence and exploitation associated with forced and repeated displacements, family separation, extreme poverty and the disintegration of social support structures. Approximately 7 million children now live in poverty.⁵⁴ This has put immense pressure on families who are rapidly running out of resources and coping strategies. Since the beginning of the conflict, increases in child marriage – particularly affecting girls of increasingly young age - and child labour, - for example, begging, smuggling, scavenging - have been widely reported.⁵⁵ Recruitment and use of children in the conflict is also widespread,⁵⁶ particularly affecting boys. Lack of access to education and child protection services has compounded these risks.⁵⁷

Children: Growing up amid conflict

“ The new generation is broken... children’s mental health is at its worst.”

The conflict in Syria has taken a particularly heavy toll on children and youth. Over 5.8 million children under 18 now need humanitarian assistance, including specialized protection services.⁵¹ Though the images of children like Alan Kurdi, Omran Daqneesh and Rawan Alowsh captured global attention, helping imprint the brutality of this conflict on the world’s collective consciousness, these are not isolated or exceptional cases.⁵² Day after day, girls and boys in Syria face unimaginable violence, with the persistent use of heavy weaponry in civilian areas and besiegement impacting children most directly. In the first six months of 2016, close to 750 grave violations against children were documented, with maiming and child recruitment the most common, particularly amongst boys.⁵³

Youth and adolescents, comprising some 56 per cent of the population,⁵⁸ have also been drastically affected by conflict. Unemployment rates among youth are estimated to be 78 per cent and are significantly higher among women.⁵⁹ Many live in fear, isolation, and uncertainty over what the future has in store, with some 2.6 million internally displaced and 2.7 million in need of assistance.⁶⁰ Adolescents and youth have grown increasingly frustrated and disempowered by their limited access to quality education, protection and basic services, high unemployment rates, restricted livelihood opportunities and limited opportunities to contribute to their communities. The 2016 mapping of adolescent and youth interventions inside Syria highlighted that only 24 per cent of adolescents and youth were reached across sectors, 40 per cent of interventions mapped had



April 2016

First WFP-led airdrop reaches Deir-Ez-Zor.

May 2016

UN Security Council unanimously adopts Resolution 2286 against attacks on health workers and facilities.

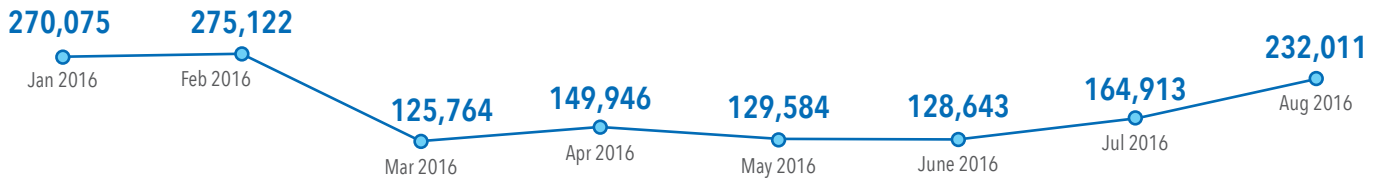
June 2016

UN and partners reach all 18 besieged areas at least once.

July 2016

Hostilities between the government of Syria forces (GoS) and non-state armed groups halt all traffic in/out of eastern Aleppo city.

NEWLY INTERNALLY DISPLACED PERSONS



programmes specifically designed for adolescents and youth, and only 28 per cent of partners engaged young people in either assessment, planning, implementation or monitoring of the intervention.⁶¹ Empowered and skilled adolescents and youth are critical to the future of Syria. Provided with the right opportunities, adolescents and youth have the intent and energy to contribute positively to their communities, participate in decision making, promote social cohesion and reframe their reality, despite their own difficult situation.

Real and immediate concerns over the possible loss of a generation of children and youth to a combination of child protection risks, lack of access to quality education and limited opportunities for adolescents and youth for meaningful engagement with their communities underlines the importance of the "No Lost Generation" (NLG) approach in placing these issues at the centre of the humanitarian response to the Syria crisis.

Livelihood opportunities have been destroyed and poverty is reaching extreme levels

In 2016, the combination of currency depreciation and high prices left families in Syria struggling to meet basic needs. Livelihood opportunities have further diminished, with loss of income affecting millions of dependents. An estimated 85 per cent of Syrians now live in poverty. Of these, 69 per cent live in extreme poverty, of whom 35 per cent are in abject poverty, unable to meet the basic food needs of their households.⁶³ An average household currently spends 14 per cent of its monthly income on water alone. With fuel prices increasing by 39 per cent in June alone,⁶⁴ household incomes will likely be placed under further pressure.


Unsafe and undignified coping strategies increasing, as families' survival strategies are exhausted

Safe and dignified coping strategies have been largely exhausted. Some 79 per cent of households surveyed by a recent food security and livelihoods assessment reported resorting to unsustainable coping strategies such as missing meals, reducing the size of meals and borrowing food due to a significant


“ I have a 12-year-old and a 13-year-old daughter that I want to get married because I fear for their safety.⁶² ”

Woman in Idleb Governorate

July 2016


 Airstrike in Jasim, Dar'a governorate, destroys the town's only hospital. Since the onset of conflict, attacks on medical facilities have killed more than 750 medical personnel.

August 2016


 Moaz and Nawras Hashash, conjoined twins from Eastern Ghouta requiring emergency medical evacuation out of Syria, die in Damascus after one month due to delays in paperwork.

Population of Darayya evacuated after signature of agreement with GoS.

August 2016

 Second US-Russian brokered Cessation of Hostilities comes into effect but breaks down after several days.

September 2016

 Attack on UN/SARC Convoy to Big Orem, kills 18 humanitarians, 15 drivers, and multiple civilians and temporarily causes the suspension of cross-line convoys.

lack of food and or money.⁶⁵ Domestic violence continues to rise. Community cohesion is deteriorating. Growing tensions between IDPs, and between IDPs and host communities, due to competition over increasingly limited resources, are reported in some areas of the country. According to some accounts, there are indications that petty crime, previously a rare occurrence, has increased significantly in some areas. Today, the pressures and strains of almost six years of conflict are transforming long-held concepts of childhood, marriage, and family, with practices such as child labour and early marriage increasingly prevalent.⁶⁶

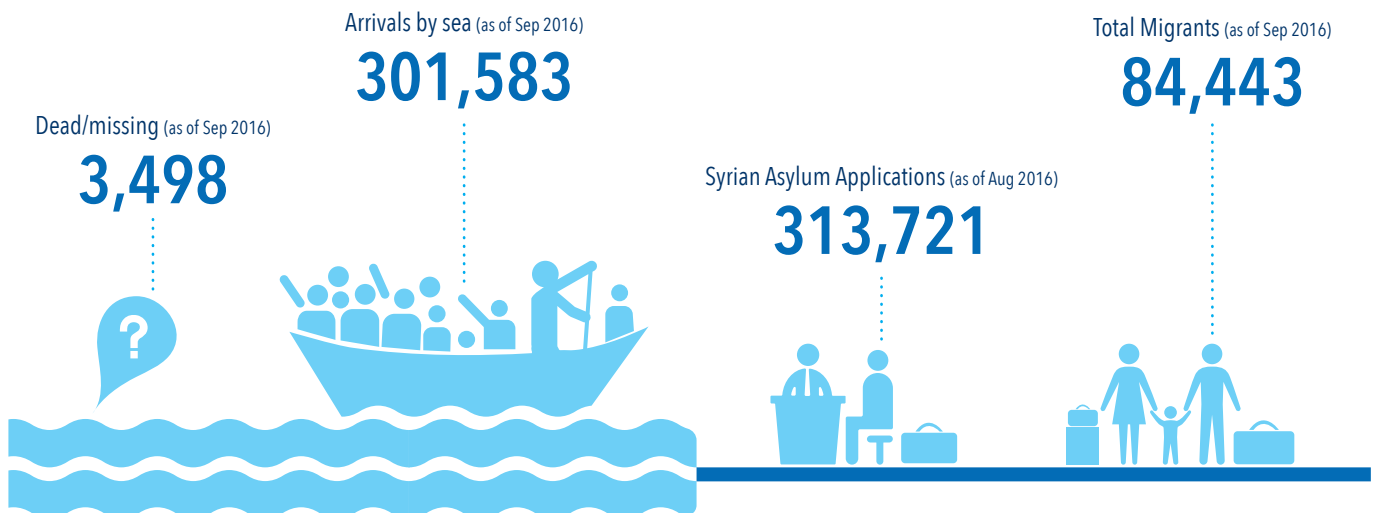
“ There are women who are forced to sell their honour [bodies] to be able to buy bread. Many [women] have sold their dignity in order to survive.⁶⁷ ”

Man in Aleppo Governorate

Impact reverberates across regions and generations

The impact of the Syria conflict has reverberated across the Middle East and beyond. Unprecedented levels of displacement and geopolitical upheaval are just some of the destabilizing factors associated with the conflict that are affecting the wider region.⁶⁸ Meanwhile, people in Syria have been traumatized in ways that will define the lives of future generations. While an end to the conflict will help alleviate their physical suffering and allow Syrians a chance to begin rebuilding their shattered lives, it is important to remember that this conflict has already taken an irreversible toll on whole swathes of the population. Parents have lost children, families have seen their homes and livelihoods destroyed, children have been robbed of their childhoods, young people have seen their dreams disintegrate, and the Syrian people have seen their rich heritage under attack. Across the country, trust and dignity have been eroded.⁶⁹

SYRIANS RISK THEIR LIVES FOR A SECOND CHANCE IN EUROPE



KEY

FIGURES



Humanitarian Needs

13.5M people are in need of humanitarian assistance, of whom **5.7M** are in acute need due to a convergence of humanitarian risk factors

Over **12.8M** people in Syria, require health assistance

9M people are in need of food, agriculture and livelihoods assistance, out of which **7M** are food insecure, and a further **2M** are at risk of food insecurity

4.3M people are in need of shelter, **3.8M** of whom face acute and immediate needs

Households spend up to **25%** of income to meet minimum daily water requirements

Over **13.8M** Syrians require early recovery and livelihood support to sustain and restore lives and livelihoods affected by the conflict



Conflict

30,000 people suffer conflict-related trauma injuries every month, of whom are left with permanent disabilities



Increased use of incendiary weapons, barrel bombs, and 'double tap' attacks on first responders

Continuing conflict and **deteriorating social cohesion** is forcing individuals and families to resort to negative coping mechanisms as a means for survival

770 health workers have been killed since the conflict began

Two lapsed **cessation of hostilities agreements** and political retrenchment have failed to address drivers of the conflict in 2016

Tens of thousands of Syrians are missing since the conflict began, thousands in circumstances that suggest they have been forcibly disappeared



Displacement

Over half of all Syrians have been forced from their homes since the start of the conflict in 2011:

6.3M people are internally displaced

Almost **4.8M** Syrians are registered as refugees in neighbouring countries

1.2M Syrians have applied for asylum in Europe

THE RATE OF DISPLACEMENT CONTINUED UNABATED IN 2016 WITH AN AVERAGE OF 6,150 PEOPLE DISPLACED PER DAY BETWEEN JANUARY AND AUGUST

65% of people displaced between January and August

2016 were displaced to areas under the influence of non-state armed groups

Over **1M** Syrians live in shelters of 'last resort' such as collective centres (schools, public buildings, mosques), camps or makeshift shelters, many of which are located in rural areas, where people are almost four times more vulnerable than in urban areas



No Lost Generation

2.9M Syrian children under the age of 5 have grown up knowing nothing but conflict

Nearly **7M** children in Syria live in poverty

One-third of school-age children in Syria are not in school, with **one-third** of schools out of service

750 grave violations against children were reported in the first half of 2016, with killing, maiming and child recruitment the most common

90% of surveyed locations reported child recruitment

More than **one-third** of the **6M** adolescents and youth inside Syria are internally displaced

2.7M youth are in need of assistance



Economic Collapse

By the end of 2015, **4 in 5 people** in Syria live in deepening poverty

By the end of 2015, the unemployment rate reached **53%**

Dependency on aid reported in **90%** of surveyed sub-districts

11.8M people lack power for up to 18 hours per day

2.7M people have lost their jobs over the course of the conflict, with the loss of income further affecting the lives of **13.8M** dependents

Damage to transport infrastructure such as roads and bridges affects **3M** people across Syria, reducing economic interactions and livelihoods

The cumulative **economic loss** to Syria resulting from conflict has reached **US\$ 254.7B**



Access Constraints

(Besieged, Hard-to-Reach, Militarily Encircled)

4.9M people in need in besieged and hard-to-reach areas, including **0.97M** people in besieged areas, **0.94M** in militarily encircled areas and **1.4M** people, **0.63M** of whom are children, in areas controlled by ISIL

Life-saving basic medical supplies continue to be systematically removed from cross-line medical convoys and medical evacuations obstructed by the parties to the conflict on political grounds

Dozens of civilian deaths reported in besieged areas in 2016 from denial of access to **food or medicine**

Despite significant improvements in cross-line convoys, only **50%** of aid convoys to besieged locations proceeded according to monthly plans



Protection of Civilians

Attacks using explosive weapons, many of which appear to be unlawful, continue to affect civilians

6.3M people are living in areas with high exposure to explosive weapons
88% of sub-districts identify explosive hazards as a protection concern
20% of all airstrikes in Syria are recorded in densely populated, besieged locations

Over **50%** of sub-districts report sexual violence as a concern in their communities

85% of sub-districts report **early marriage** as a primary concern

lack of civil documentation reported as a major issue by populations of **81%** of assessed sub-districts



Humanitarianism under attack

Local humanitarian relief organizations impacted by attacks that kill aid workers and destroy vital life-saving equipment and supplies

from January to August 2016, **101** attacks on hospitals and health care centres were reported, killing **14** health care workers and injuring a further **40**

PARTIES TO THE CONFLICT CONTINUE TO CARRY OUT WIDESPREAD AND SYSTEMATIC VIOLATIONS OF HUMAN RIGHTS, WITH CHILDREN AND WOMEN PARTICULARLY SUSCEPTIBLE TO ABUSE AND EXPLOITATION

Humanitarian aid convoy carrying relief to Big Orem in Aleppo attacked in September, killing **33** people

147 humanitarian workers killed since the start of the Syria crisis, with **66** killed and **114** wounded in 2016

BREAKDOWN OF

PEOPLE IN NEED

A total of 13.5 million people face some form of humanitarian need – including 5.7 million in need of immediate live-saving assistance.⁷⁰ Most needs relate directly to widespread violence, multiple and prolonged displacement and growing poverty that have defined the lives of people in Syria affected by the conflict.⁷¹

VULNERABILITIES OF PEOPLE IN NEED

All people affected by the conflict in Syria require protection and assistance due to ongoing conflict and pervasive IHL violations in many areas. Assessment findings show that all groups⁷² all face specific protection risks. Vulnerabilities associated with age, gender, status, identity, ethnicity, religion and profession have been heightened by the conflict and are generally exacerbated by proximity to conflict areas. Some groups and communities have been

specifically targeted. As such it is important to focus not only on the most vulnerable but also on the nature of threats to different groups.

NUMBER OF PEOPLE IN NEED

13.5M

BREAKDOWN BY SECTOR

SECTOR/CLUSTER (NUMBERS IN MILLION)	BY STATUS		BY SEX & AGE		TOTAL
	Male	Female	children, youth	adult, elderly	People in need
WASH	7.2	7.7	6.4 3	5.5 0.9	14.9 Acute humanitarian need 8.2
ERL	6.6	7.2	5.9 2.8	5.1 0.8	13.8 Acute humanitarian need 10
Protection	6.5	7	5.8 2.7	5 0.8	13.5
Health	6.1	6.7	5.5 2.6	4.7 0.76	12.8
FS	4.3	4.7	3.9 1.8	3.3 0.5	9
CCCM	3	3.3	2.7 1.3	2.3 0.4	6.3
Education	2.8	3.3	children (5-17) 5.8	education personnel 0.27	6.1
NFI	2.8	3	2.5 1.2	2.1 0.3	5.8
Nutrition	1.5	2.9	children 6-59 months 2.9	PLWs 1.5	4.4
Shelter	2.1	2.2	1.8 0.8	1.6 0.25	4.3

SEVERITY OF

NEED

While the crisis in Syria has left no one untouched, the impacts differ. Some parts of the country and segments of the population are more acutely affected than others. Sector severity categorization tools look to ensure that sector-specific humanitarian assistance is prioritized according to the level and scope of needs faced by people in Syria. These tools are supplemented by the inter-sectoral categorization tool which will be regularly updated to highlight changes on the ground and ensure humanitarian partners are able to identify areas where multi-sectoral needs converge and which therefore require strengthened inter-sector programming.

Of the 13.5 million people in need, in 16 areas across the country currently categorized as besieged, some 974,080 people in need face a life-threatening situation due to an acute lack of access to food, water, and health care, extreme restrictions on freedom of movement and, in some areas, the intensity and proximity to conflict and aerial bombardment.⁷⁴ With commercial goods and, frequently, humanitarian assistance prevented from entering, basic supplies are often unavailable in local markets or extremely expensive. Humanitarian access to besieged locations remains inadequate and unpredictable. While conditions and levels of suffering vary in besieged areas, needs are almost always extremely severe, and lifesaving and life-sustaining assistance is required for most.

A further 5.7 million people in need live in areas of Syria where the level of need is considered to have reached catastrophic, critical, or severe levels, including 1 million in areas categorized as catastrophic, 383,000 in areas categorized as critical, and 3.3 million in areas categorized as severe.⁷⁵ Of this total, 1.7 million live in areas categorized as hard-to-reach, including 935,500 in militarily encircled areas.⁷⁶ Although humanitarian assistance can occasionally reach locations where needs have reached catastrophic, critical, or severe levels and civilians can access relief items and services, this support is often unpredictable and/or inadequate. Where limited services are available, they are often overstretched and under-resourced and hence capable of addressing only a fraction of needs. Additionally, people living in these areas face a convergence of needs, due to factors such as limited access to livelihoods and growing impoverishment, intense conflict, high prices, decreased purchasing power, and increased strain on community resources due to large IDP influxes. A limited range of food and other key commodities may be available on the market, albeit at inflated prices, yet remain unaffordable for many families. In militarily encircled areas, restrictions on freedom of movement and reduced market functionality further compound these issues.

The remaining 7.8 million people in need in Syria live in areas of the country where the severity of need is considered major, moderate, or minor, including 5.2 million in areas categorized as facing major problems, 2.3 million in areas facing moderate problems, and some 315,460 in areas facing minor problems.⁷⁷ Some of these areas are categorized as hard-to-reach, but many are accessible to humanitarian actors. Most are experiencing relative security, consistency of services, and market functionality/accessibility. While the conflict has resulted in increased unemployment, higher prices and demographic upheaval as a result of the influx of IDPs, overall levels of need tend to be lower. Investment in preventative actions and measures to strengthen resilience to shocks remain critical in these communities.

With areas of Syria facing different realities, responders need to be able to prioritize assistance based on severity of needs, and to ensure that the limitations and opportunities on the ground are taken into account. Ultimately this will facilitate a more effective, efficient and sustained response tailored to local context. For example, while delivering food rations may be essential in besieged and other hard-to-reach areas, as well as rapid response to new waves of IDPs, humanitarian actors may also address longer-term food insecurity in other areas by providing seeds, enabling local production and promoting the restoration of livelihoods.

Given the fluidity of the situation in Syria, partners require flexibility from donors in order to respond to the dynamic context and changes in needs and access. At the same time, it is important to effectively prioritize ongoing programmes to ensure that the situation of people with chronic needs does not further deteriorate.

The methodology underpinning the inter-sectoral categorization of severity needs, as well as the full list of localities, can be found on the Syria Humanitarian Response Plan website indicated in the contact section of this document.

INTER-SECTORAL SEVERITY OF NEEDS

 **0.97M**

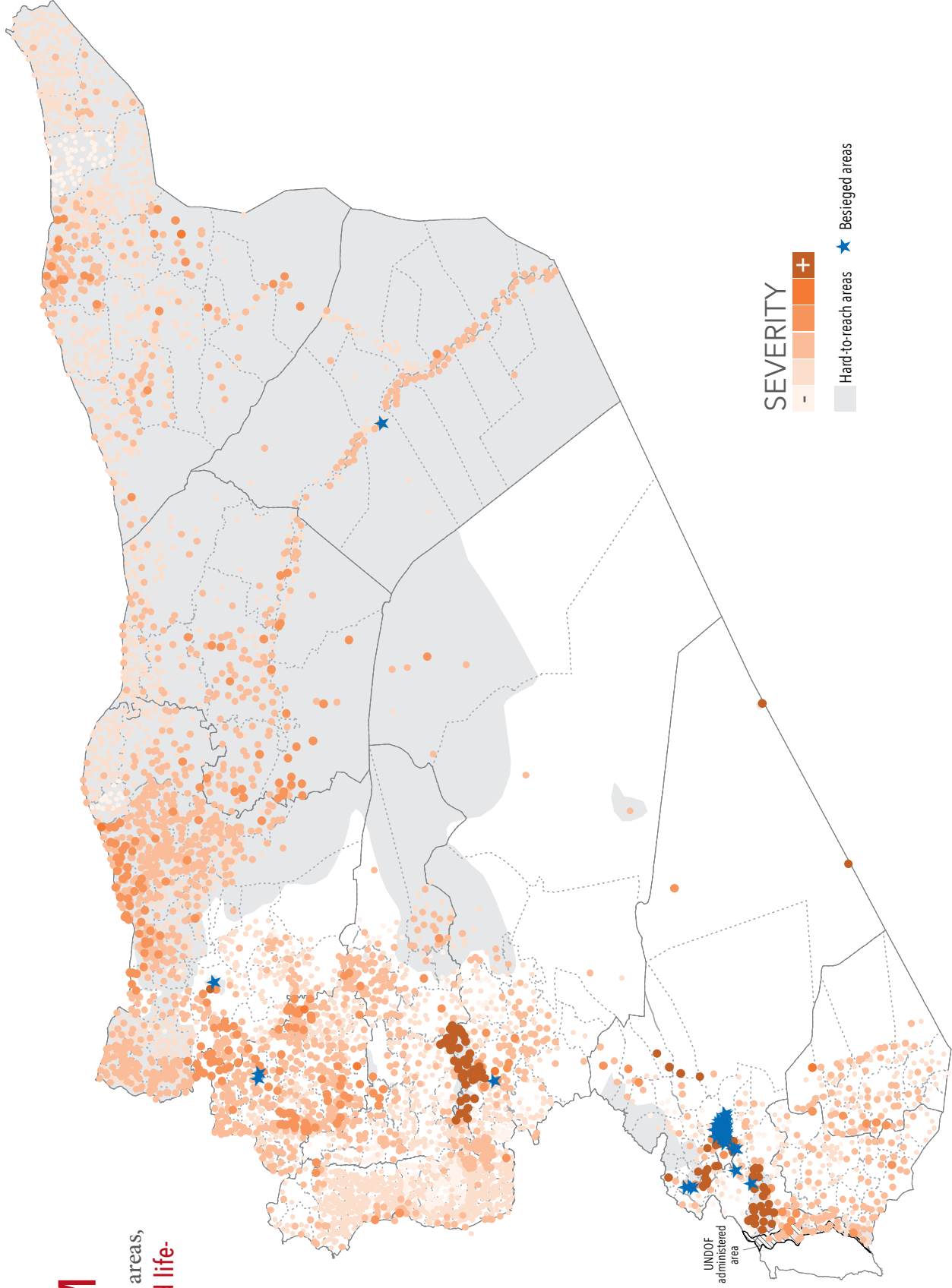
people in need in besieged areas, facing acute **protection and life-threatening needs**

 **3.9M**

people in need in hard-to-reach locations, including **0.94 million** in militarily encircled areas

 **5.7M**

people with severe needs



GAPS

ANALYSIS

The Syria response is one of the largest in the world, yet the scale and scope of humanitarian needs far surpass humanitarian actors' ability to respond. Key geographic and sector gaps remain, largely as a result of access constraints. Given limited resources, and a lack of political will to consider humanitarian causes above geopolitical issues, responders are forced to make difficult choices as to where and whom to target.

“ During distributions, most women who are single, widowed, or divorced don't receive their share.⁷⁹ ”

Man in Dar'a Governorate.

The most critical gaps tend to arise in areas facing high severity of need, but extremely challenging to access. This includes besieged and hard-to-reach locations, such as the besieged city of Deir-ez-Zor and ISIL-held areas of Deir-ez-Zor and Ar-Raqqa governorates (the latter categorized as hard-to-reach), where access remains highly restricted due to insecurity and ISIL's restrictive policy vis-à-vis the delivery of humanitarian assistance. In Al-Hasakeh, in Syria's northeast, the partial closure of adjacent borders and the presence of ISIL in surrounding areas also create unique humanitarian access challenges. In all of these locations, many sub-districts are only reached by one sector or not reached at all, despite widespread humanitarian needs.

There are gaps in response due to capacity limitations. As humanitarian and protection needs continue to grow in scale, severity, and complexity, humanitarian organizations have been forced to prioritize interventions with immediate, life-saving impacts, over much-needed preventive actions. This often includes efforts to restore livelihoods and socio-economic infrastructure, and sustained delivery of basic services. Another challenge is providing assistance in response to evolving situations such as large-scale displacements, while at the same time maintaining regular programming for IDPs facing protracted displacement and other communities.












Given the complex and dynamic operating environment in Syria, identifying and assisting individual vulnerable groups has also emerged as a major challenge. Groups known to face particular barriers to accessing humanitarian aid include people without civil documentation, female- and child-headed households, the elderly, people with disabilities, and others who are subject to discrimination, such as single women or IDPs fleeing from another area. There is evidence that economic violence is rising, affecting access to aid among women and children in ways that are difficult to measure.⁷⁸

The sector-specific gap analyses presented below reflect top-line interventions. However, with affected populations' needs continuing unabated, these gaps do not reflect the fact that due to funding shortfalls, sector partners cannot meet many needs.

“ Some women never benefit from the basket because the husband sells it [...] He doesn't even give the money to his family [...] he takes the money to buy cigarettes. He cannot run out of cigarettes. This is sometimes the only thing a father does.⁸⁰ ”

Man in Dar'a Governorate.

SECTOR REACH VS PEOPLE IN NEED

SECTOR/CLUSTER	Reached Jan-Aug 2016	Targeted 2016 HRP	People in need as per 2016 HNO	Gap % (against PIN)
 Protection*	4.6M	10.9M	13.5M	66%
 WASH**	16.4M	14.7M	12.1M	-
 Health***	10.8M	13M	11.5M	7%
 Early Recovery & Livelihood	2.2M	3.6M	9.2M	77%
 Food assistance	6.6M	7.5M	8.7M	25%
 Agriculture	1.2M	4.3M		
 CCCM	1.6M	3.2M	6.5M	75%
 Education	1.3M	4.6M	5.7M	77%
 NFI	4M	5.3M	5.3M	24%
 Nutrition	2.1M	1.9M	3.1M	32%
 Shelter	0.27M	1.2M	2.4M	89%

*Total interventions targeted by Protection sector

**Support to operation and maintenance of water facilities

***Medical procedures is an aggregate indicator that includes consultations (OPD consultations at PHC and hospital), referral cases, mental health consultations, trauma cases, persons with disabilities supported and deliveries by Skilled Birth Attendant (SBA)."

Source: Who does what where (4W) data as reported by Whole of Syria sectors

ACCESS AND

OPERATIONAL
CHALLENGES

Obstructions imposed by parties to the conflict on humanitarian action compound the devastating effects of violence on the Syrian people and represent the single greatest constraint on the humanitarian response. The consequences of these obstructions far exceed those of funding shortages, general insecurity, and other factors impacting operations.

Access

The lack of safe, unimpeded, and sustained access for humanitarians operating in Syria remains the greatest obstacle to reaching people in need. A variety of administrative and political factors further impede humanitarian access. Notable improvements in access to besieged, military encircled and hard-to-reach areas were achieved in 2016 compared to the previous year. In 2015, 25 inter-agency convoys reached 620,565 people in need in besieged and hard-to-reach locations.⁸¹ Since the beginning of the year to mid-October 2016, the UN and partners have conducted more than 87 inter-agency cross-line convoys, reaching almost 3.2 million people in need.⁸² However, humanitarian actors are all too seldom able to deliver life-saving assistance and protection services in a timely, effective and strictly needs-based manner on a sustained basis. A range of factors continues to obstruct the humanitarian response, with parties to the conflict denying life-saving medical evacuations on political grounds, removing critical medical supplies from cross-line convoys, delaying issuance of the approval and facilitation letters required for convoys entering besieged and hard-to-reach areas, placing restrictions on the activities of humanitarian actors within respective areas of control and sometimes directly targeting humanitarian workers.

To adapt to these challenges, humanitarian partners, working together from multiple countries - Syria, Turkey, Jordan, Lebanon, and Iraq - continue to employ a combination of regular, cross-line, and cross-border modalities to deliver humanitarian aid to people in need. As a measure of last resort, in the first half of 2016, the UN also commenced a series of high-altitude airdrops to Deir-ez-Zor City and later airlifts from Damascus to Qamishli. UN agencies in Turkey and Jordan conduct cross-border operations under UNSC resolutions 2165/2191/2258, acknowledging, inter alia, the need to provide assistance to people in need “using the most direct routes across borders and across conflict lines.”⁸³

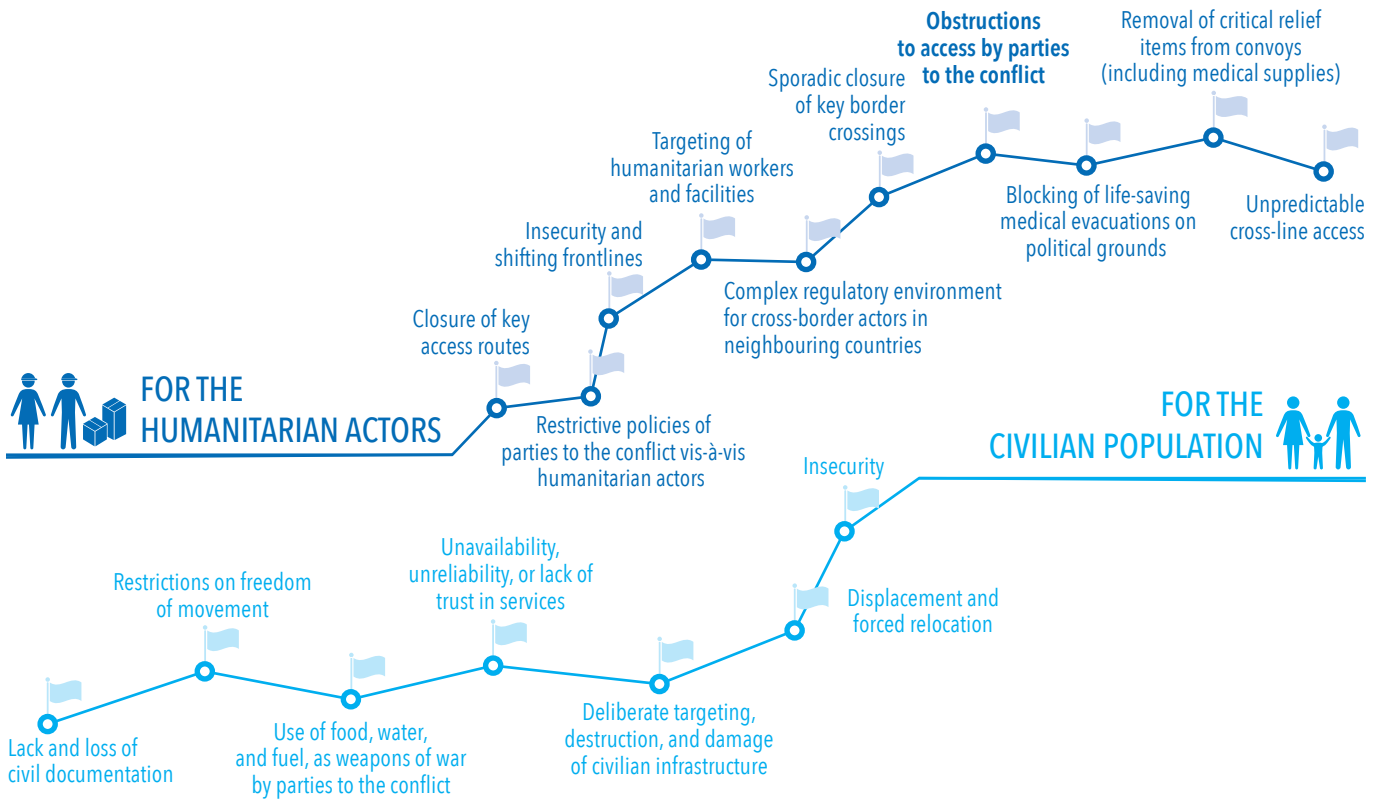
Despite these measures, access to many areas with severe needs remains extremely constrained. Despite persistent and continuous access negotiations, conflict dynamics combined with a blatant disregard for international legal obligations by the warring parties, have undermined efforts to uphold humanitarian principles and imperatives. While the humanitarian community grapples with this challenging operational context, the blame for the continued obstruction of humanitarian access falls squarely on the parties to the conflict, who have both the ability and the legal obligation to facilitate humanitarian access to people in need in all areas of Syria without condition or delay.

A further 3.9 million people in need live in areas that are ‘hard-to-reach’ for humanitarian organizations – locations that are not regularly accessible for sustained programming due to unlawful obstruction of humanitarian assistance by parties to the conflict.⁸⁴ While these areas are more regularly accessed than besieged areas, particularly through NGO programming, access is still insufficient to meet needs.

Operational challenges

Syria is one of the most dangerous countries in the world to be a humanitarian or health worker. Increasingly, humanitarian staff and facilities are deliberately and indiscriminately targeted by parties to the conflict, creating an extreme level of risk to their lives and operations. From 2011 to 2015, at least 81 UN and Red Crescent/Cross Movement aid workers were confirmed killed, and as many as several hundred largely Syrian NGO staff. In 2016, at least 37 humanitarian workers were killed and 56 wounded.⁸⁵ Some 750 medical staff are also reported to have been killed since the start of the conflict,⁸⁶ including 21 humanitarian health staff confirmed killed and 55 wounded in 2016.⁸⁷ There have been 48 kidnappings of humanitarian workers reported since the start of the conflict.⁸⁸

ACCESS CHALLENGES



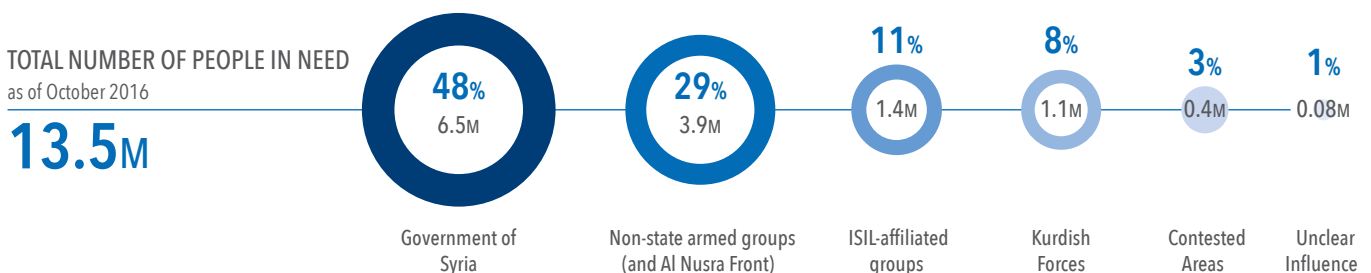
The attack against a clearly marked UN/ SARC aid convoy in Big Orem, Aleppo governorate on 19 September, killing a Syrian Arab Red Crescent (SARC) staff member and 20 civilians, some of whom were UN subcontracted truck drivers, marked a new low point in the indiscriminate attack against humanitarianism that has become a tragic feature of the humanitarian response to the Syria crisis.⁸⁹

Administrative constraints

Despite increased permission for cross-line activities in 2016, bureaucratic impediments continue to inhibit humanitarian work in Syria. While there has been some substantial progress with regard to INGO operating space in GoS-controlled

areas, with INGOs able in some instances to establish field offices inside Syria, enter into partnerships with approved national NGOs, and include items, but not staff, on inter-agency cross-line convoys,⁹⁰ there is still a long way to go. For partners operating cross-border, it remains difficult to bring staff predictably from inside Syria across the border for rotation or for training, undermining programming and efforts to strengthen local capacity. In some locations, explosive remnants of war and the use of landmines, as well as improvised explosive devices (IEDs) and ‘booby traps’, particularly in areas recently under ISIL-control, are significant barriers to humanitarian operations, even as civilians return to these areas. Permission for humanitarian mine action professionals to enter Syria and clear hazards in these locations is crucial, but has so far not been granted.

PEOPLE IN NEED BY AREA OF CONTROL



OPERATIONAL

CAPACITY

Humanitarian and humanitarian assistance. It is important to note that “people reached” may still have unmet humanitarian needs, including requiring continuous support in one sector and/or assistance from more than one sector. Humanitarian needs far exceed the humanitarian response due to both insufficient resources and impediments to humanitarian access.

Overall, over 300 Syrian NGOs, more than 60 international NGOs, the Red Cross/Crescent Movement, and thirteen United Nations agencies are engaged in the provision of assistance across Syria.⁹¹ National staff and volunteers remain the first responders, working in extremely volatile and insecure environments. These efforts are coordinated through sector and cluster mechanisms in each hub (Syria, Turkey and Jordan), supported by OCHA and led by a Humanitarian Coordinator in each country. The number of partners involved in the response to the Syria crisis continues to increase, generating new capacities for response including through the expansion of humanitarian presence and ability to deliver services, access permitting. Compared to 2015, there has been an increase of partners authorized by the GoS to carry out humanitarian activities in areas under its control, with 21 INGOs and more than 188 national non-governmental organisations (NNGOs) now authorised.⁹²

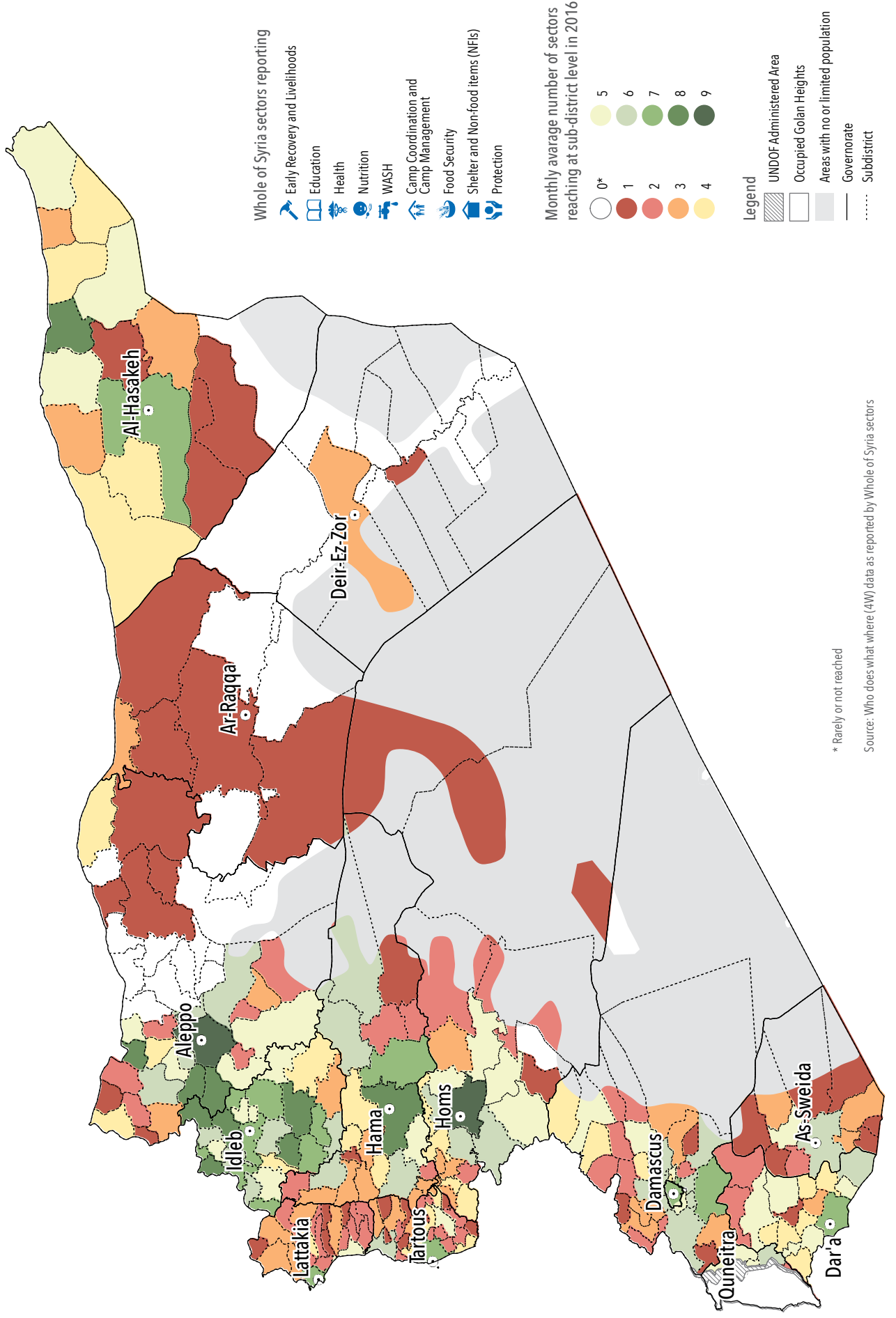
Through the existing sector and cluster mechanisms, OCHA and clusters are coordinating the efforts of over 185 national NGOs working in humanitarian aid operating from neighbouring countries, especially Turkey and Jordan, of which over 85 participate in clusters/sectors coordination mechanisms and deliver substantive levels of assistance in Syria. More than 50 INGOs operate cross-border in Syria under the HRP. In mid-2014, the UN began cross-

border operations under UNSC Resolutions 2165, renewed by Resolution 2191. The resolutions also established a UN Monitoring Mechanism (UNMM) and requested its deployment to the relevant neighbouring countries of Syria (Jordan, Iraq and Turkey). The mandate of the UNMM is to monitor the loading of the cross-border humanitarian relief consignments and subsequently confirm their humanitarian nature with notification to the Syrian authorities.

Despite growing capacity, there is a continuing need for long-term capacity-building initiatives - particularly for national partners - to engage further in specialized areas, such as legal assistance, child protection, gender-based violence (GBV), housing, land and property. Further capacities are also needed for shelter rehabilitation. Technical capacity and partnership opportunities remain obstacles to substantively scaling up and diversifying services across Syria.

Since the inception of the WoS approach, progress has been made regarding information exchange and operational coordination, reducing overlap in coverage and facilitating the response through the most direct and effective modalities of assistance available.

OPERATIONAL PRESENCE (NO. OF SECTORS PER SUB-DISTRICT)



ASSESSMENT METHODOLOGY AND

INFORMATION GAPS

The HNO inter-sector assessment complements the sector-specific needs assessments and data collection exercises by providing opportunities for strengthened inter-sectoral programming. While sector-specific assessments form the basis of the needs identification process, the inter-sectoral assessment ensures a more effective response by identifying areas where multi-sectoral needs converge. Sector-specific needs assessment methodologies ensure contextual and technical adequacy while the inter-sector assessment methodology enables comprehensive scope and coherence of inter-sectoral needs.

The 2017 HNO is based on a comprehensive data collection exercise, carried out with the support of a network of 72 partners working from all hubs.⁹³ Resulting from the combined efforts of operational partners and humanitarian data collection initiatives, the 2017 HNO presents community-level needs as identified across 91 per cent of the country (5,014 of 5,593 of communities surveyed), including 79 urban areas where data was collected at the neighbourhood level.

Through this exercise, inter alia, humanitarian partners refined sex-, age-, and disability-disaggregated (SADD) humanitarian planning estimates (population figures and IDP stocks and flows). These humanitarian planning estimates represent a snapshot of the demographic situation in Syria as of August 2016. However, given the complex internal displacement patterns and large-scale exodus of people from Syria over the past six years, it is recognized that they do not constitute complete and precise numbers of people in the country today. It is recognized that these figures must be regularly updated.

Leveraging tools for direct community consultation including key informant interviews, household interviews and focus group discussions, the assessment also surveyed the perceptions of the population in terms of their needs, looking at a large range of factors including protection, access to services, vulnerability, freedom of movement, and satisfaction with humanitarian assistance.

Data collected through the needs assessment was combined with specific technical studies, including a SMART survey,⁹⁴ a household-level water and sanitation assessment, as well as focus group discussions, which fed into sector needs analysis and the development of sector severity scales (see sector chapters).

Despite the monumental data collection exercise and the extent of locations surveyed – overcoming insecurity and access restrictions – a number of geographical areas (579 communities) were not reached. More detailed information is still required on a number of technical areas. It is also recognized that, due to constraints in the field, the inter-sectoral assessment suffered substantial gender bias. Notwithstanding the acknowledged deficiencies, the scope and depth of inter-sectoral data on humanitarian vulnerabilities and needs collected at the community level is unprecedented in the context of the Syria crisis, and will provide a solid evidence base for a more effective and accountable humanitarian response in 2017.

PART I I: NEEDS OVERVIEWS BY SECTOR

INFORMATION BY SECTOR

-  Protection
-  Camp Coordination and Camp Management
-  Early Recovery and Livelihoods
-  Education
-  Food Security
-  Health
-  Logistics
-  Nutrition
-  Shelter and Non Food Items
-  Water, Sanitation and Hygiene



PROTECTION

KEY MESSAGES

- Grave violations of International Humanitarian and Human Rights Law continue, including direct targeting of civilians and indiscriminate attacks, resulting in loss of life, injury and deprivation.
- Persistent and extreme violence including GBV, forced displacement and family separation have resulted in a high-risk protection environment for all persons living in Syria, with women and children particularly vulnerable.
- Negative coping mechanisms have increased in use due to eroding community cohesion and exhausted resources, including economic assets necessary to survive.

The protection environment in Syria is characterized by the presence of almost every protection issue across the majority of the country. Despite the significant increase of protection responses and services throughout the country, the protection situation for those inside Syria remained dire in 2016. While the experience of people living in each location is shaped by the local context, everyone in Syria is possibly touched by at least one - if not multiple - protection concerns. The high occurrence of almost all issues in almost all locations shows that most protection concerns are inter-linked - between, for example, dependency on assistance, sexual exploitation, early marriage, child recruitment and labour. Proximity to armed hostilities, displacement, increased poverty, family separation, and lack of civil documentation have been identified as critical factors that increase protection risks and vulnerability of persons in Syria.

In 2016, the protection sector has access to a greater depth and variety of information and data than ever before – much of which is linked to increased (though still insufficient) services and presence of protection actors and programmes in Syria. Where possible this information is to be further analysed and used at the local level to develop, refine and support responses. However, this wide range of data also demonstrates the scale of challenges. It will require a concerted effort across the response to address these inter-linked and inter-dependent issues.

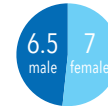
ANALYSIS OF HUMANITARIAN NEEDS

The protection environment illustrates the widespread presence of almost every protection issue across the majority of the country. Despite the significant increase of protection responses and services throughout the country in 2016, the protection situation for those inside Syria remains dire, and while each location has its own specificity, the overarching picture is that everyone in Syria is possibly touched by at least one - if not multiple - protection concerns. The high occurrence of almost all issues in almost all locations shows that most protection concerns are (logically) inter-linked, for example, between dependency on assistance,

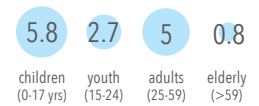
NO. OF PEOPLE IN NEED

13.5M

BY SEX



BY AGE



sexual exploitation, early marriage, and child recruitment and labour. Proximity to armed hostilities, displacement, increased poverty, family separation, and lack of civil documentation have been identified as critical factors that increase the protection risks and vulnerability of persons living in Syria.

In 2016, the protection sector has a wider array of information and data than ever before – much of which is linked to increased (albeit still insufficient) services and presence of protection actors and programmes in Syria. This information is to be further analysed and used at the local level to develop, refine and support responses where possible. However, this wide range of data also demonstrates the scale of challenges and that it will require a concerted effort across the response to address these inter-linked and inter-dependent issues.

ANALYSIS OF HUMANITARIAN NEEDS

Populations living inside Syria continue to face multiple, ongoing protection risks in the face of the immediate and indirect realities of the conflict. Indiscriminate attacks, besiegement, displacement, armed conflict and human rights violations persist. The protection risks are interlinked and often exacerbated by limited rule of law in some areas.

“ We have become tired on the inside, we cannot bear it, we keep thinking about what is going to happen, whenever we think forward we move back.* ”

In 2016, the protection sector collected information on 14 protection issues.^{95, 96, 97} Results show the widespread prevalence of multiple protection issues throughout most of the country. Nine of these 14 issues were reported to occur in 70 per cent of surveyed sub-districts. All 14 issues have been reported as occurring in 45 per cent of surveyed sub-districts. 44 per cent of sub districts are needs severity 4 or greater,⁹⁸ based on protection risks identified.

*All quotations throughout the document are from affected people consulted during the needs data gathering exercises.

PERVASIVE GENDER-BASED VIOLENCE

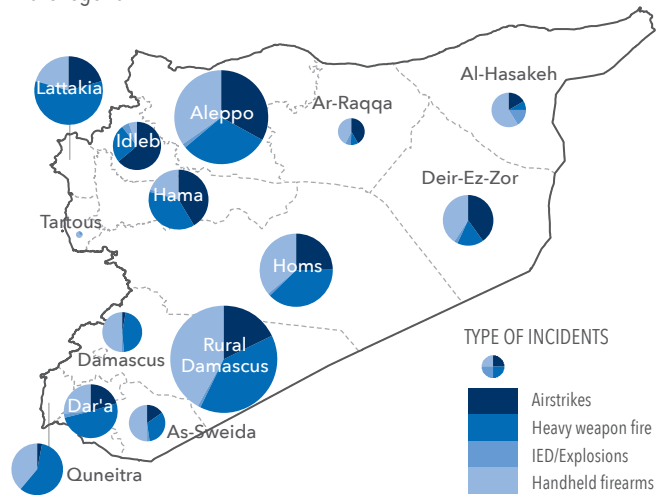
GBV pervades the lives of women and girls. The length of the crisis, in conjunction with the deep-rooted patriarchal structures underpinning Syrian society, are normalising this violence. Husbands reportedly tell their wives, “Stay at home and preserve your dignity.” Of the assessed sub-districts, 85 per cent report early marriage as a major protection concern, followed by domestic violence (71 per cent) and sexual violence (52 per cent). While women and girls are disproportionately affected by all forms of gender-based violence, boys are also seen to be at risk of sexual violence. New concerns are raised about women and girls reportedly being sexually exploited through temporary successive marriages.

“ I arranged my two daughters' marriages; one is 15 and the other is 14...this is because they are a big responsibility and there's no father. The best for me is for my daughters to get married in this situation. I had to.* ”

While GBV services have improved and expanded to more geographical areas, with 73 women's centres and more health facilities able to provide clinical management of rape, 76 per cent of assessed sub-districts still identify unmet needs with regard to specialized GBV services. Although all women and girls are vulnerable to GBV in the public and private sphere, adolescent girls are perceived to be at particular risk of sexual violence. Divorcees and widows face stigmatization and discrimination, potentially threatening their access to humanitarian aid.

Conflict incidents by Governorate (1 August 2015 - 31 July 2016)

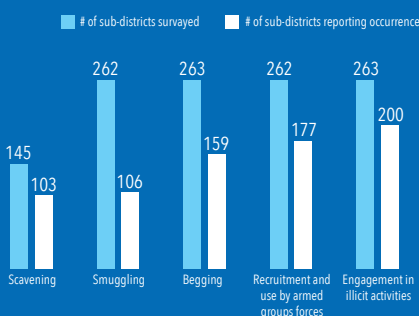
Size of piechart indicates proportional number of incidents in total
Different shades of blue indicate different types of incidents, as shown in the legend



Household-level gender roles are changing with women adopting roles more traditionally associated with men, such as paid labour and heading households, resulting in both empowerment of women, but also increased risks of violence against women and girls. Conservative practices imposed by extremist groups in some parts of the country, such as prescribed dress codes, negatively impact women's lives.

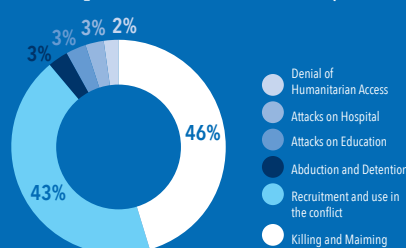
*All quotations throughout the document are from affected people consulted during the needs data gathering exercises.

WORST FORMS OF CHILD LABOUR



GRAVE VIOLATIONS AGAINST CHILDREN

(JAN-JUN 2016)
(MRM/ represents verified cases only)



1 in 3
girls and boys in Syria has known nothing but a lifetime shaped by conflict



EVER-GROWING CHILD PROTECTION NEEDS AND CHILD RIGHTS VIOLATIONS

“ Our children are working so that we can live.*”

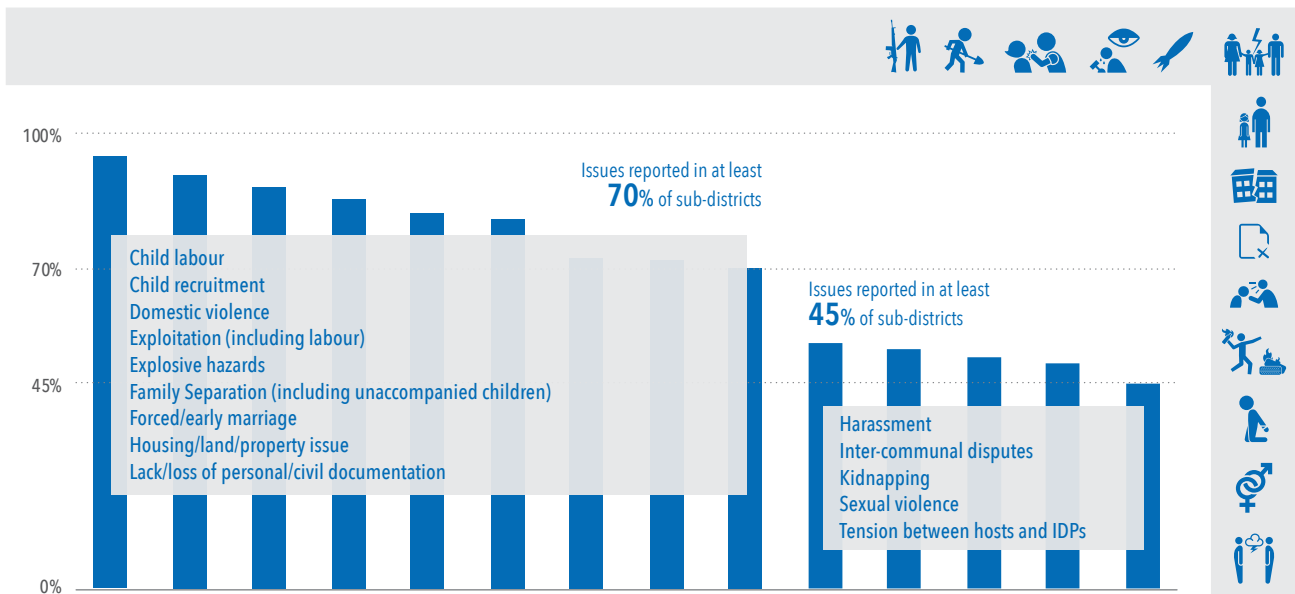
Grave child rights violations continue unabated, with countless children killed and maimed due to the persistent use of explosive weapons in civilian areas, resulting in enormous loss of life and destruction of civilian infrastructure, particularly schools and hospitals. Recruitment, sometimes through indoctrination, abduction, arrest and coercion of children into the conflict, is widespread in all areas, with 90 per cent of surveyed sub-districts reporting its occurrence and 56 per cent identifying an increase in the previous three months. Adolescent boys are particularly at risk. Young children are increasingly targeted and engaged in active combat. There has been a significant number of verified cases of children killed and maimed while participating in combat.⁹⁹ The lack of economic and educational opportunities, experiences of violence, displacement, profound distress, family loss and deprivation of psychosocial needs such as a sense of purpose, control and significance, or exercising social agency - all are major drivers of vulnerability. Child labour, due to widespread devastation of livelihoods and family separation, is reported in 82 per cent of surveyed sub-districts, including its most dangerous and hazardous forms, namely begging, smuggling, scavenging, recruitment and use of children in the conflict and illicit activities. Separation from caregivers is reported in 72 per cent of surveyed sub-districts and is reportedly linked to death of parents, population movements, disappearance, recruitment and use in the conflict, and families sending children to live in safer locations.

*All quotations throughout the document are from affected people consulted during the needs data gathering exercises.

CONTINUED THREATS POSED BY EXPLOSIVE HAZARDS

6.3 million people live in sub-districts most affected by explosive weapons. These weapons have the potential to result in explosive hazards in the areas in which they land/are used. In 88 per cent of sub-districts surveyed in Syria, explosive hazards have been identified as a protection concern. Weapons with wide-area effects are used in densely populated areas. This increases the likelihood of civilians being injured or killed, with 89 per cent of people with injuries due to the use of explosive weapons facing permanent or temporary physical impairments.¹⁰⁰ Children represent 17 per cent victims directly injured by explosive weapons.¹⁰¹ Of the conflict incidents recorded from January 2015 to August 2016, the three most frequent were: airstrikes (39 per cent); heavy weapons fire (32 per cent); and handheld firearms (26 per cent).¹⁰² While such incidents are widespread across the country, explosive weapons have affected certain communities more heavily than others and in different ways. For example, 20 per cent of all airstrikes were recorded in besieged locations, which are among the most contaminated locations in Syria. Within this category, besieged communities were recorded as the targets of 37 per cent of all explosive barrel incidents.¹⁰³ Other areas in Aleppo, Homs and Damascus are among the most affected by incidents involving mortars and missiles. The presence of explosive hazards not only threatens the lives and livelihoods of affected communities, but also endangers humanitarian actors seeking to provide them with aid. The associated protection risks restrict social development and hamper initial attempts at economic recovery.

PERCENTAGE OF SUB-DISTRICTS REPORTING PROTECTION ISSUES



PROTECTION RISKS CONTINUE TO CHALLENGE INDIVIDUALS AND COMMUNITIES

Individuals and communities struggle to maintain the strength and resilience to cope with the crisis. This is exacerbated by the weakening of social cohesion and increased family separation, reported in 72 per cent of sub-districts.

Lack of civil documentation was reported as an issue in 81 per cent of surveyed sub-districts. The main reasons for lacking documents were: loss (52 per cent), confiscation (31 per cent), or custody/safe-keeping by another family member (22 per cent). Renewing civil documents is a major challenge for many individuals. The absence of documentation exacerbates other protection risks and limits freedom of movement, access to safe locations and the ability to access services and livelihoods. Housing, land and property (HLP) issues were identified in 93 per cent of surveyed sub-districts. Damage to property (79 per cent), inability to access land/property due to insecurity (78 per cent), and looting (68 per cent) were reported as high frequency HLP issues.

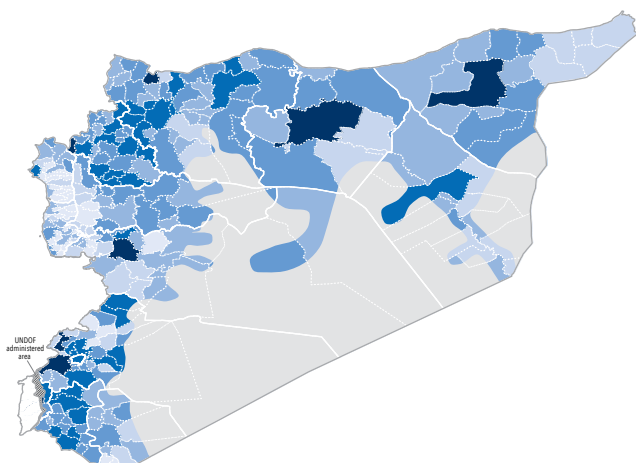
Communities are highly reliant on assistance, with a dependency on aid reported in 90 per cent of surveyed sub-districts. This is related to lack of access to employment and dwindling resources, which increases the occurrence of negative coping mechanisms. This continues to be a concern for protection, because access to populations remains difficult for security and bureaucratic reasons. There are physical safety and security issues at distributions due to targeted attacks, the risk of sexual exploitation, and the potential for inter-communal violence and tensions between IDPs and host communities. The perception that assistance is discriminatory often contributes to these protection issues.

AFFECTED POPULATION

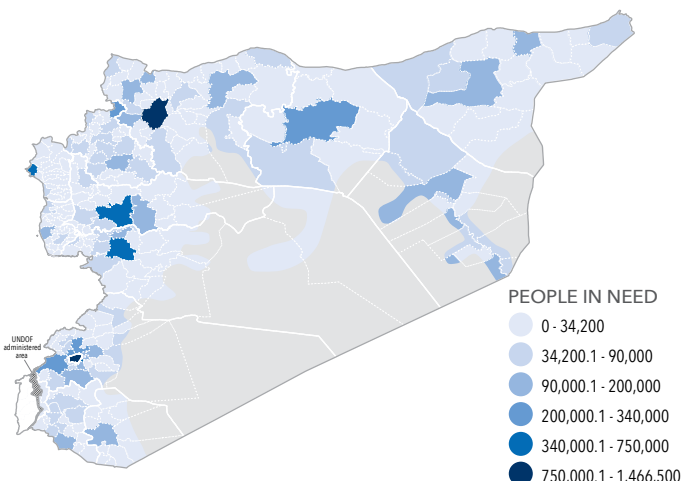
The safety and well-being of girls and boys is equally threatened by exposure to violence in every area of their lives: at home, at school, at work and in the community. The threats they face can be different: while both are exposed to child labour, girls are more likely to face child marriage, harassment and sexual violence. Boys are also at risk of sexual violence. However, boys are more likely to be killed, maimed, detained and recruited for use in the conflict. Adult women and girls also face risks of sexual violence, exploitation, abuse, harassment and domestic violence. In some areas, women and girls face limitations on freedom of movement based on religious and social factors. Adult men and boys are at a greater risk of harassment for security reasons, restricted freedom of movement (due to security and lack/loss of documentation), arrest, detention, recruitment to the conflict, and disappearance. The elderly and persons with disabilities, particularly those with insufficient family and community support, are at increased risk of social exclusion, poverty, and violence due to limited mobility, discrimination and lack of tailored services. Palestine refugees face particular risks due to the impact of the hostilities in their camps, resulting in mass displacement. Furthermore, their legal status limits their ability to move to neighbouring countries. People without civil documents face challenges in moving and seeking safety, and accessing safe locations, basic services, livelihoods, and assistance. Under specific circumstances related to the gender-discriminatory provisions in the Syrian nationality law, children without birth registration are at risk of statelessness.

Amongst all these profiles, internally displaced persons and particularly those in IDP sites, including collective centres, face heightened protection risks.

SEVERITY MAP



PIN MAP





CAMP COORDINATION AND CAMP MANAGEMENT

KEY MESSAGES

- Displacement continues to occur with high frequency and at large scale.
- IDP sites (camps, informal settlements, transit centres, and collective centres) remain a last resort for IDPs.
- Residents of collective centres face a convergence of complex needs, remain underserved, and lack mechanisms to communicate their needs and vulnerabilities.
- Children make up 55 per cent of the population of informal tented settlements and IDP camps.

OVERVIEW

Five years of conflict have forced some 6.3 million people to flee their homes and become internally displaced. Displacements, ranging in scale from the dozens to tens of thousands, occur frequently and suddenly. Since the end of 2015, the CCCM sector estimates some 804,300 people have been displaced across the northern governorates of Aleppo, Idleb, Hama, Ar-Raqqa, and Deir-ez-Zor. Many of the most vulnerable IDPs seek refuge in formal camps, informal tented settlements, transit camps and collective centres (together called IDP sites). Though considered a refuge of last resort, over 1 million people currently live in IDP sites across Syria.

ANALYSIS OF HUMANITARIAN NEEDS

Displacement patterns remained fluid throughout 2016. Since October 2015, the CCCM Cluster has recorded displacement¹⁰⁴ of some 804,300 individuals in northern Syria alone (including new and repeat displacements). While significant spikes in displacement were witnessed at points throughout the year, the CCCM sector calculates an average rate of displacement of 40,300 individuals per month. Although conflict dynamics have contributed to intense episodes of displacement, a considerable number of 84,084

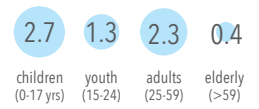
NO. OF PEOPLE IN NEED

6.3M

BY SEX



BY AGE



people were displaced in February alone, despite the signing of the cessation of hostilities agreement. Responding to the needs of IDPs cuts across all sectors.

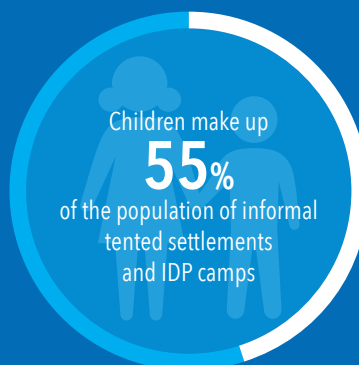
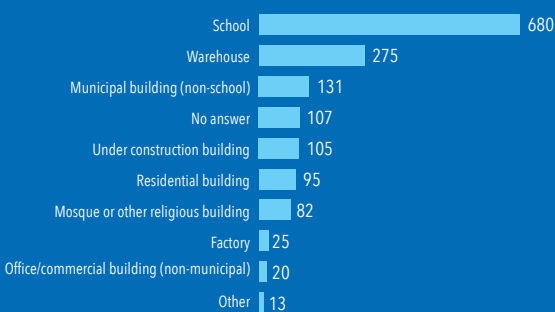
Displaced households and individuals typically exhaust all available alternatives before moving to IDP sites. Consequently, planned camps, informal settlements, transit sites and collective centres tend to host many of the most vulnerable IDPs.

In total, an estimated 685,000 individuals live in some 3,400 collective centres throughout Syria. Collective centres are large, shared accommodations in urban/semi-urban settings, often public facilities that have been repurposed to house large numbers of IDPs.

Former schools (45 per cent), warehouses (18 per cent) and other municipal buildings (10 per cent) are among the most common collective centres. Privately-owned structures such as religious buildings and repurposed private residences make up a relatively small proportion of collective centres (5 per cent and 6 per cent, respectively). Despite collective centres offering access to some infrastructure/services, residents face a convergence of complex humanitarian needs. 57 per cent of collective centres do not have enough water for residents; 50 per cent lack sufficient sanitation facilities; 40 per cent report structural problems with the building; and 54 per cent suffer from overcrowding.

Further complicating residents' existence in such centres, management structures typically remain unclear and highly variable by location, with less than 8 per cent of centres reporting accountable humanitarian management. In such

NUMBER OF SHELTERS BY TYPE



over 1 million people are currently living in IDP sites across Syria



situations, occupants of collective centres are less likely to be meaningfully engaged in the humanitarian response. As a consequence their needs, capacities, and vulnerabilities are less likely to be communicated, increasing occupants' exposure to protection risks while also increasing the likelihood that service quality falls short of minimum ethical and humanitarian standards. On average, collective centres house around 200 residents; however, very large centres (more than 1,000 residents) and very small centres (less than 50 residents) are still common. Of the 3,400 collective centres in Syria, only 105 have been targeted with regular multi-sectoral assistance, resulting in inconsistent and variable outcomes.

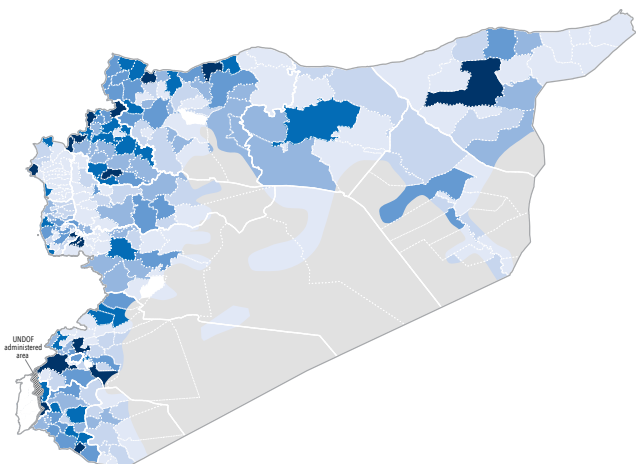
As of September 2016, there are 298 informal tented settlements and camps in Syria, housing some 325,755 IDPs. The vast majority reside in informal settlements, while only 20,000 stay in planned camps operated by humanitarian organisations. While relief actors provide regular services to the majority of IDP sites, over the course of 2016 needs have outstripped capacity to provide comprehensive multi-sectoral support. In informal settlements and camps, over 82 per cent of sites are entirely dependent on humanitarian assistance to meet essential WASH needs. 85 per cent of the population is unable to meet minimum monthly food needs without assistance. Despite efforts to address gaps in assistance provision, there are still persistent unmet needs. For example, 12 per cent of camps/settlements suffer from irregular WASH services, 30 per cent do not have regular food support and 50 per cent lack a dedicated NFI focal point to provide new arrivals with essential NFI supplies. As the crisis endures, vulnerabilities among IDPs are compounded, often resulting in secondary displacement as asset bases and coping mechanisms are further eroded.

AFFECTED POPULATION

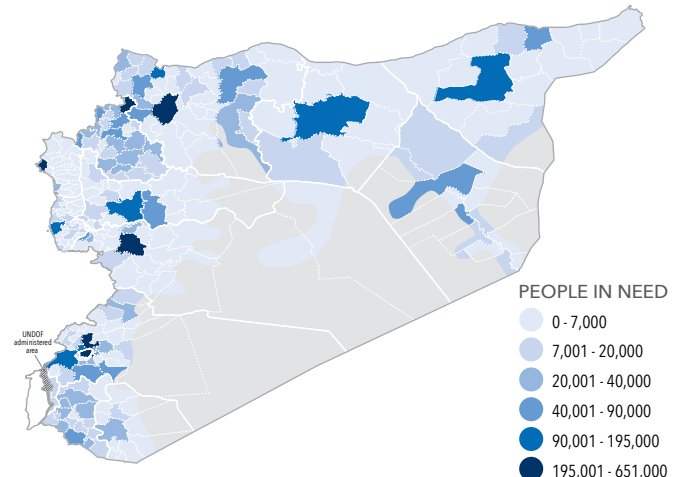
IDPs in collective centres and camps typically have similar vulnerability profiles. The majority have exhausted nearly all of their financial, social, and physical assets. Most collective centres tend to be mixed housing, with some individual households sheltered privately, with the majority sharing living spaces with other households. Up to 10 per cent of all collective centres are dedicated to housing female-headed households or exclusively housing children.

Throughout the 298 informal tented settlements and camps across Syria, children make up 55 per cent of the population, or about 179,165 individuals. Households headed by IDPs with specific vulnerabilities constitute a notable population, including 7 per cent female-headed, 4 per cent with disabilities and 1 per cent child-headed.

SEVERITY MAP - [] [] [] [] +



PIN MAP - [] [] [] [] +





EARLY RECOVERY AND LIVELIHOODS

KEY MESSAGES

- The crisis in Syria is negatively and dramatically impacting the lives and livelihoods of the majority of people living in Syria, who experience increased levels of poverty, unemployment, recurrent displacement, and loss of assets.
- Basic social services are limited and/or overstretched due to damaged infrastructure and the increasing concentration of IDPs in host communities.
- The deterioration of inter/intra-communal dynamics and coping mechanisms is further straining social cohesion.
- Adolescents and youth have been significantly affected by the conflict and are becoming frustrated, disempowered and vulnerable as a result of limited education, economic and social opportunities.

OVERVIEW

While needs and priorities of the affected population under the early recovery and livelihoods sector did not witness major changes since the beginning of 2016, the number of people currently considered to be in need of early recovery and livelihood assistance has significantly increased from almost 9 million in 2015 to 10 million in 2016. Beyond the socio-economic challenges facing those in need, an overarching challenge is the impact of the crisis on the social fabric of communities, especially in areas hosting large numbers of IDPs and/or witnessing high levels of destruction to community infrastructure.

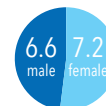
The destruction of economic, social and human infrastructure has deprived Syrians across the country of the productive tools required to meet their basic needs, burdening households and leading to the creation of improvised solutions in the absence of state services. The deterioration of basic services continues to undermine the viability of productive sectors, feeding a vicious cycle of unemployment, diminishing resources and increased levels of poverty.

NO. OF PEOPLE IN NEED

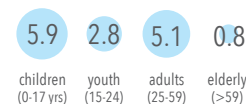
13.8M

10M acute humanitarian need

BY SEX



BY AGE

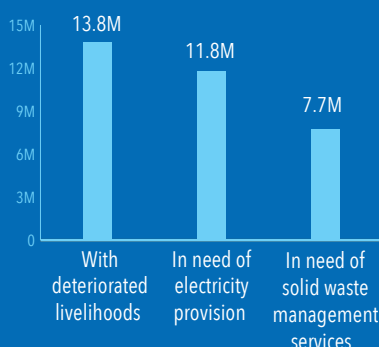


ANALYSIS OF HUMANITARIAN NEEDS

Throughout the past year, living conditions among the majority of people living in Syrian have deteriorated considerably. The severity of deterioration varies across regions, according to the intensity of conflict. The Early Recovery Sector's analysis of the impact of the crisis focuses on basic and social service infrastructure, and socio-economic conditions and challenges.

Basic and social services infrastructure: Electricity production, transmission and distribution are heavily affected by ongoing hostilities, and face serious shortages of spare parts. In 2011, the national electricity-generating capacity stood at 4,800 MW; in 2016, damage to electricity-generating facilities has reduced the country's effective generation capacity to 2200 MW.¹⁰⁵ Currently 11.8 million people are in need of access to electricity. On average, residents of cities suffer from blackouts for 16 hours per day, while people in rural areas witness power outages up to 18 hours per day. Insufficient electricity supply has had a negative impact across sectors, including health, WASH and other productive sectors.¹⁰⁶

In the area of solid waste management, including sewage and garbage collection, the crisis and the intensive use of weapons have led to considerable destruction of sewage networks and pumping stations. Challenges faced in repairing damaged facilities due to a scarcity of spare parts and difficulty in accessing areas of active conflict further limit services. 7.7 million people across Syria are assessed to be in need of such services. Due to the increasing number of IDPs and irregular maintenance of networks, sewage systems in some areas are overburdened to the extent that they have been rendered almost inoperable. In eastern Aleppo city, water contamination has reached levels prone to epidemic-level transmission of water-borne diseases.



While solid waste management services differ across governorates, Ar-Raqqa, Al-Hasakeh, Idleb and Aleppo governorates appear to have the most severe problems in regular solid waste collection services, increasing the risks of air, water and soil contamination. Overstretched services in Tartous, Lattakia and Homs cities require equal attention to ensure sustained provision. In terms of household water supply and water used for irrigation, a recent multi-sectoral assessment confirms that diminished supply of clean water has negatively affected the health of some 4 million individuals across the country. The impact of the crisis on access to drinking water differs across governorates. Ar-Raqqa, Al-Hasakeh, Idleb, and Dar'a governorates have the most severe problems in accessing drinking water. Here the majority the population depends on water from tanks, increasing the financial burden on households. Severely impacted by conflict, residents of Aleppo also face critical levels of water insecurity and financial burdens in meeting daily household water needs.

Damage to national infrastructure, including roads and bridges, has impacted some 3 million people across the country. Increased transportation costs and decreased transactions and interactions between regions have negatively affected economic activity. Results of the livelihoods assessment indicate that 24 per cent of roads and bridges have been negatively impacted across the country. Likewise, the telecommunication sector has witnessed massive destruction, resulting in 6.2 million people in need. Assessment results reveal that about 38 per cent of Syria's telecommunications infrastructure has been damaged, looted or destroyed.

Socio-economic conditions and opportunities: By the end of 2015, the cumulative economic cost of the conflict was estimated at \$254.7 billion.¹⁰⁷ The unemployment rate reached 52.9 per cent by the end of 2015, ultimately impacting the welfare of 13.8 million people in Syria. Young people have been disproportionately impacted, with youth unemployment at 28.5 per cent. Among young women, unemployment increases to 64.8 per cent. With deepening recession, the overall poverty rate reached 85.2 per cent by the end of 2015.

While 5.3 million people are in need of improved services, markets are suffering due to unreliable energy sources, insecurity,

lack of skilled labour, and price manipulation. Moreover, access to finance has become an issue for some 2.7 million people across the country, with barriers imposed by finance agencies pushing those who are in need away from services.

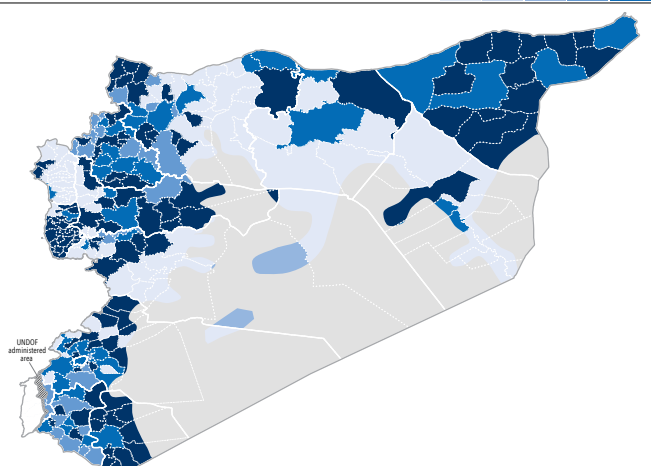
Negative coping strategies have contributed to the deterioration of living conditions and an increase in protection threats for affected populations. As household savings have been exhausted, child labour has become more prevalent. Increased aid dependency has been reported in more than 90 per cent of surveyed sub-districts, with particularly high levels observed in Damascus and Aleppo cities. Other negative coping strategies such as sale of assets (including property), reduction of meals, economic migration, and substitution of public services with private ones, have also contributed to declining living conditions of affected populations.

AFFECTED POPULATION

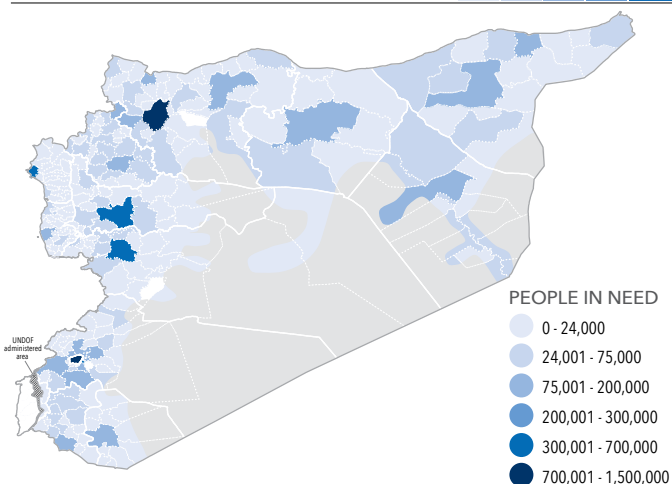
After almost six years, the resilience of people in Syria is being pushed to its limits. Lack of trust, inter/intra-communal clashes, protection concerns and social isolation are among the mounting challenges undermining social cohesion and eroding the underlying social fabric.

Across Syria, no element of society has been spared the consequences of economic decline and social fragmentation. IDPs are among those experiencing the worst economic and living conditions. The communities hosting IDPs are increasingly unable to bear increased pressures. Women and children are particularly vulnerable to protection threats, and are more likely to be exploited in their attempts to access livelihoods and economic opportunities. Their vulnerability is further exacerbated by financial burdens and responsibilities as heads of households. The elderly, disabled, the infirm and other vulnerable groups lack adequate services due to decreases in public expenditure and the inability of humanitarian agencies to address all needs. In terms of geographical distribution of need, the populations of Aleppo, Deir-ez-Zor and Al-Hasakeh are most affected by deteriorated living conditions and an environment averse to generation of livelihood opportunities.

SEVERITY MAP



PIN MAP





EDUCATION

KEY MESSAGES

- Over 6 million children and education personnel are in need of education assistance.
- 1.75 million children and youth are out of school and 1.35 million at risk of dropping out.
- 1 in 3 schools is either damaged, destroyed, used as collective shelters or otherwise inaccessible.

OVERVIEW

With the crisis entering its sixth year, 5.82 million children and youth from pre-school to secondary school-age (in and out of school), including over 118,000 Palestine refugee children, and an additional 270,000 education personnel, are in need of education assistance inside Syria. An estimated 1.75 million children, or almost one third of school-age children (aged 5-17 years) from the school-year 2015/16 are out of school. A further 1.35 million are at risk of dropping out. The formal education system has lost a total of 150,000 education personnel, including teachers, negatively affecting the quality of education for all children. The conflict has seen one in three schools damaged, destroyed, or otherwise made inaccessible due to occupation by displaced families or military/armed groups. As a consequence, many children have missed out on years of education. The total economic loss due to dropout from basic and secondary education is estimated to be around \$11 billion, equivalent to about 18 per cent of Syria's GDP in 2010.

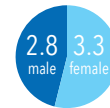
ANALYSIS OF HUMANITARIAN NEEDS

The education system inside Syria is overburdened and overstretched to the extent that schools and learning environments are unsafe, overcrowded and under-resourced. The key impediments to children accessing education include safety and security along routes to and from schools and alternative learning spaces; lack of teaching and learning

NO. OF PEOPLE IN NEED

6.1M

BY SEX



BY AGE



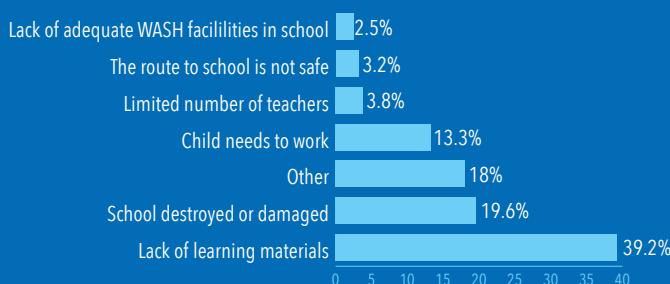
materials; poor quality teaching; and damaged education infrastructure. Prior to the conflict, over 22,000 schools were operating across the country. Since the crisis began, thousands of classrooms have been damaged or destroyed, and many school buildings have been used as shelters for displaced families and occupied for military purposes. Over 7,400 schools across Syria are now closed and no longer accessible.

In schools that remain operational, poor water, sanitation and hygiene conditions negatively impact education, child health and girls' dignity, in turn directly impacting on enrolment and retention rates. Insufficient food at home negatively affects children's attentiveness and cognitive abilities. Evidence suggests that, due to severe poverty and a lack of awareness, parents and caregivers no longer consider their child's education as a priority. A large number of children remain out of school to support their households.

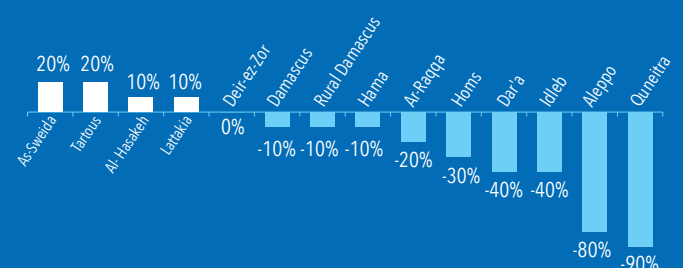
Due to massive population movements, close to 2 million displaced children face significant disruption in their schooling. Attendance is intermittent and sporadic, while many children attend classes at inappropriate grade levels. Displaced children experience discrimination in host communities struggling to accommodate new students. As a consequence, many children are unable to complete a full academic cycle. Those who cannot make the sometimes perilous journey to public exam offices are deprived of an official certification. Depending on the different areas of control they live in, children are taught different curricula and content.

The formal education system has lost a total of 150,000 education personnel, including teachers. Those still active are neither adequately trained nor equipped to address

BARRIERS TO EDUCATION



CHANGE IN ENROLMENT IN PUBLIC EDUCATION 2010-11 TO 2015-16



the increased complexities they now face in schools and alternative learning environments. This puts education personnel under increased pressure and negatively impacts teacher performance.

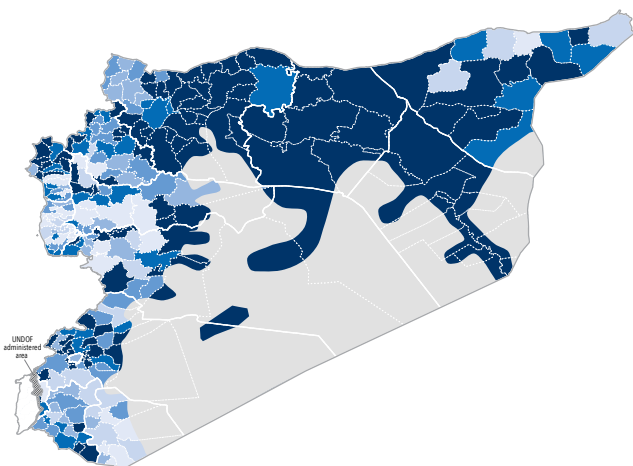
Finally, while an Education Management Information System is operational in the country, timely data collection and analysis are weak, especially for schools and children in besieged and hard-to-reach locations. This adversely affects the ability of education sector partners to grasp the situation of education across the country and effectively inform a contextually relevant education response.

AFFECTED POPULATION

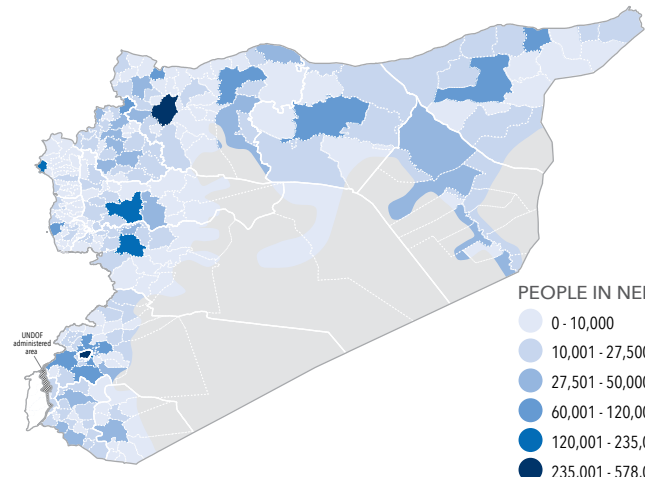
Inside Syria, an estimated 1.75 million school-age children aged 5-17 years were out of school in the 2015/16 school year. As of August 2016, a further 739,000 children were out of school in the five neighbouring countries hosting Syrian refugees. In addition, an estimated 1.35 million children are at risk of dropping out. There are over 1.3 million children in hard-to-reach locations, over 300,000 in besieged areas and 353,000 million encircled by military actors. Across Syria, nearly 2 million school-age children are displaced as a result of the conflict. Over 600,000 are living in areas under the control of ISIL and 150,000 are living in contested areas with active conflict. ISIL and other parties continue to use education to indoctrinate and recruit children.¹⁰⁸

The psychosocial safety and physical protection of school-age children has been seriously compromised throughout the crisis, and children face constant challenges in efforts to safely access education. Education is ultimately protective, and inadequate and/or uneven access to education opportunities denies children their basic rights and protection from exploitation. Out-of-school children are at greater risk of sexual harassment, exploitation and exposure to violence, child labour, early marriage and recruitment into armed groups. Where available, schools are no longer a guaranteed safe and protective environment: in 2015 there were a total of 69 UN-verified attacks on education infrastructure and personnel, including 60 attacks on schools. Attacks on schools not only put the safety and well-being of students and school staff at risk, but also discourage parents from sending their children to school. As of October 2016, the UN verified a total of 308 attacks on education facilities and personnel.¹⁰⁹

SEVERITY MAP



PIN MAP





FOOD SECURITY AND AGRICULTURE

KEY MESSAGES

- An estimated 7 million people are food insecure and a further 2 million are at risk of food insecurity. Food insecurity is one of the top needs in Syria.
- Total wheat production in 2016 is 1.3 million metric tonnes (MT), a reduction of 45% relative to 2015, and 63% relative to pre-crisis (2011) levels.
- The self-reliance and resilience of the Syrian population can be bolstered by creating and sustaining livelihood opportunities. Support for small businesses and improved production capacity, linkage to value chains by supporting markets, community-based services and economic infrastructure, supporting productive assets and veterinary care should all happen alongside the provision of food assistance.
- Without urgent support for veterinary services, there is a growing risk of the spread of animal diseases within and beyond Syria's borders.

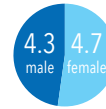
OVERVIEW

Inaccessibility, besiegement and displacement have contributed to multiple, mutually reinforcing triggers of food insecurity for the duration of the Syrian conflict. Combined, these have contributed to low performance across three core food security indicators: food availability, coping strategies and food consumption. In 2016, with erratic and below-average cumulative precipitation¹¹⁰ in the cereal-producing governorates of Aleppo, Idlib, Ar-Raqqa and Homs, food availability was particularly impacted. Livelihoods are under severe stress and have a direct impact on household food security. The recently concluded Food Security and

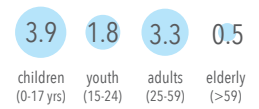
NO. OF PEOPLE IN NEED

9M

BY SEX



BY AGE



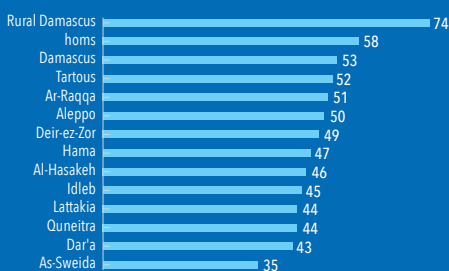
Livelihoods Assessment indicates that households engaging in crop or livestock production, whether as a primary or secondary source of income, tended to report higher incomes and greater levels of food security. Despite the beneficial effects of continued agricultural and livestock engagement, many households have had to abandon farming or herding or scale back production due to the unavailability and costliness of inputs, such as seed and fertilizer. A lack of fuel, land and water are also key constraints.

ANALYSIS OF HUMANITARIAN NEEDS

Reduced food availability

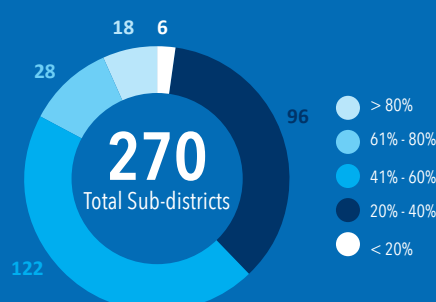
Worst cereal production in five years: In 2016 the production of wheat is estimated to be 1.3 million MT, approximately 45 per cent less than in 2015, and 64 per cent less than in 2012. The production of barley in 2016 is 7.7 per cent less relative to 2015. Compared to the 2011/12 season, there has been a drop of 33 per cent and 13 per cent in areas planted for wheat and barley, respectively. Key transportation/supply routes from the main producing area to the main consuming areas are blocked due to ongoing conflict, implying that the national shortfall is actually greater than production estimates suggest. The lack of agricultural inputs is having a major impact on production.

COST OF FOOD BASKET BY GOVERNORATE IN US\$

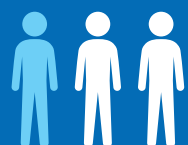


The national average cost of a standard food basket is SYP 32,332 (USD 64), which is 487.5 per cent higher compared to 2012.

% OF PIN NUMBER OF SUB-DISTRICTS



1 out of 3 people in Syria are food insecure



Decrease in livestock: The livestock sector in Syria has suffered substantially since 2011, with considerable decreases in flock numbers (30-40 per cent for cattle, sheep and goats, 50 per cent for poultry)¹¹¹. In 2016, the sector recorded a further decrease in cows (18 per cent), sheep (23 per cent) and goats (20 per cent),¹¹² and further illegal export of productive females. Syria's veterinary services are running out of vaccines and routine drugs for treatment of Transboundary Animal Diseases (TAD), resulting in a lack of requisite drugs available on the market. Livestock owners are resorting to low-quality drugs with unknown efficacy and side effects on consumer health.

Decreased availability of food at household level:

Fragmentation or distant markets, lack of production for household consumption, lack of cash/income to purchase food items and declining purchasing power (as reflected by terms of trade) are contributing to reduced food availability at the household level. Purchase of food with cash (by adopting various negative coping mechanisms) and dependence on food assistance are key informants' two most reported sources of food availability and access.

Eroded Coping Strategies

Adoption of multiple negative coping strategies: Coping mechanisms have been significantly eroded across Syria, with 74 per cent of sub districts reporting community members having adopted, on average, more than five types of negative coping mechanisms to access food. In 16 per cent of assessed locations community members adopt, on average, three to four types of negative coping strategies. Only 10 per cent of sub-districts reported using on average less than three negative coping strategies. Increased adoption of socially unacceptable practices such as early marriage, begging, borrowing, child labour and child recruitment/use in the conflict are among some of the negative coping strategies households resort to in order to meet food requirements, disproportionately impacting the safety of women and girls.

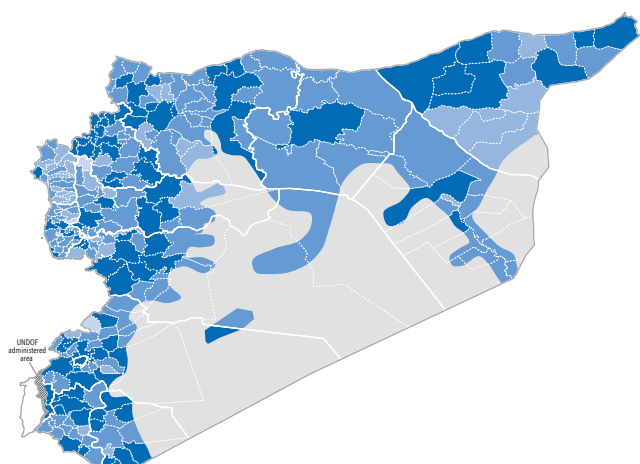
Restrictions on the movement of women may render female-headed households particularly vulnerable. Households headed by children, disabled or older people have reported that in the absence of a breadwinner, coping mechanisms are fast eroding as they are unable to earn a living. High and rising food prices, particularly for staples such as rice and lentils, force households to spend a greater portion of their incomes on food, forgoing other vital expenditure.

Diminished Food Consumption Score: On average, 39 per cent of people in Syria have poor and/or borderline food consumption. Among 270 sub-districts, 26 per cent have more than 50 per cent of people with poor or borderline food consumption.¹¹³ There is lack of dietary diversity, as households mainly consume cereal, sugar and oil, with negative implications for their nutritional status. The most vulnerable populations rarely consume other food items and thus have a lack of dietary diversity including micronutrients, with negative nutrition implications.¹¹⁴ This is particularly critical in besieged locations.

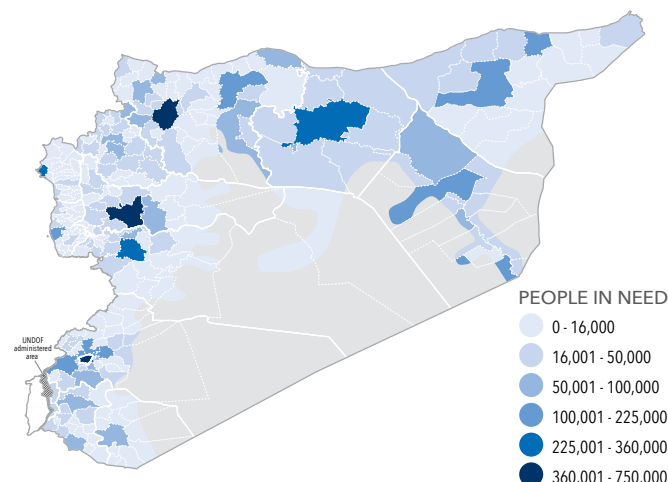
Rising food prices and declining household purchasing power are two of the primary causes of diminished food consumption scores and a higher incidence of people resorting to negative coping strategies.

High Food Prices: In August 2016, the national average cost of a standard food basket was SYP32,332 (\$64), an increase of 15.7 per cent relative to January 2016.¹¹⁵ This is 23.6 per cent higher as compared with the same month in 2015, and 487.5 per cent compared to 2012. Although food assistance in certain besieged locations such as Deir-ez-Zor and Rural Damascus helped control prices to a certain extent, the six-month average price of a basket of five core food items (rice, sugar, red lentils, flour, and bread) from January–June 2016 shows that Rural Damascus has the highest average cost by governorate, followed by Homs and Damascus.¹¹⁶ The price of fuel has also skyrocketed, thus impacting the utilization of food.

SEVERITY MAP



PIN MAP



PEOPLE IN NEED

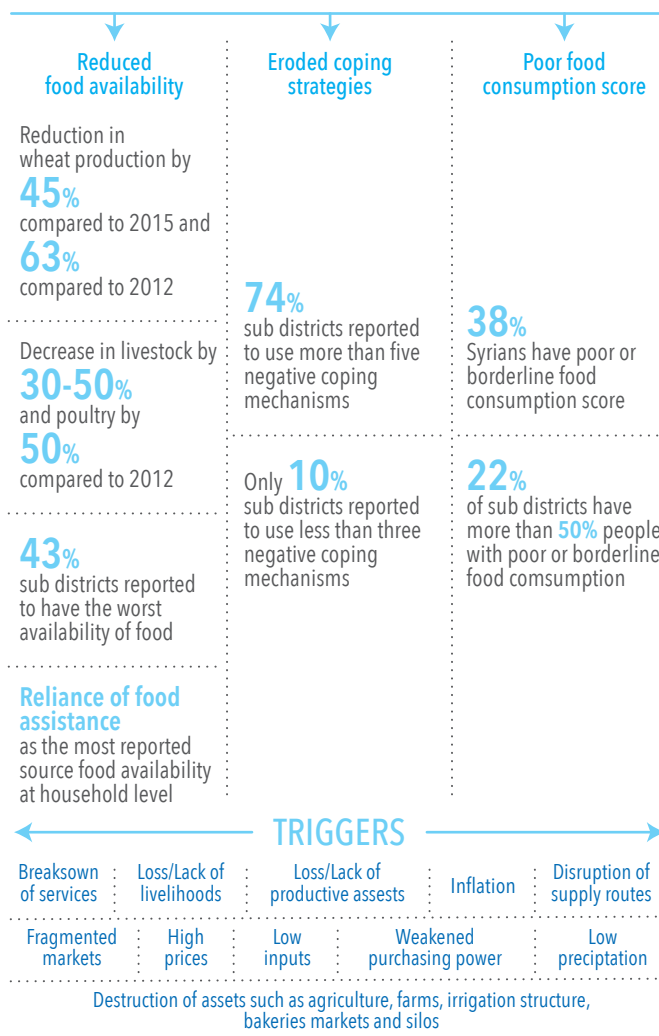
- 0 - 16,000
- 16,001 - 50,000
- 50,001 - 100,000
- 100,001 - 225,000
- 225,001 - 360,000
- 360,001 - 750,000

Terms of Trade: Paralleling rising food prices, household purchasing power is on the decline. The purchasing power of casual labourers is measured by terms of trade, derived from the nominal average daily wage and cost of wheat flour and/or sheep. The nominal average daily wage rate in August 2016 was SYP1,307 (\$2.5), varying between market locations, from SYP950 (\$1.8) in Al-Hasakeh to SYP 1,850 (\$3.6) in Lattakia. In August 2016, casual labourers were able to buy the equivalent of 5.3 kg of wheat flour for a day's work, 17.5 per cent less than six months ago and 21.2 per cent lower than in the same month in 2015.

AFFECTED POPULATION

Affected populations are those most vulnerable to the causes of food insecurity and have a poor or borderline Food Consumption Score and high use of negative coping strategies. Sector assessments indicate that several population groups are particularly affected by food insecurity. The entire populations of besieged locations are considered food insecure, while an estimated 54 per cent of all IDPs are food insecure. New IDPs, female-headed IDP households and Palestine refugees were considered by key informants to be among the most vulnerable to food insecurity. Furthermore, host and resident population particularly headed by vulnerable members are more food insecure. The estimated ratio between urban and rural People in Need in the sector is 55:45.

CORE FOOD SECURITY INDICATORS





HEALTH

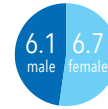
KEY MESSAGES

- Trauma is a leading cause of mortality and morbidity in Syria, with 30 per cent of trauma cases resulting in a permanent disability requiring long-term rehabilitation care.
- Protection of patients, health workers, medicines, supplies, and health facilities must be ensured in accordance with humanitarian law and principles.
- There must be commitment to regular and sustained delivery of medical supplies and services (including vaccination teams and mobile clinics) and timely medical evacuations in hard-to-reach and besieged locations.
- Maintenance of epidemiologic surveillance and response to outbreaks of communicable diseases is of utmost public health importance.
- Monitoring of the status of health care facilities reached via cross-line and cross-border operations is imperative, whilst ensuring that assistance provided through aid deliveries, including medicines and medical equipment required for surgical interventions, mental health, chronic diseases and paediatric care, are not denied through their removal from aid deliveries.
- Maintenance of epidemiologic surveillance and response to outbreaks of communicable diseases is of utmost public health importance.

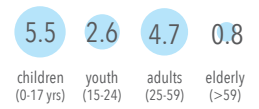
NO. OF PEOPLE IN NEED

12.8M

BY SEX



BY AGE

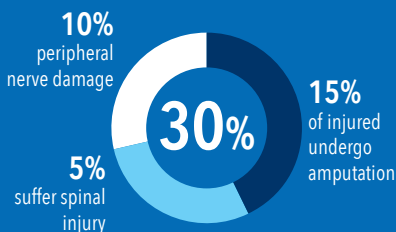


OVERVIEW

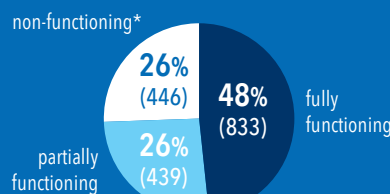
The health situation continued to deteriorate in 2016. As of October, over 12.8 million people in Syria require health assistance. Despite constituting a flagrant violation of international humanitarian law, attacks on health care facilities throughout the country continued unabated in 2016. Over the course of the year, there have been reports of up to 101 attacks on hospitals and health care centres across Syria, with 14 health care workers killed and 40 injured. Since the beginning of the conflict 770 health workers have been killed. Indiscriminate attacks on the lives of health care workers and their patients affect millions of others. In July and August, attacks against health facilities and services disrupted close to 48,000 consultations and 750 deliveries. Those at increased risk include wounded patients, whose injuries go untreated, resulting in an estimated 30 per cent developing permanent disabilities; those with life-threatening chronic diseases; unvaccinated children; pregnant women without access to life-saving obstetric care or essential reproductive health care; and those in need of mental health and psychosocial support.

While 2016 saw health assistance delivered to all besieged areas, access was sporadic and the removal of essential medical supplies from aid packages and blockage of medical evacuations continued. Access for cross-border actors was further restricted in 2016, with partners based in Jordan, Lebanon, Iraq and Turkey facing increasing challenges in transporting supplies and staff across the border and witnessing the interruption of medical evacuations. It is important to note that major public health services are overstretched. In ISIL-controlled areas, health care provision ranged from extremely limited to non-existent.

30% of trauma is linked with a permanent disability outcome



HEALTH CARE FACILITIES FUNCTIONALITY STATUS BY END OF THE 2ND QUARTER 2016 (WOS)



*non-functioning: based on WHO Syria information

1 out of **5** Syrians is at risk of developing mild / moderate mental health problems



ANALYSIS OF HUMANITARIAN NEEDS

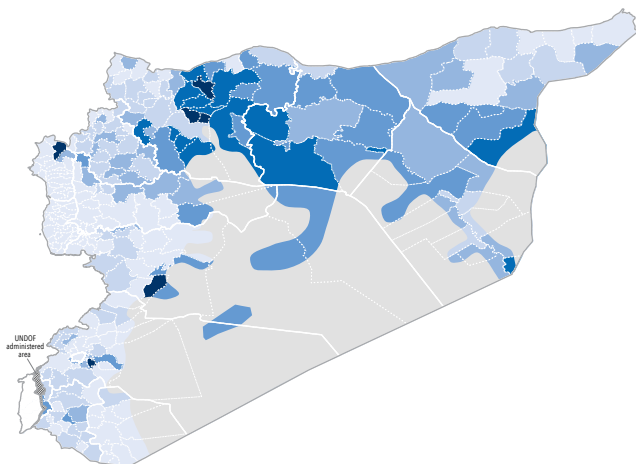
Essential health services remain in critical shortage across the country. Insufficient human resources, supplies, equipment and infrastructure continue to disrupt the functionality of the health system. A significant proportion of health facilities is unable to provide essential care, including care for people with life-threatening chronic diseases. Only 20 per cent of functioning health facilities provide mental health care, though this is an area of growing need. A severe shortage in skilled birth attendants and obstetricians means pregnant women lack access to critical childbirth services. Local health networks, connecting different levels of care through referral networks, remain fragmented, presenting a complicated path for patients seeking services. As access to life-saving medications and care is restricted, people with life-threatening, chronic diseases such as diabetes, kidney failure, asthma, epilepsy, cancer and cardiovascular illness are at continued risk of death or developing complications. One in five Syrians has moderate mental health issues, and 1 in 30 is at risk of developing severe or acute mental health needs. Over the course of 2016, 3.5 million people are expected to need surgical and trauma services in public hospitals, including 3.2 million emergency consultations, 67,000 war wounded cases, and 300,000 surgeries per year.

Monitoring the status of health care facilities reached via cross-line and cross-border operations is imperative, whilst ensuring that assistance provided through aid deliveries, including medicines and medical equipment required for surgical interventions, mental health, chronic diseases and paediatric care, are not removed from aid deliveries.

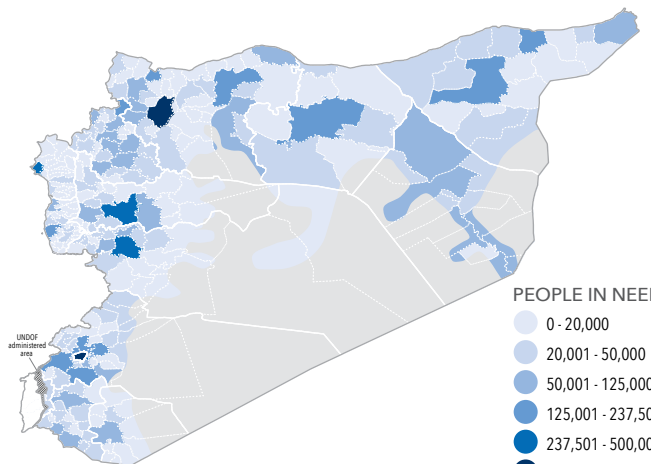
AFFECTED POPULATION

All population groups are affected by the crisis and have a right to receive health care. Children under five, adolescent girls and women of reproductive age, persons living with disabilities and people at high risk of complications from chronic diseases, particularly the elderly, remain the most vulnerable population groups in need of health services. More than 5 million people are living in hard-to-reach and besieged areas, requiring urgent life-saving medical treatment including Palestine refugees from Yarmouk and surrounding areas.

SEVERITY MAP



PIN MAP





LOGISTICS

KEY MESSAGES

- Inter-agency humanitarian convoys to hard-to-reach and besieged areas continue to be a key mechanism to increase trust, build momentum, and ultimately increase access to cut-off locations.
- The Logistics Cluster expects to continue to support 100 per cent of the cross-border deliveries through UNSC-mandated border crossings from Turkey and Jordan into Syria.
- Should alternative options not become viable, air operations will remain the only means of access to the most cut-off locations.
- Information sharing among all hubs across the Whole of Syria remains key to ensuring a coordinated and effective response.

OVERVIEW

The Logistics Cluster continues to provide common services (transport, storage, transshipment, information management and coordination) as per humanitarian partners' needs in the Whole of Syria approach.

The Inter-agency humanitarian convoys to hard-to-reach and besieged areas, organized in close collaboration with OCHA and the Syrian Arab Red Crescent (SARC), enable the delivery of much needed humanitarian supplies to populations in need, while at the same time providing a mechanism through which to increase trust, build momentum, and ultimately increase access to cut-off locations.

The number of Inter-agency humanitarian convoys has significantly increased since the Geneva and Munich meetings of early 2016. The Logistics Cluster will continue to capitalize on increased access, adjusting the number of convoys accordingly.

Through WFP, air operations were facilitated to Deir-ez-Zor (airdrops) and to Qamishli (airlifts). Though a last resort, air

operations become necessary due to the disruption of normal supply lines and in locations with no other means of access.

Temporary suspensions of UN cross-border operations at Al-Ramtha (Jordan-Syria border) as well as Reyhanli and Kilis (Turkey-Syria border) have been limited relative to 2015.

Challenges and delays continue, with long supply chains, complex customs procedures, instability in key corridors, and authority approvals. Fuel prices are soaring, with an increase of 39 per cent in June 2016.

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. In contracts with transporters and storage providers, the Logistics Cluster/WFP includes a specific clause on Sexual Exploitation and Abuse (SEA).

ANALYSIS OF HUMANITARIAN NEEDS

There is a need to maintain common storage space in five hubs inside Syria (Lattakia, Tartous, Rural Damascus, Qamishli, Homs), currently at 14,000 m². New storage will be required in other locations, such as Aleppo.

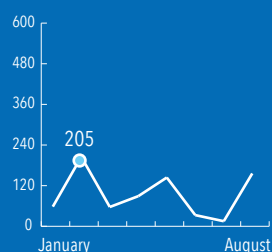
Inter-agency humanitarian convoys to hard-to-reach and besieged areas as well as common transport services, including emergency air operations, cross-border coordination and transshipment services are required.

Fuel scarcity is expected during the coming winter, with a high likelihood that fuel prices will further increase. There is a need for increased fuel provision, storage, contingency stock and winterisation fuel for IDP shelters/medical centres for cooking, heating and other essential services.

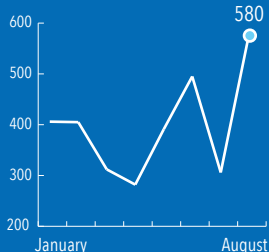
Coordination and circulation of logistics information, as well as capacity building are required to mitigate the effects of reduced logistics personnel and to enhance existing capacity.

2016 - NUMBER OF TRUCKS PER MONTH VIA UNSC-MANDATED BORDER CROSSINGS

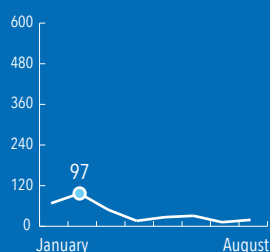
Ramtha



Bab al Hawa

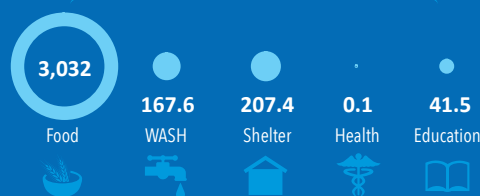


Bab al Salam

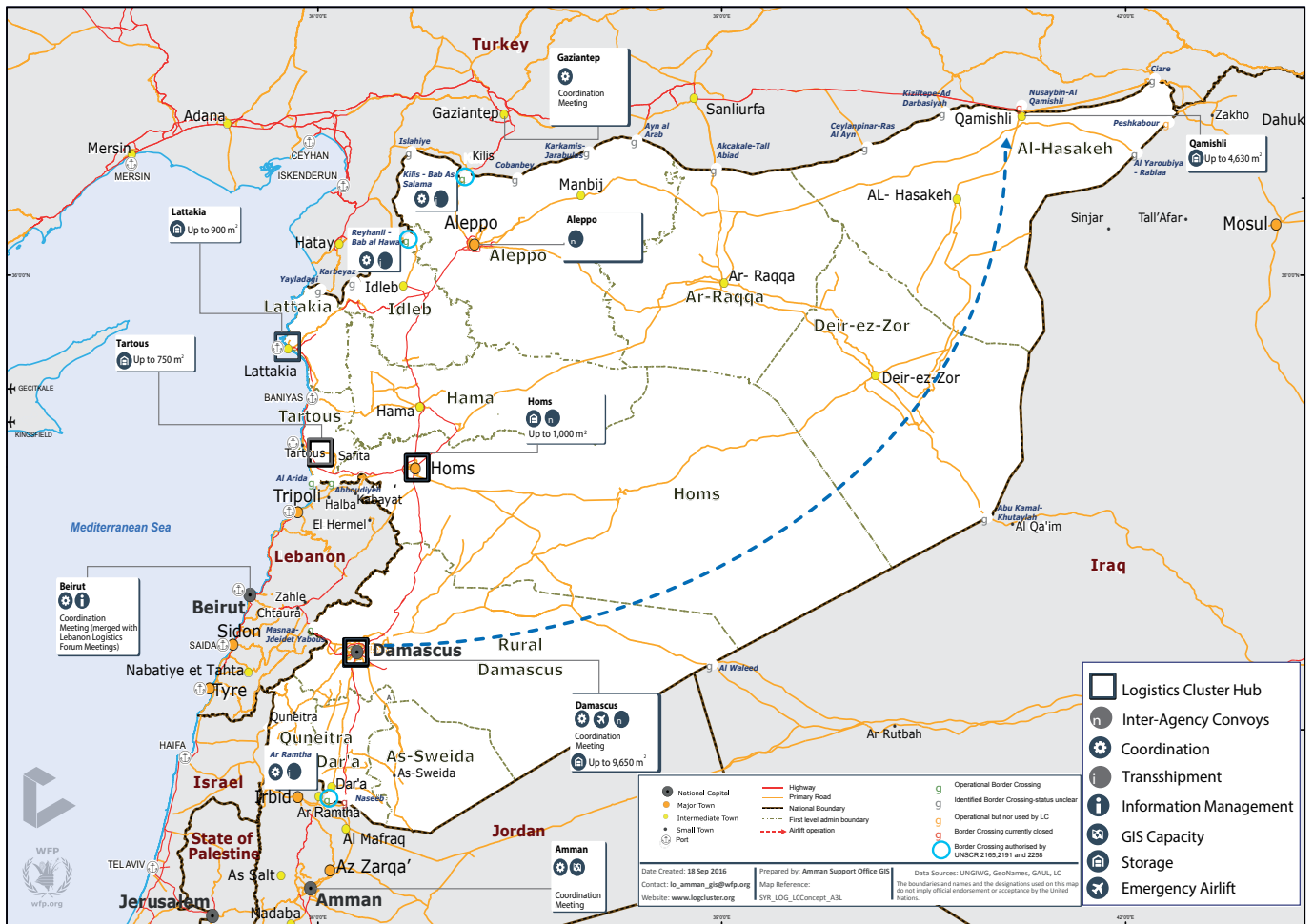


TOTAL CARGO MOVED BY AIRLIFT BETWEEN 09 JULY AND 29 SEPTEMBER 2016 (MT)

3,458



GEOGRAPHIC ANALYSIS: LOGISTICS CLUSTER CONCEPT OF OPERATIONS, SEPTEMBER 2016





NUTRITION

KEY MESSAGES

- Integrated, multi-sectoral collaboration is key to improved nutritional outcomes.
- Suboptimal infant and young child feeding practices, micronutrient deficiencies and poor maternal nutrition are widespread.
- Implementing partners need robust technical support for stronger preparedness and efficient response.
- Those living in besieged and hard-to-reach areas and those living in areas deprived of basic social services are at high risk of under-nutrition and micronutrient deficiencies.

OVERVIEW

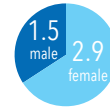
Evidence generated through SMART surveys conducted in accessible areas in 11 out of the 14 Syrian governorates over the course of 2015/2016 indicates acceptable levels of global acute malnutrition (GAM) and chronic malnutrition or stunting, among girls and boys under five years of age at 3 per cent and 12.7 per cent respectively. However, a GAM rate of 7.8 per cent was recorded among women of child-bearing age (CBA), much higher than the under-five GAM levels. Similar results were reached by a rapid SMART survey conducted in January 2016 in Ar-Rastan district and Taldou sub-district in northern rural Homs, where a GAM level of 2.9 per cent was reported among girls and boys under five, which is considered acceptable based on the WHO classification of acute malnutrition.¹¹⁷

Anaemia is prevalent among both children under five and CBA women, with a prevalence of 25.9 per cent and 24.5 per cent respectively.¹¹⁸ This result alerted nutrition partners to the possibility of other serious levels of micronutrient deficiencies beyond anaemia among children and women.

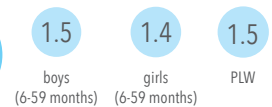
NO. OF PEOPLE IN NEED

4.4M

BY SEX



BY AGE

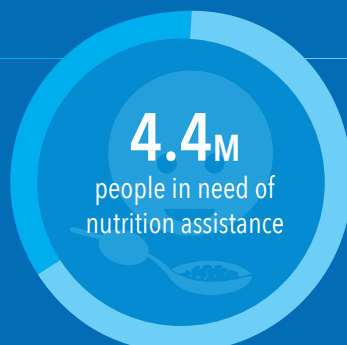


Despite the acceptable levels of acute malnutrition reported among under-five children, factors such as sub-optimum infant and young child feeding (IYCF) practices (particularly the low levels of exclusive breastfeeding below 30 per cent, use of infant formula in situations of poor sanitation and limited dietary diversity) are likely to contribute to higher rates of acute malnutrition.

Existing food insecurity, deteriorating livelihood options, and population displacement exacerbate vulnerability, while limited access to quality water and poor hygiene practices contribute to a high prevalence of diarrhoea and other childhood diseases. These factors can negatively influence the nutrition situation, especially in the context of worsening healthcare and service coverage that characterize inaccessible besieged and hard-to-reach locations.

Combined, these factors have the potential to further jeopardize the health status of girls and boys under five and pregnant and lactating women (PLW), thus increasing the risk of under-nutrition, morbidity and mortality.

1.5M Pregnant and Lactating Women in need of nutrition assistance



2.9M children in need of nutrition assistance

0.84M girls and boys suffer from micronutrient deficiencies

ANALYSIS OF HUMANITARIAN NEEDS

Although the level of acute and chronic malnutrition among under five boys and girls in assessed locations was found to be within acceptable levels, it remains poor among women of child-bearing age. Anaemia levels among both girls and boys under five and CBA women constitute a moderate public health problem.

The sector severity ranking for 2017 considers nutrition-specific and sensitive indicators from other sectors such as food security, WASH and the health sector. In light of information gaps, hampered access and low service coverage, two governorates (Ar-Raqqa and Deir-ez-Zor), as well as all besieged and hard-to-reach areas, are found to be facing critical problems and in need of immediate humanitarian assistance. Due to poor IYCF practices, the moderate to severe levels of anaemia among CBA women and girls and boys under five, poor wasting levels among women, and other aggravating factors such as high prevalence of diarrhoea in the context of relatively low service coverage, five governorates - Aleppo, Al-Hasakeh, Dar'a, Lattakia, and Rural Damascus - are categorized with severe problems, requiring urgent humanitarian assistance. The remaining seven governorates are ranked with major problems and likewise require humanitarian assistance.

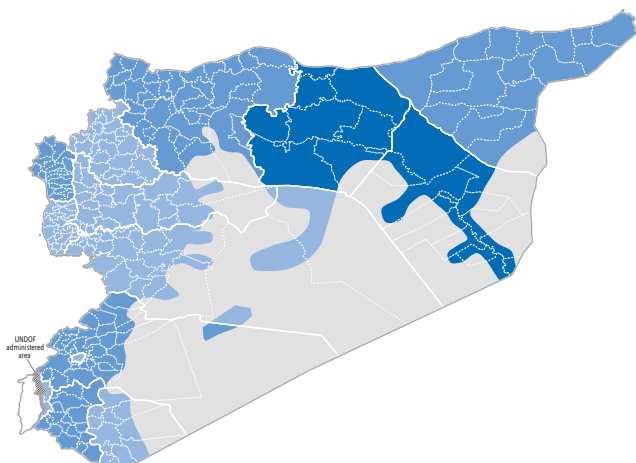
In light of information gaps, poor access to food, high food prices, diminishing employment opportunities and low service coverage in besieged and hard-to-reach areas, nutrition partners are forecasting more under-nutrition cases within these areas. As a consequence, the sector ranks all besieged and hard-to-reach locations as 'critical'.

The scaling-up of ongoing preventative and curative nutrition services is therefore required with different levels of urgency as informed by the sector severity ranking, with an emphasis on serving hard-to-reach and besieged areas where data on the nutrition situation is unavailable.

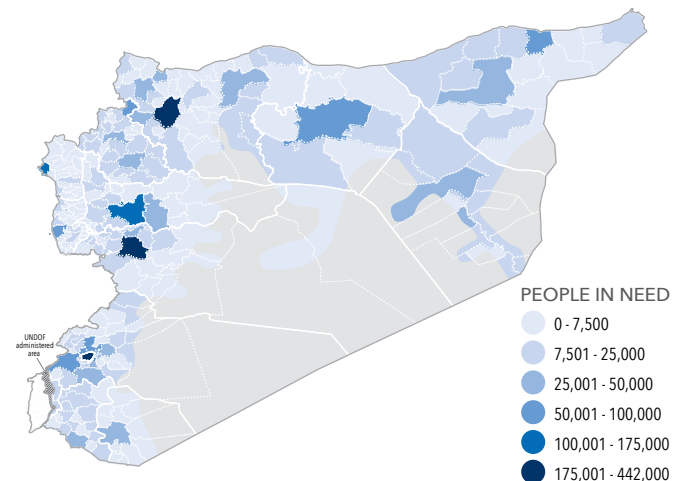
AFFECTED POPULATION

4.4 million girls and boys under five years of age and pregnant and lactating women are at risk of undernutrition and in need of preventive and curative nutrition services in 2017. 75,000 girls and boys aged 6-59 months are acutely under-nourished, of which around 17,000 are in the severe category and are 11 times more likely to die than well-nourished children. 840,000 girls and boys under five years of age suffer from micronutrient deficiencies. 2.9 million girls and boys under 5 years of age require optimal feeding for adequate nutrition status while 1.5 million pregnant and lactating women require preventive nutrition services.

SEVERITY MAP



PIN MAP





SHELTER AND NON FOOD ITEMS

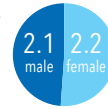
KEY MESSAGES

- Over the past year, the number of people in need of NFIs has increased by 12 per cent to 5.8 million. The need for shelter has increased by 84 per cent, to 4.3 million.
- NFI needs are driven by drastically reduced financial means, and by difficulties in reaching markets. 4.2 million people are in acute and immediate need of humanitarian assistance.
- The magnitude of the overall need for shelter assistance is extreme, with 1.9 million people in Syria in acute and immediate need. In terms of access and effective programming, this is one of the most challenging sectors in a protracted and volatile conflict.
- Syrian communities remain the largest provider of shelter assistance, with 27 per cent of the population hosting people in need in their homes, underlining the need for community-focused solutions.

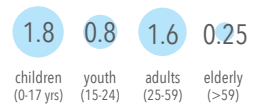
SHELTER NO. OF PEOPLE IN NEED

4.3M

BY SEX



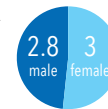
BY AGE



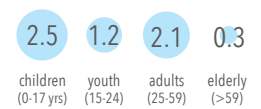
NFI NO. OF PEOPLE IN NEED

5.8M

BY SEX



BY AGE



Key areas include Damascus and the governorates of Rural Damascus and Al Hasakeh, which have the highest average severity ranking for both NFIs and shelter. Aleppo has a high severity for NFI needs, and Quneitra a high severity for shelter.

OVERVIEW

Overall, roughly a quarter of the Syrian population is in need of shelter or NFI assistance, across nearly all governorates. Over the course of 2016, the Shelter/NFI sector has witnessed an increase in the caseload of the population in need. This expansion reflects a continued decline in Syrians' overall levels of resilience, and persistent barriers to addressing these needs. Conflict dynamics have made it increasingly difficult for humanitarian actors to deliver assistance to besieged, hard-to-reach and otherwise restricted areas. In some areas there remain continued and even heightened lack of access for in-depth needs assessments and systematized post-distribution monitoring.

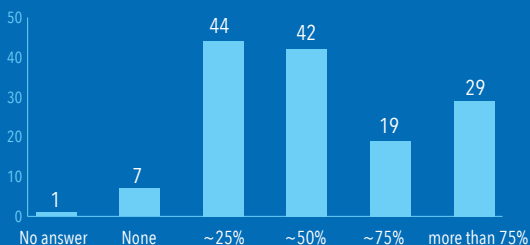
A notable finding from the assessment data is that needs are widespread throughout the country. The majority of people living in shelters and host communities are concentrated around the urban centres of Damascus, Homs, Hama and Aleppo, with high numbers in Al-Hasakeh governorate.

ANALYSIS OF HUMANITARIAN NEEDS

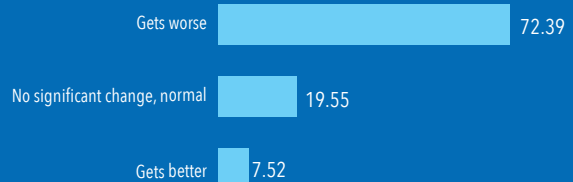
While the conflict continues to provoke new displacements requiring an emergency response, there is also a need to improve the underlying resilience of the Syrian people to withstand protracted hardships and risks. Additionally, the needs of newly displaced, short-term, long-term and multiple-displaced people, host communities and the non-displaced poor need to be distinguished. Shelter/NFI is a life-saving activity that reduces vulnerability across other dimensions of need, and is crucial for community cohesion, dignity and self-respect.

In those locations where markets are available and physically accessible, basic and essential NFI needs can be met by those with sufficient economic resources. Availability of NFIs in the markets is unpredictable, varies across locations, and is severely limited in some areas, but a majority of sub-districts have at least 70 per cent of basic NFIs available in markets.

PERCENTAGE OF PEOPLE LIVING IN SUB-STANDARD SHELTER



CHANGE IN OVERALL ABILITY TO OBTAIN NFIs IN THE MARKET



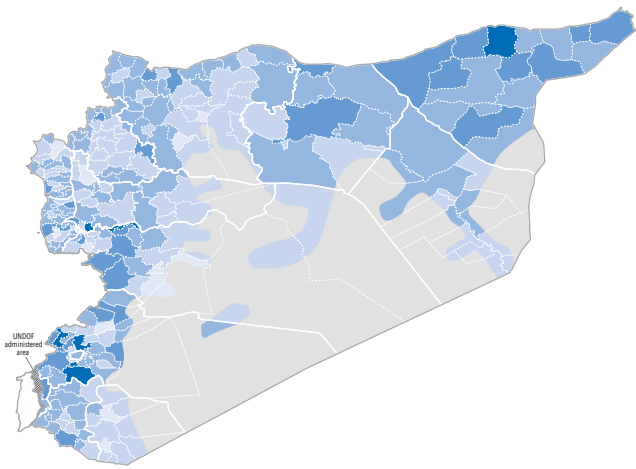
Access to NFIs is restricted both physically (e.g. by distance and insecurity) and economically (by lack of financial means and/or the prohibitive cost of some items), with an estimated 10.7 million people experiencing restricted access to NFIs. There is a continuing high level of need for in-kind NFI assistance, but needs are not uniform and change according to circumstances, requiring more flexible and specialised responses. In many locations, alternative modalities (e.g. cash and vouchers) can provide appropriate forms of assistance, where they can support existing local markets.

In over one third of the country, adequate housing (including apartments for rent) is simply not available. In some areas, rents are unaffordable for a significant part of the population. 52 per cent of the population in reporting sub-districts live in sub-standard housing. The continuous increase in price of construction material has significantly reduced the ability of the affected population to repair their houses. Specific requirements vary widely between groups and locations with different experiences of and exposure to the conflict, requiring flexibility and adaptability of approaches and modalities.

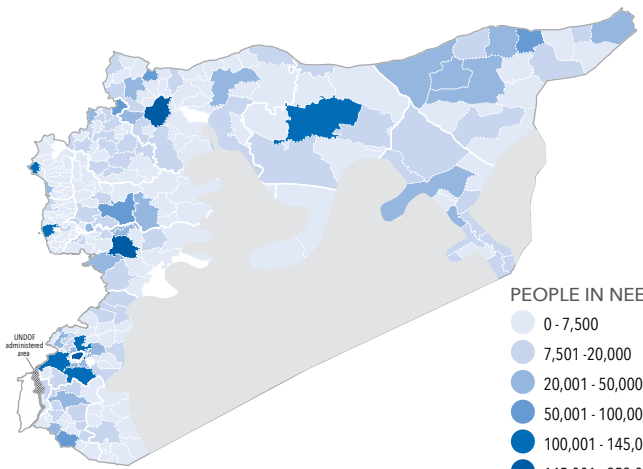
Housing, Land and Property issues are an important factor, particularly in relation to ensuring land and housing tenure is respected despite shifting conflict lines, areas of control, displacement and new settlement patterns.

While hosting can be a good solution, the pressures on host communities are significant. The financial burden experienced by the host communities and the social obligations felt by the displaced families are exacerbated by overcrowding, placing a strain on already weakened water and sanitation facilities and infrastructure.

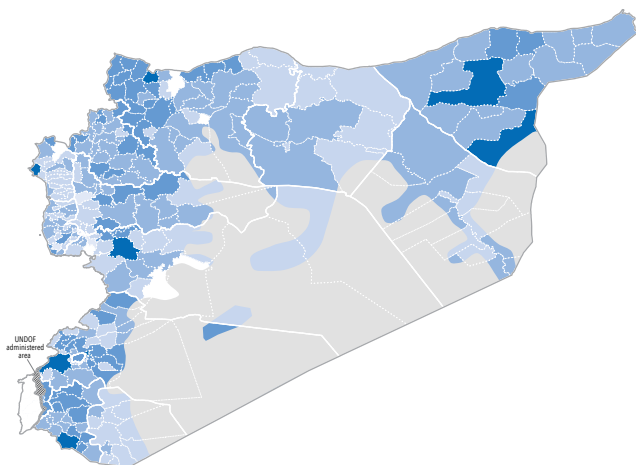
SHELTER SEVERITY MAP



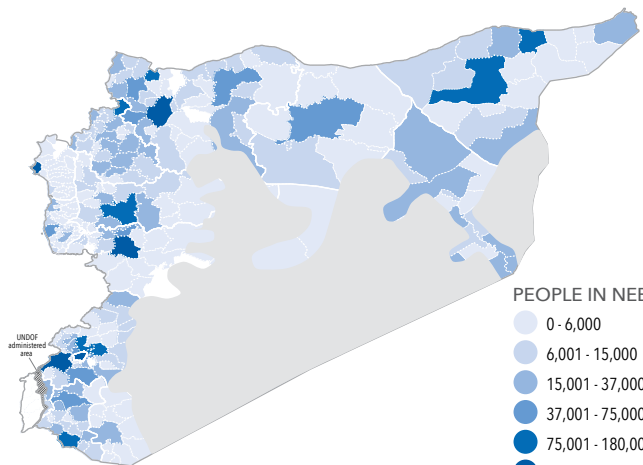
SHELTER PIN MAP



NFI SEVERITY MAP



NFI PIN MAP





WATER, SANITATION AND HYGIENE

KEY MESSAGES

- Water and sewage networks require increased support to continue providing a minimum level of services.
- Increased water quality assurance efforts needed to ensure the population has access to safe water.
- WASH goods and services are widely available but very expensive, pushing families to rely on alternative sources.
- There is a need to scale up activities in ISIL-controlled areas and increase WASH NFI distribution in besieged areas.

OVERVIEW

Before the start of the conflict, nearly 100 per cent of the population in Syria was served by well-developed, state-owned, centrally managed water systems. On the other hand, sewage systems including treatment plants served only major cities while other parts of the country relied on simpler technologies. Three large, dedicated WASH assessments were conducted in 2016 by surveying individual households and key informants, and inspecting existing water systems. The results showed that many of those systems are capable of operating at only a fraction of their design capacity. In many opposition-held and besieged areas, households have turned to costly, alternative water sources to meet their water needs.

Piped water systems, though dysfunctional in some areas, continue to operate to varying degrees of efficiency, with urban centres generally better served. Infrastructure efficiency seems to have been negatively affected as a result of the crisis, and the efficiency of disinfection infrastructure is even lower. A shortage of electricity is found to be most detrimental to operations, with semi-absence or low availability of power in many locations. While operations and maintenance dependability is generally low, the availability of qualified technicians is relatively better. As a result of these limitations in water network supply, further compounded by water cut-offs, up to 48 per cent of the surveyed population

NO. OF PEOPLE IN NEED

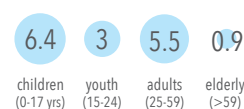
14.9M

8.2M acute humanitarian need

BY SEX



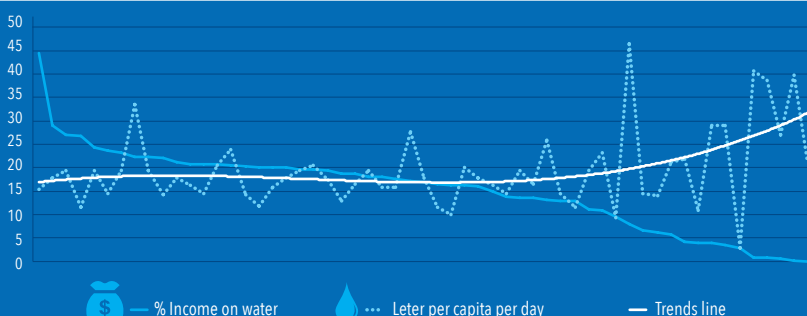
BY AGE



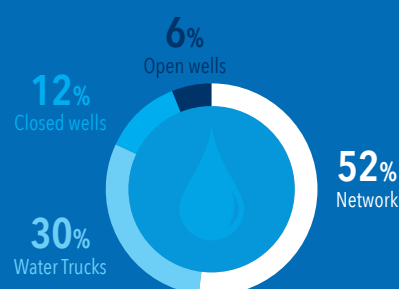
(66 per cent in opposition-controlled and 44 per cent in GoS-controlled areas) has now shifted to covering the majority of their water needs from alternative sources. In opposition-controlled areas, commercial water trucking now accounts for up to 52 per cent of the overall household-level water supply. Water is therefore not free: while approximately 39 per cent of the surveyed households can still access the water supply from networks and private wells at minimal cost, reduced incomes and purchasing power leaves families spending a considerable portion of their income - up to 20-25 per cent in some areas - to secure access to an average of 52 liters of water per person per day. This is an indication that households consider this to be the minimum, sufficient quantity of water.

Water quality varies widely, especially due to disinfectant access and supply issues. Where present, water quality assurance effort have been undertaken with support from the humanitarian community. With regard to sanitation, more than 98 per cent of the surveyed population has access to a functioning toilet. Broadly, sewage networks remain intact, although localized repairs and improvements are needed. Sanitation needs in Syria are considerably worse among IDP populations living in informal settlements compared to the resident population. In these locations, 18 per cent of the population cites challenges accessing toilets, and 20 per cent report difficulty accessing bathing facilities. In addition to issues such as over-crowding and cleanliness of sanitation facilities, assessments confirmed that protection issues, such as the lack of door locks and lights, distance, lack of privacy and harassment on the way to facilities, are of considerable concern to women and girls.

CORRELATION BETWEEN WATER CONSUMPTION AND COST



WATER SUPPLY SOURCES



Garbage collection services are primarily provided by state actors in most parts of the country and are generally capable of providing a basic level of service. However, as a result of operational challenges, efforts are needed in specific communities to strengthen the regularity and quality of solid waste management.

ANALYSIS OF HUMANITARIAN NEEDS

WASH survey results indicate that water and sewage networks require increased support to continue to provide a minimum level of services. Although WASH goods and services are widely available, they are unaffordable. Increased quality assurance efforts are required to ensure that populations have access to safe and adequate water and WASH services. IDPs in informal settlements, health facilities and schools are in particular need of enhanced WASH services.

Overall, the incidence of waterborne diseases seems in line with last year, or improved except in the governorates of Idleb, Ar-Raqqa, Aleppo, Deir-ez-Zor and Rural Damascus, where moderate increases have been recorded. Access and operational challenges impact upon delivery of WASH support to affected populations in many parts of the country.

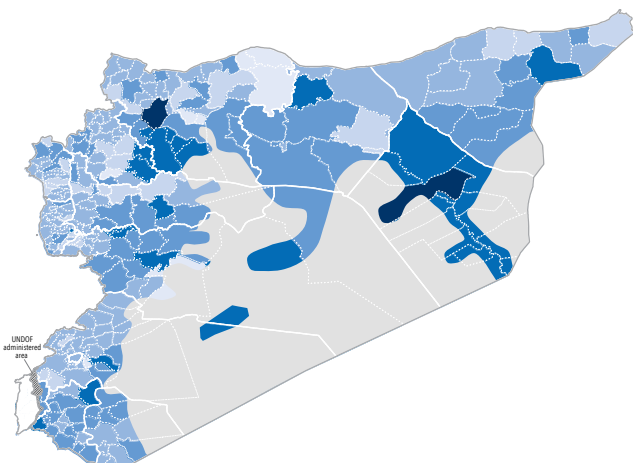
Lack of required operational inputs including power (electricity/fuel), IDP movements and sub-optimal humanitarian WASH capacity among actors on the ground are operational challenges across all geographic areas. Damage sustained by power networks as a result of fighting has negatively impacted water supply in many parts of the country. Continuing, unilaterally imposed sanctions have limited importation of critical equipment, complicating the delivery of effective WASH programming.

AFFECTED POPULATION

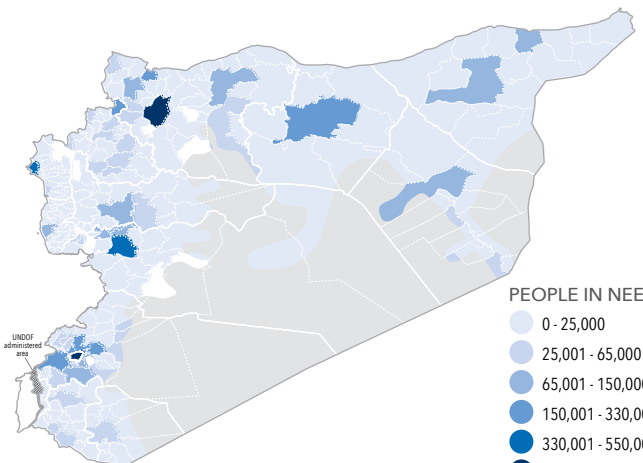
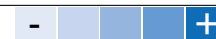
Hygiene needs vary by target population. Household assessments confirm the good level of hygiene practices in Syrian families. With the exception of besieged areas, markets across the country are functional to some extent, and the vast majority of hygiene items are available for purchase. The major barrier to accessing hygiene items is therefore the severely reduced purchasing power of average Syrian families, particularly those who are displaced. In besieged areas, however, critical hygiene items are frequently unavailable altogether.

By its nature, support to WASH systems benefits the entire catchment population served in the programme area. Information available to the WASH Sector indicates that IDPs are consistently worse off than resident/host communities in terms of access to WASH needs. Women of reproductive age (29 per cent of the population) require menstrual hygiene management (MHM) support. Diapers are required by families with children under two (8.7 per cent).

SEVERITY MAP



PIN MAP



- PEOPLE IN NEED
- 0 - 25,000
 - 25,001 - 65,000
 - 65,001 - 150,000
 - 150,001 - 330,000
 - 330,001 - 550,000
 - 550,001 - 1,329,298

ENDNOTES

1. Inter-sector assessment, 2016
2. Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Stephen O'Brien: General Assembly Briefing on Syria, New York, 21 June 2016
3. Health Sector, September 2016
4. Health Sector, 2016
5. UN Commission of Inquiry (COI) Report, 6 September 2016
6. UN COI Report, 6 September 2016
7. 3RP UNHCR, September 2016
8. IDP Task Force, 2016
9. IDP Task Force, 2016
10. CCCM, September 2016
11. UNRWA, September 2016
12. Inter-sector assessment, 2016
13. Ibid.
14. Ibid.
15. Ibid.
16. Syria Center for Policy Research, Impact of the Syria Crisis Report, 2016
17. Three indices of consumption deprivation are used to measure the depth and incidence of poverty. These include: "overall poverty" based on the upper poverty line, which is the minimum necessary goods and services that a household requires to survive; "extreme poverty" based on the lower poverty line, which is the very basic food and non-food items that a household requires to live; and, "abject poverty" based on the food poverty line.
18. Protection Sector, 2016
19. Health Sector, September 2016
20. UNICEF, October 2016
21. International NGO Safety Organisation, 22 September 2016
22. UN COI Report, 6 September 2016
23. Ibid.
24. Ibid.
25. Syria Center for Policy Research, Impact of the Syria Crisis Report, 2016
26. Education Sector, 2016
27. UNESCWA, Humanitarian Impact of Syria-related Unilateral Restrictive Measures, 2016
28. UNDP, 2016
29. Food Security & Agriculture Sector, 2016
30. Ibid.
31. UNESCWA, Syria at War: Five Years On, 2016
32. 3RP UNHCR, September 2016
33. IDP Task Force, 2016
34. Ibid.
35. CARE, Rapid Needs Assessment – Southern/Central Dar'a Governorate, Abtaa and Dael Displacement, 27 September 2016
36. Ibid; CARE, Rapid Needs Assessment – Abtaa Displacement, 8 September 2016
37. CCCM, September 2016
38. CCCM (covering Northern Syria), September 2016
39. Ibid.
40. OHCHR: <http://www.ohchr.org/Documents/Countries/SY/LivingUnderSiege.pdf>
41. Food Security Sector, September 2016
42. WASH Sector, September 2016
43. Health Sector, September 2016
44. Ibid.
45. Education Sector, September 2016
46. Ibid.
47. NFI/Shelter Sector, September 2016
48. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
49. Ibid.
50. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
51. Inter-sector assessment, 2016
52. USG statement to the UNSC on Syria, 29 September 2016
53. Monitoring and Reporting Mechanism(MRM), September 2016
54. UNICEF, No Place for Children, March 2016
55. Protection Sector, September 2016
56. Ibid.
57. Inter-sector assessment, 2016
58. Ibid.
59. UNESCWA, Syria at War: Five Years On, 2016
60. Inter-sector assessment, 2016
61. Reaching Adolescents and Youth Inside Syria: 2016 Mapping Report, OCHA and UNICEF, October 2016
62. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
63. SCPR Impact of the Syria Crisis Report, 2016
64. Logistics Sector, 2016
65. Food Security Sector Mid-Year Review, June 2016
66. Protection Sector, 2016
67. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
68. USG address to UNSC, 21 September 2016
69. IDP Task Force, 2016
70. HNO inter-sector severity PIN
71. Protection sector PIN reflects inter-sector PIN as there is no formal mechanism to count the number of people in need of protection
72. Women and girls, boys, men, adolescents and youth, the elderly, people with disabilities, IDPs, Palestine refugees, third-country nationals (including migrant workers), and minority groups
73. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
74. Inter-sector assessment, 2016
75. Ibid. as defined by the Sector Severity Scale
76. Ibid.
77. Inter-sector assessment, 2016

78. Protection Sector, September 2016.
79. All quotations throughout the document are from affected people consulted during the needs data gathering exercises.
80. Ibid.
81. OCHA, 2016
82. OCHA, 2016
83. UNSC resolution 2165/2191/2258 confirms that the United Nations humanitarian agencies and their implementing partners are authorized to use routes across conflict lines and the border crossings of Bab al-Salam, Bab al-Hawa, Al Yarubiyah and Al-Ramtha, in addition to those already in use, in order to ensure that humanitarian assistance, including medical and surgical supplies, reaches people in need throughout Syria through the most direct routes. While cross-border humanitarian actors in Iraq and Lebanon deliver assistance to Syria, however, they are not currently operating under the framework of the UNSC resolution.
84. Inter-sector assessment, 2016
85. International NGO Safety Organisation, 22 September 2016
86. Physicians for Human Rights, June 2016
87. Health Cluster for Turkey cross-border operation, January-August 2016
88. Aidworkersecurity.org
89. ICRC, News release, 20 September 2016
90. These actions were already possible in opposition-controlled areas
91. OCHA, September 2016
92. OCHA, September 2016
93. Inter/Multi-Sector Assessment Update, 23 June 2016
94. The SMART methodology is a survey method which balances simplicity (for rapid assessment of acute emergencies) and technical soundness. It is based on the two vital public health indicators for the assessment of the magnitude and severity of a humanitarian crisis, (i) nutritional status of children under five; and (ii) mortality rate of the population.
95. Protection partners and other actors collected information through a variety of methodologies including expert panel discussions, focus group discussions and analysis, direct community observations, and/or perceptual key informant interviews. The needs information is further supplemented through sources such as subject/sector-specific assessments and databases. The information is aggregated and presented at the sub-district level and illustrates occurrence of the issue at the sub-district. The values are not intended to compare or indicate the severity or gravity of each specific issue or risk to life.
96. The 14 issues are: child labour; child recruitment; domestic violence; exploitation (including labour exploitation); explosive remnants; family separation; forced/early marriage; harassment; housing, land and property; inter-communal disputes; kidnapping; lack/loss of personal/civil documentation; sexual violence; tension (host/displaced pop.).
97. Please contact WoS Protection Sector (hepps@unhcr.org) for further details on methodologies used and their specific coverage.
98. Needs severity 4 signifies a “severe problem,” severity 5 is a “Critical problem,” and severity 6 is a “catastrophic problem.”
99. Report of the Special Representative of the Secretary-General for Children and Armed Conflict, July 2016.
100. Handicap International, May 2016: http://reliefweb.int/sites/reliefweb.int/files/resources/Factsheet_Syria_2016_FINAL.pdf
101. Ibid.
102. UNMAS Clash Database, 1 January 2015 to 9 August 2016
103. Ibid.
104. The CCCM members support IDP sites in Aleppo, Idlib, Hama, Ar-Raqqa, and Deir-ez-Zor.
105. According to the Ministry of Electricity
106. Livelihoods Assessment, UNDP
107. Impact of the Crisis Report, Confronting Fragmentation. SCPR, 2016
108. Children in Armed Conflict – full citation needed
109. UNICEF, October 2016
110. Only Al-Hasakeh received above average levels of rain and has half of the 2016 wheat planted area; Normalized Difference Vegetation Index (NDVI) slightly below average
111. WFP/FAO Crop and Food Security Assessment Mission, 2015
112. FAO and MARR, 2016
113. WFP Mobile Vulnerability Analysis and Mapping, REACH Food Security Assessment, 2016
114. WFP Mobile Vulnerability Analysis and Mapping, REACH Food Security Assessment, 2016
115. WFP Market Price Bulletin, August 2016
116. A combination of price data from WFP, REACH, NGOs as compiled by RFSAN for January – June 2016
117. According to WHO, acceptable level for wasting is below 5% and for stunting is below 20 per cent, while poor level of wasting is between 5 per cent and 9.9 per cent
118. According to WHO, anaemia level between 20-39 per cent is a moderate public health problem.

METHODOLOGY

Humanitarian Planning Estimates

With the objective of providing the humanitarian community with sub-district-level humanitarian planning numbers, a three step process was used.

First, a combination of existing population estimates, migration/refugee data and estimates, growth rate/mortality estimates, recently completed assessments and profiles, and expert feedback was used to derive a total humanitarian planning estimate.

Second, in order to estimate the number of people and IDPs per sub-district, the process relied on three data sets: (i) Whole of Syria Assessment, covering 217 sub-districts inside Syria; (ii) governorate profiles, covering 272 sub-districts and; (iii) landscan satellite imagery population estimation. These three methodologies were used to estimate: (i) proportions of people living per sub-district and; (ii) proportions of IDPs in a sub-district.

Third, preliminary population estimates broken down by sub-district were circulated to humanitarian partners for review. Expert feedback was all accepted and incorporated. Experts' feedback was given equal weight as the data-sets in the second step.

Confidence Levels

In order to ensure comparability between the different data collection initiatives and unified criteria for scoring the quality of the data gathered, the Needs Identification Framework (NIF) developed a joint Confidence Levels Tool which was systematically applied to Governorate Profiles, Area of Origin and the Whole of Syria Assessment. The tool focused on the quality of the **source of information** and type of **data collection methodology** used. A numerical weight was assigned to determine their score.

Severity Scales

Prior to primary data collection, the WoS sectors followed a consistent model to produce a set of sector-specific Severity Scales which allowed sectors to:

- (i) organise in a staggered and comparable way the key sectoral indicators from category **0 (no problem) to 6 (catastrophic problem)** in order to measure the level of needs and sectoral priority interventions at sub-district level;
- (ii) establish a common rationale across sectors measuring: **a) the magnitude of the problem; b) population-coping mechanisms and; c) the access and availability to aid;**
- (iii) link primary data collection **questionnaires with the pre-identified indicators present in the sectoral severity scales.**

Inter-Sectoral Severity scale

In addition to the sectoral severity scales to guide operations both strategically and programmatically, the humanitarian community produced an intersectoral severity scale. The intersectoral severity shows the areas where the convergence and severity of needs across all sectors is the highest, thus requiring an urgent joined response.

Intesectional severity was calculated as follows:

- (i) we took all the severity ranking for all sectors per sub-district;
- (ii) we transformed the ranks to percentages per sector per sub-district;
- (iii) we calculated the geometric mean of all sectoral ranks per sub-district. The advantage of a geometric mean as a special kind of average is that it does not ignore extremely low and extremely high findings and is often used to evaluate data covering several orders of magnitude.

Sectoral People in Need (PiN) estimates

For the calculation of sectoral PiN estimates, sectors made use of 3 different tools/information sources provided during the HNO process:

- (i) population estimates for humanitarian planning at sub-district level;
- (ii) needs analysis of the assessment findings from various data collection initiatives such as WoSA, Governorate Profiles, sector assessments etc.;
- (iii) sectoral severity scales.

The combination of these 3 tools/information sources allowed the sectors to produce reliable and methodologically sound estimates. The rationale was as follows: once the sectors had ranked each of the sub-districts from 0 to 6 as per the Severity Scales, they used the set of indicators defined for each of them to calculate their sectoral PiN, taking as a baseline the total humanitarian planning estimate and IDP population for each of the sub-districts.

Multi-sectoral PiN estimates

The 2016 HNO inter-sectoral PiN was calculated using the maximum PiN across all sectors per sub-district, which gave an estimate of **13.5 million**.

Multi-sectoral acute PiN

In addition to the HNO intersectoral PiN, humanitarian actors in Syria defined the number of people in need that require immediate multi-sectoral attention. The humanitarian community considers that humanitarian assistance for the following people in need requires increased coordination between multiple sectors. The calculation of acute PiN followed the logic of cross-sectoral severity scale: people in need living in sub-districts where the humanitarian situation at inter-sectoral level is severe (rank 4), critical (rank 5) or catastrophic (rank 6).

Hard-to-reach and besieged locations and areas

The current list of besieged and hard-to reach locations/ areas (updated as of 12 October 2015) is the result of consultations with humanitarian actors working inside Syria and from Turkey and Jordan and further reconciliation by OCHA teams responding to the Syria crisis.

The list will be regularly updated throughout the course of 2016.

Besieged area: an area surrounded by armed actors with the sustained effect that humanitarian assistance cannot regularly enter. Civilians, the sick and wounded population cannot regularly exit the area.

Hard-to-reach area: an area that is not regularly accessible to humanitarian actors for the purpose of sustained humanitarian programming due to denial of access, the need to negotiate access on an ad-hoc basis, or due to restrictions such as an active conflict, multiple security checkpoints or failure of the authorities to provide timely approval.

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.

ACRONYM

CBA – Child-bearing age	TAD - Transboundary Animal Disease
CCCM – Camp Coordination and Camp Management	UN – United Nations
CFSAM - Crop and Food Security Assessment Mission	UNDOF - United Nations Disengagement Observer Force
ESCWA - United Nations Economic and Social Commission for West Asia	UNDP – United Nations Development Programme
FAO – United Nations Food and Agriculture Organization	UNFPA – United Nations Population Fund
GAM - Global acute malnutrition	UNHCR – United Nations High Commissioner for Refugees
GBV – Gender-based violence	UNICEF - United Nations Children's Fund
GDP - Gross domestic product	UNMM – United Nations Monitoring Mechanism
GoJ – Government of Jordan	UNRWA – United Nations Relief and Works Agency for Palestine Refugees in the Near East
GoS – Government of Syria	UNSC – United Nations Security Council
HLP – Housing, land and property	USD – United States dollar
HNO – Humanitarian Needs Overview	USG – Under-Secretary General
HTR – Hard-to-reach area	WASH – Water, Sanitation and Hygiene
IDP – Internally displaced person	WFP – United Nations World Food Programme
IED – Improvised explosive device	WHO – United Nations World Health Organization
IHL – International humanitarian law	WoS – Whole of Syria
IHRL - International human rights law	
INGO – International non-governmental organization	
INSO – The International NGO Safety Organization	
ISIL - Islamic State of Iraq and the Levant	
IYCF - Infant and young child feeding	
MHM - Menstrual hygiene management	
MRM – Monitoring and reporting mechanism	
MT – Metric tonnes	
NFI – Non-food item	
NGO – Non-governmental organisation	
NLG – No Lost Generation	
NNGO – National non-governmental organisation	
OCHA – United Nations Office for the Coordination of Humanitarian Affairs	
PIN – People in need	
PLW - Pregnant and lactating women	
SADD – Sex-, age-, and disability-disaggregated	
SARC – Syrian Arab Red Crescent	
SCPR – Syrian Centre for Policy Research	
SEA - Sexual exploitation and abuse	
SYP – Syrian pound	

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REFERENCES

For more information: ocharosyr@un.org

All data available on website: <http://hno-syria.org>

OCHA. (2014, August). *Guidance Humanitarian Needs Comparison Tool*, Retrieved from <http://bit.ly/1OY8jrh>

Food Security Assessment Registry <http://foodsecuritycluster.net/document/fss-whole-syria-assessment-registry-2015>

Whole of Syria Assessment Registry <http://bit.ly/1X33COd>

This document is produced on behalf of the Strategic Steering Group and partners.

This document provides the Strategic Steering Group's shared understanding of the crisis, including the most pressing humanitarian need and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.



<http://www.unocha.org/syria>



<https://www.humanitarianresponse.info/en/operations/whole-of-syria>



<http://www.hno-syria.org>



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