



# URBAN AREA HUMANITARIAN PROFILE: DEIR EZ-ZOR

## SYRIA CRISIS

### FOOD, HEALTH AND WATER ASSESSMENT

AUGUST 2014

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### About REACH

REACH is a joint initiative of two international non-governmental organizations - ACTED and IMPACT Initiatives - and the UN Operational Satellite Applications Programme (UNOSAT). REACH was created in 2010 to facilitate the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. All REACH activities are conducted in support to and within the framework of inter-agency aid coordination mechanisms. For more information, please visit: [www.reach-initiative.org](http://www.reach-initiative.org). You can write to us at: [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) and follow us @REACH\_info.

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## LIST OF ACRONYMS

<b>IDP</b>	Internally Displaced Person
<b>KI</b>	Key Informants
<b>NFI</b>	Non Food Items
<b>NGO</b>	Non-Governmental Organization
<b>SINA</b>	Syria Integrated Needs Analysis
<b>WASH</b>	Water, Sanitation and Hygiene

## GEOGRAPHIC CLASSIFICATIONS

<b>Governorate</b>	Highest form of governance below the national level
<b>District</b>	Sub-division of a governorate in which government institutions operate
<b>Sub-District</b>	Sub-division of a district composed of towns and villages
<b>City</b>	Urban centre located within a sub-district
<b>Neighbourhood</b>	Lowest administrative unit in a city

## INTRODUCTION

**During June and July 2014, the eastern Syrian city of Deir ez-Zor was besieged.** After the escalation of heavy inter-factional fighting for the control of the city during July 2014, 90% of Deir ez-Zor is currently under the control of a third party armed group. The main crossing gates along the Euphrates River are inaccessible, but the roads that connect Iraq and Deir ez-Zor have been re-opened, allowing for free movement between Iraq and Deir ez-Zor city.

This situation is very different if compared to what was observed in Deir ez-Zor over the course of the last several months. Between June and July 2014, **very little humanitarian assistance was delivered to the city due to the ongoing siege** and residents wishing to leave faced severe mobility restrictions, protection risks, and threats to their personal security. Despite this, moderate improvements could be observed due to the opening of access routes via Iraq

The total population across the assessed areas is believed to have increase since July 2014; currently, it is an estimated 63,000 individuals or approximately 10,500 families. The majority of these families have experienced secondary displacement within Deir ez-Zor, while a smaller but nonetheless sizeable proportion has experienced primary displacement. The fact that the city has come under siege and that the host population has recently absorbed a sizeable shock in the form of IDPs indicates a significant deterioration in humanitarian conditions inside the city, requiring an immediate intervention.

This KI assessment provides an analysis of **primary data collected by REACH** enumerators **across an area of Deir ez-Zor city controlled by a third party armed group** between 25 and 27 July 2014. This data will not only inform actors on the current humanitarian situation inside Deir ez-Zor, but will allow REACH to analyse trends and the evolution of needs and vulnerabilities in Deir ez-Zor city over time.

The findings from this assessment highlight **sector specific priorities and gaps** to inform the relief response to the **humanitarian needs** in Deir ez-Zor city. While humanitarian needs were severe in the area<sup>1</sup> over the course of the last several months, marginal improvements in welfare can be observed, especially in food security. This can be attributed primarily to the easing of mobility restrictions which have facilitated the flow of goods from neighbouring Iraq. Nonetheless, humanitarian needs in Deir ez-Zor city remain severe and are susceptible to rapid deteriorations due to the volatile security situation.

This factsheet presents findings across the sectors of **food, health and water** in Deir ez-Zor city. This assessment does not aim to provide detailed programmatic information; rather, it is designed to share with a broad audience a concise overview of the current situation in this area and to guide further, more targeted assessments.

*As part of the presentation of findings for each of the sectors covered by this assessment, suggested **priority interventions** are included to **inform aid actors** in planning timely and appropriate relief response for affected populations in Deir ez-Zor city.*

<sup>1</sup> See last REACH [Deir ez-Zor Factsheet](#) (July 2014)

## METHODOLOGY

The methodology applied for this assessment was done in a phased approach which included **primary data collection and analysis between 22 and 30 July 2014 as well as a secondary data review which was used to triangulate and validate the primary data.**

Due to access and security constraints, a combination of purposive and convenience sampling was deemed the most appropriate methodology for this assessment. Respondents were chosen on the basis of availability of access as well as subjective judgements by enumerators, meaning that a degree of bias is inherent to this exercise. The two main data collection methods used were Key Informant (KI) interviews as well as direct observations from the field carried out by a trained REACH enumerator. These methods were designed to enforce, supplement and validate findings from primary and secondary data.

The enumerator who participated in the assessment in Deir ez-Zor city has been trained by a leader of enumerator teams based in Syria. This training ensured a good understanding of key terms and underlying factors for each assessed sectors, as well as assessment techniques such as triangulation and interviewing. The REACH team in Turkey followed up with a remote training to cover assessment standards, terminology, methodology and tools, as well as humanitarian principles.

REACH designed and provided a multi-sector questionnaire to the enumerator based on data collection tools adapted from the Syria Integrated Needs Assessment (SINA)<sup>2</sup> to ensure that data could be compared where appropriate.

The questionnaire includes an evaluation of needs, priorities and severity across the sectors of food, health and water. Key Informants were asked to rank severity on a seven-point scale ranging from 0, meaning “normal situation”, to 6, indicating a “catastrophic” humanitarian situation (Table 1).

The REACH enumerator selected KI based on their knowledge of sector-specific issues. These included individuals such as local leaders working with private or public service providers.<sup>3</sup>

To ensure the reliability of data collected through KI interviews, the enumerator was asked to triangulate their findings through different sources familiar with the context in Deir ez-Zor city across the food, water and health sectors. To ensure further data consistency, the REACH assessment team conducted a remote debriefing during August 2014 to review and validate the completed questionnaires.

The focus of this debriefing was to further elaborate on these findings and to ensure that any apparent inconsistency in the data was clarified, rectified, or altogether discarded. The REACH assessment staff also conducted shorter interviews with KI from other organisations, to cross-check the information shared by the enumerator.<sup>4</sup>

Due to the recurrence of population movements and the limited access to Deir ez-Zor city, population numbers are difficult to estimate. For this reason, the population and displacement figures provided in this factsheet should be interpreted as informed estimates only.

The main limitation for this assessment is the reliance on a limited number of KI interviews as the primary data collection method. This constrained the analysis of results, despite the checks and balances set by REACH during the triangulation process. Despite this, the limitations and difficulties of movement in the assessed zones currently make KI interviews the most feasible and accessible source of information.

<sup>2</sup> [Assessment Working Group for Northern Syria](#), 31/12/13

<sup>3</sup> KI usually include, but are not limited to, local council, relief committees, and health and education officials, along with community leaders.

<sup>4</sup> The information relative to the organisations and contacts remains confidential.

Map 1: Assessed area of Deir ez-Zor City, 25 July 2014

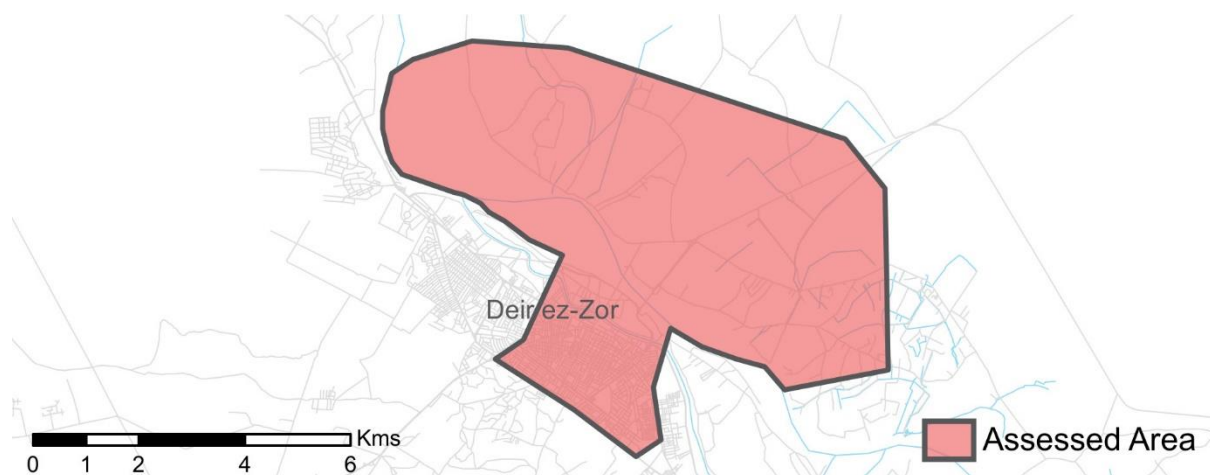


Table 1: Severity Scale, from 6 ("Catastrophic situation") to 0 ("No problem")

6	<b>Catastrophic situation</b> for <sector name>. Affected population faces <b>life-threatening conditions</b> causing <b>high level of suffering, irreversible damages to health status</b> and deaths. <b>Large number of deaths</b> are reported directly caused by the current <sector name> conditions and will result <b>in many more deaths</b> if no immediate <sector name> assistance is provided.
5	<b>Critical situation</b> for <sector name>. Affected population faces <b>life-threatening conditions</b> causing <b>high level of suffering, irreversible damages to health status</b> and deaths. <b>Deaths are already reported</b> , directly caused by the current <sector name> conditions, and <b>more deaths are expected</b> if no immediate <sector name> assistance is provided.
4	<b>Severe situation</b> for <sector name>. Affected population faces <b>life-threatening conditions</b> causing <b>high level of suffering and irreversible damages to health</b> , which <b>can result in deaths</b> if no humanitarian assistance is provided.
3	Situation of <b>major concern</b> for <sector name>. <b>Majority of people</b> are facing <Sector name> <b>problems or shortages</b> causing <b>discomfort and suffering</b> which can result in irreversible damages to health, but they are <b>not life threatening</b> . Affected population will <b>not be able to cope</b> with the <Sector name> current conditions <b>if the situation persists and no humanitarian assistance is being provided</b> .
2	Situation of <b>concern</b> for <sector name>. <b>Many people</b> are facing <sector name> <b>problems or shortages</b> causing <b>discomfort and suffering</b> , but they are <b>not life threatening</b> . Affected population is feeling the strain of the situation but <b>can cope with the current situation with local resources</b> .
1	Situation of <b>minor concern</b> for <sector name>, but <b>conditions may turn concerning</b> . <b>Few people</b> are facing <b>problems or shortages</b> in <sector name> but they are <b>not life threatening</b> . Affected population is feeling the strain of the situation but <b>can cope with the current situation with local resources</b> .
0	<b>Normal situation</b> for <sector name>. Population is living under <b>normal conditions</b> . All <sector name> <b>needs are met</b> .

## PRIORITY GROUPS

- Overall, KI identified that the population groups – in need of assistance – in order of severity – are (1) IDP's living in collective open spaces; (2) IDP's in damaged locations and (3) IDP's living in other types of collective shelters (Table 2).

Table 2: Groups most in need of assistance in Deir ez-Zor city, 25 July 2014

IDPs in collective shelters	
IDPs in host families	
Residents hosting IDPs	
IDPs in damaged/unfinished locations	
IDPs in open spaces	
IDPs in organised/structured camps	
IDPs in rented accommodations	
Residents	

## FOOD FINDINGS

### SEVERITY LEVEL: SITUATION OF MAJOR CONCERN (3)

- The level of severity in the food sector has improved since the last assessment conducted in July 2014. Although food shortages are still reported, there has been an improvement, mainly due to the opening of direct routes to markets in Iraq. The affected population reportedly face *"problems or shortages causing discomfort and suffering which can result in irreversible damages to health, but these are not life threatening"* (Table 3).

Table 3: Priority food interventions in Deir ez-Zor city, 25 July 2014

Wheat flour	
Infant formula	
Cash assistance	
Agricultural support (seeds, tools)	
Bread	
Cooking fuel	
Food baskets	
Fuel for bakeries	

## MARKET STOCKS

- Key informants reported that markets are currently able to restock within seven days in Deir ez-Zor city, but **high prices and on-going price inflation in essential commodities** are still a concern which may aggravate an already precarious food security situation. This improvement can be attributed to the aforementioned opening of commercial routes with Iraq which have resumed the trade of goods.
- The ability to restock food supplies has vast cross-sectoral implications, and diminishing the capacity of the target population to do so can lead to severe and rapid deteriorations in humanitarian conditions, chief amongst them public health. As such, KI identified **food as the highest priority sector of intervention** for Deir ez-Zor city.

## FUNCTIONING OF BAKERIES

- The number of functioning bakeries in Deir ez-Zor city remains the same as in July 2015: a total of **2 functioning bakeries remain of the 24** that existed prior to the onset of conflict. The main reported factors which determined whether a bakery functioned or not are: **1) lack of funding to acquire flour and fuel; 2) lack of electricity; and 3) lack of staff**. Therefore, conflict-related damage or destruction has not been as pronounced as in previous assessments and the lack of resources now seems to be a key determinant (Table 4).

Table 4: Factors impacting bakeries' functionality in Deir ez-Zor city, 25 July 2014

No funding	
No electricity	
Lack of staff	
Poor maintenance/repair	
Lack of yeast	
Lack of wheat	
Lack of machinery	
Lack of fuel	
Lack of flour	
Destruction	

## FOOD ACCESS AND AVAILABILITY

- Key informants highlighted **(1) the high cost of basic commodities** as the main food access barrier. This was followed by **(2) the general lack of economic resources – mainly cash – to acquire food**, as well as **(3) the lack of physical access to local markets within the area** due to mobility restrictions (Table 5).
- The physical access constraints highlighted in the interview are mainly due to damaged roads, long distance or lack of fuel and/or access to transportation.



Table 5: Access constraints to food in Deir ez-Zor city, 25 July 2014

Some commodities are too expensive	
Lack of resources to purchase food	
Physical constraints	
Food suppliers cannot reach markets	
Loss of agricultural assets/inputs	
No resources to grow food	
Security constraints for residents	

- These constraints are similar to those KI's identified during July 2014. Furthermore, KI were asked about specific availability issues in Deir ez-Zor city. Findings indicate that the most important food availability issues were: (1) **the lack of infant formula used to feed infants less than 12 months of age**; (2) **decrease of local food production** and (3) **the lack of diversity in available food groups in the local market** leading to lower consumption of high-nutrient food groups (Table 6).

Table 6: Food availability issues and shortages in Deir ez-Zor city, 25 July 2014

Infant formula	
Locally produced food	
Food diversity on markets	
Utensils	
Cooking fuel	

## HEALTH FINDINGS

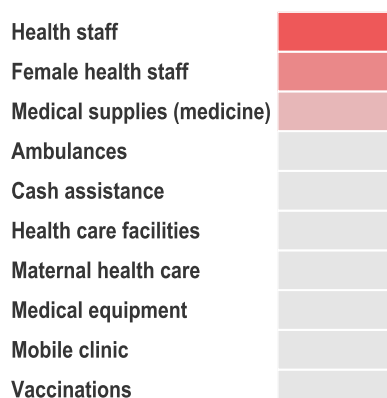
### SEVERITY LEVEL: **SEVERE (4)**

- **The lack of health services have consistently been categorised as “catastrophic”**, across multiple assessments in Deir ez-Zor since November 2013. Findings suggest that the affected population faces “*life-threatening conditions causing high levels of suffering and irreversible damages to health, which can result in deaths if no humanitarian assistance is provided*”<sup>5</sup>.
- Interviews with health workers and local council members acting as KI emphasised that the situation has slightly improved since July 2014, but is still considered of high concern.
- A previous REACH assessment carried out in July 2014 showed a higher level on the severity scale (5); a **slight improvement was therefore registered**.

<sup>5</sup> See Methodology for full Severity scale.

\* Caused by conflict related injuries

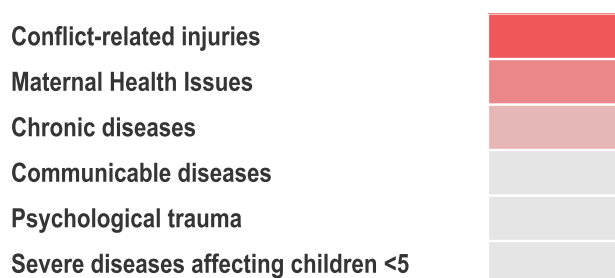
Table 7: Priority health interventions in Deir ez-Zor city, 25 July 2014



## MAIN HEALTH CONCERNS

- The **main health concerns** reported by KI in the health sector are **(1) conflict related injuries; (2) maternal health and (3) chronic diseases** (Table 8).
- This shift in priorities from last July 2014, when communicable diseases were considered the primary health concern, can be attributed to the escalation of inter-factional violence towards the end of July and early August 2014.
- KI reported an increase in the number of conflict-related injuries and disabilities as a result of direct exposure to this intensified violence.

Table 8: Main reported medical conditions in Deir ez-Zor city, 25 July 2014



- The most common symptoms registered at health centres were respiratory problems and diarrhoea, while the most prevalent medical ailments were reported to be **(1) malnutrition; (2) acute respiratory infections and (3) measles**.
- **Only one official hospital hosting a total of four doctors and three rudimentary field hospitals** are currently functioning in **Deir ez-Zor city**. This represents a significant deficit of public health infrastructure in comparison to the **50 health centres that were functional before the onset of conflict** (Table 9).
- As previously indicated, patients needing follow-up or more complex treatment were previously sent to a hospital in the nearby town of Mayadeen, but the blockades on access roads now prevent them from reaching this facility.

Table 9: Health centres' functionality in Deir ez-Zor city, 25 July 2014



- The official hospital of Alkahtan is managed by three midwives, exclusively addressing **reproductive health needs**, while the field hospitals of Pharmex and Sheikh Yaseen, where a total of 7 doctors, 24 nurses, 3 midwives and 2 pharmacists are reportedly working, all **practise surgery, and can perform minor surgical procedures and injury care**.
- The health centres in Deir ez-Zor city suffer from a chronic **lack of medical staff as well as a lack of medical supplies** necessary to treat the injuries, symptoms, and diseases identified by KI.
- At present, the public health system in Deir ez-Zor city is believed to be operating at 5% of the capacity required to service aggregate needs across the city, while **vaccination service coverage has been reduced to a level of 10% in the past month** (Table 10). This is of particular concern given previously reported cases of polio<sup>6</sup> and measles in the area.
- Ambulance services have been reduced to 50%, and emergency responses have been reduced to 35% of the required capacity. The availability of medicines has declined in the past several weeks given the lack of access to medical aid and supplies.

Table 10: Medical service coverage compared to needs in Deir ez-Zor city, 25 July 2014

Growth monitoring/nutrition surveillance	0%
Vaccination	10%
Chronic diseases management	20%
Reproductive Health and obstetric care	20%
Medicine distribution	30%
Emergency and injury management	35%
Medical consultations	40%
Emergency health services/ambulances	50%

<sup>6</sup> [Syria excluded polio-afflicted province from vaccination campaign](#) (Al Jazeera, 17 December, 2013)

## WATER FINDINGS

### SEVERITY LEVEL: MINOR CONCERN (1)

- The water situation in Deir ez-Zor has improved since the previous assessment carried out by REACH in July 2014. This gradual improvement follows a pre-established trend observed over the last several months of water not being a 'life threatening issue in itself' but **remaining a concern**.
- At the time of this assessment, KI classified the current situation in the water sector as “*few people are facing problems, but they are not life threatening. The affected population is feeling the strain of the situation but can cope with the current situation with local resources.*”<sup>7</sup>
- The scope of water provision and access has consistently been reported as non-life threatening across multiple assessments including the SINA, but **restrictions and limitations related to availability, quality, and access to water** are persistent issues. As such, water services in Deir ez-Zor city require close and continuous monitoring. Currently, **(1) water availability** is the main concern in Deir ez-Zor, followed by **(2) access, and (3) quality** of the water which is provided.

Table 11: Priority water interventions in Deir ez-Zor city, 25 July 2014

Network repairs	
Water tanks	
Generators	
Water treatment chemicals	
Water pumps	
Water cans	
Fuel for generators	
Electricity	
Digging wells	
Cash assistance	

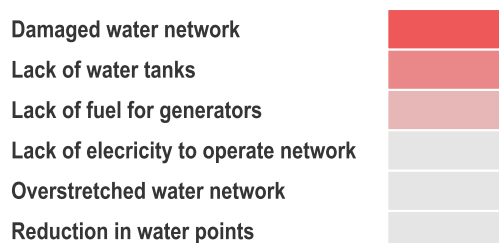
### WATER AVAILABILITY

- The availability of water and the condition of water provision infrastructure is comparable to the findings from the July 2014 assessment (Table 12).
- At the end of July 2014, residents estimated that they received water between **1 to 4 hours per day** and the damage inflicted on the water network infrastructure during the escalation in armed violence is expected to cause a further deterioration in water provision services in the city.
- Furthermore, the **lack of water storage infrastructure such as tanks in the area** – primarily caused by stalled humanitarian assistance and impeded access – remains a high concern.

<sup>7</sup> See Methodology for full Severity scale.

- This appears to have led to a shift in water sourcing strategies amongst parts of the affected populous **which are now resorting to collecting river water, a practice which carries the risk of spreading waterborne diseases and other public health concerns.**

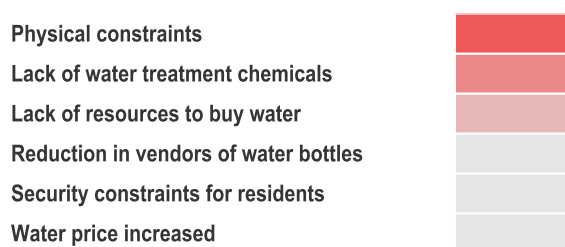
Table 12: Water availability issues in Deir ez-Zor city, 25 July 2014



## WATER ACCESS AND WATER QUALITY

- **Physical access to water points and water facilities** is the primary problem identified by KI from the water sector (Table 13). The main factors which impede access are the level of insecurity and intensification of inter-factional clashes during the past month and therefore, the restrictions placed on the affected population's ability to access water supply areas.
- The previous REACH assessment conducted in July 2014 found that **(1) water does not look good; (2) water does not taste good; and (3) water is polluted.** Findings from this assessment suggest that these perceptions still hold indicating significant problems with the capacity of the local administration to treat and deliver clean water.

Table 13: Access constraints to water in Deir ez-Zor city, 25 July 2014



- The lack of fuel for generators remains a high concern in the assessed area. Findings indicate that rolling power cuts leave **residents of Deir ez-Zor city with approximately 4-5 hours of electricity per day**, further impacting the already diminished capacity of the water network, including water treatment infrastructure.

## CONCLUSION

### GENERAL

- The remaining population in eastern Deir ez-Zor city faces acute challenges in servicing basic needs. Already diminished capacities are predicted worsen as armed violence continues to escalate and humanitarian assistance is stalled due to access issues. Eastern Deir ez-Zor should thus be prioritised for interventions in the assistance sectors outlined above.
- Further demographic data should be gathered and regularly updated, when possible, on population numbers in eastern Deir ez-Zor city to inform programming. This more comprehensive demographic assessment should include data disaggregated by sex and age group to identify the most vulnerable groups.

### FOOD

- KI reported insecurity and limited resources, with an emphasis on lack of financial means in a context of high and inflating food prices, as the primary constraints in accessing food for residents of eastern Deir ez-Zor city. Regular price monitoring should be conducted to track inflation on key food items.
- Markets are facing increasing levels of shortages as residents of eastern Deir ez-Zor city are reportedly purchasing higher quantities of more important and high-nutrient food items to mitigate the effects of the siege.
- KI reported that the functioning of bakeries was significantly constrained by the irregularity of electricity provision and the lack of key ingredients such as flour.

### HEALTH

- The current priority health concerns reported by health workers are (1) conflict related injuries; (2) maternal health and (3) chronic diseases.
- The functioning of health centres is reported as severely undermined by shortages of essential resources – namely (1) lack of medical staff; (2) lack of electricity and (3) lack of medicine.
- Existing medical supplies, which are limited to general and basic medicines, were estimated to last for two months at the time of the assessment

### WATER

- Enumerators reported the quality of water as a critical concern, and previous KI reports from the health sector emphasised water- and vector-borne diseases as a severe issue.
- Eastern Deir ez-Zor populations resort to alternative water sources, such as the Euphrates River, that are not chlorinated on a regular basis. The deficiency of the official water network is reportedly due to electricity shortages, which are difficult to mitigate.