

SYRIA

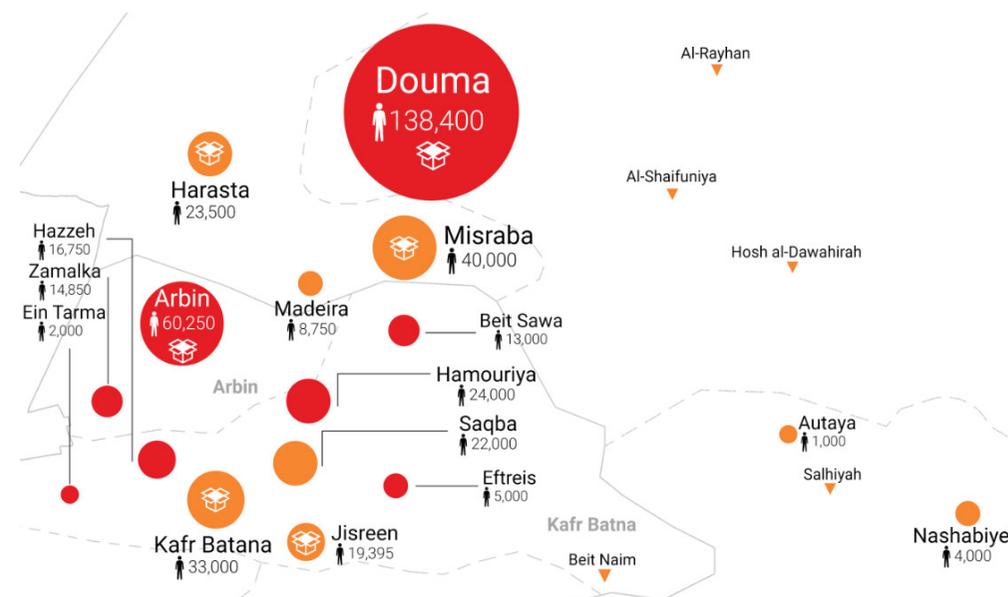
Conflict in Eastern Ghouta

Approximately 426,000 people living in besieged Eastern Ghouta are affected by protracted conflict and recent deterioration of access restraints. Despite the area being the part of the de-escalation agreement, the government forces renewed their airstrikes and shelling as of the end of September, which resulted in damage and loss of civilian infrastructure, hospitals, and schools. Clashes between armed groups controlling different parts of the territory compound the situation. The highest level of besiegement is reported in majority of the communities as of November, which results in severe shortages of food and medicine, leading to increasing cases of acute malnutrition.

NEED FOR INTERNATIONAL ASSISTANCE



IMPACT



Anticipated scope and scale

The current escalation is likely to continue and humanitarian **access will remain extremely limited**. Humanitarian needs are likely to significantly increase with approaching winter. Temperatures dropping below zero degrees are likely to compound the humanitarian crisis due to ongoing shortages of fuel. As the population relies predominantly on aid deliveries, restricted access will likely lead to **further deterioration of food security** and an **increase in SAM and MAM** caseload, with at least 1,500 children currently at risk of severe malnutrition.

Key priorities



critical food shortages
increase of SAM caseload



infrastructure damaged
severe shortages of medicines



infrastructure destroyed
wells often contaminated

Humanitarian constraints



Humanitarian access deteriorated in October with a complete closure of Al-Wafideen checkpoint and an escalation of airstrikes. Deliveries of humanitarian aid extremely limited.

Limitations

Population estimates of Eastern Ghouta vary and cannot be independently verified by ACAPS. Figures of people in need or figures representing affected population (casualties, fatalities) are often underreported due to access restrictions. It is therefore impossible to establish an exact number of people in need or displaced in Eastern Ghouta.

Crisis impact

Eastern Ghouta, an opposition-held region in the outskirts of Damascus, consists of 22 besieged communities with estimated population of 426,000. However, according to most recent reports nearly 400,000 people remain besieged in Eastern Ghouta as of October, including an estimated 200,000 children. *Siege Watch July 2017 UNICEF 03/11/2017* Despite the establishment of the de-escalation zone in this area in May, airstrikes and shelling were reported as of end of September. Violence has escalated in the area in October and November, resulting in damage and losses of civilian infrastructure, including hospitals and schools.

Eastern Ghouta has been fully besieged by the government forces since October 2013, following a year of partial besiegement. Humanitarian access was further restricted in 2017. This results in the whole population being affected by ongoing insecurities and in need of cross-sectoral assistance.

Growing tensions between armed groups controlling different towns in the area compound the situation. In November, Jaish al-Islam and Al-Rahman Corps are fighting in the outskirts of Misraba. Saqba, Arbin, Kafr Batna and Hazza towns witness growing tensions between Hayat Tahrir al-Sham (HTS) and Al-Rahman Corps as of October. *SOHR 8/11/2017 SOHR 30/10/2017*

Government forces have been targeting areas controlled by armed groups with indiscriminate airstrikes and shelling. *SOHR 28/10/2017* As of October airstrikes targeted areas all across the besieged territory, recently focusing on Douma, Harasta, Madeira, Kafr Batna, Saqba, Ein Tarma, Arbin, and Hamouriya. Multiple casualties and a high level of structural damage have been reported daily throughout the escalation period. *SOHR 2/11/2017 SOHR 9/11/2017*

Food: Critical food shortages have been reported as of October. Most of the previously stored food has run out and the residents resorted to looting warehouses of local aid organisations in order to obtain food items. *SOHR 22/10/2017* A large tax increase imposed on traders by the Government of Syria (GoS) and a complete closure of the Al-Wafideen checkpoint resulted in prices increases of up to 50% for basic food items. *WFP 31/10/2017* Most people can no longer afford to buy food supplies even when they are available. *OHCHR, 27/10/2017*

Limited commercial and humanitarian access is contributing to reduced availability of essential goods, as almost no supplies have entered the area since October. One kilogram of bread in Eastern Ghouta costs 1150% more than in nearby Damascus. Since January, bread and wheat flour prices have increased by more than 174% and 390% respectively, whereas sugar prices have risen by more than 1000%. Many goods such as cheese, eggs, meat, and vegetable oil are no longer accessible in Eastern Ghouta.

Shortages of potatoes and chicken have been reported as of October across majority of the communities. *REACH 23/10/2017*

At least 330,000 people were reported in need of food support in subdistricts covering Eastern Ghouta in 2016. 72% of children under the age of five are in need of food support, namely nutritional supplements or baby formula. *Syria Direct, 26/10/2017*

Nutrition: Food insecurity and no access to healthcare has resulted in more than 1,100 children in Eastern Ghouta suffering from acute malnutrition, according to the UNICEF spokeswoman's statement from 24 October. Many cases of moderate malnutrition are rapidly devolving into severe acute malnutrition. At least 1,500 children are at risk. *Reuters 25/10/2017 Reuters 30/10/2017* Those numbers might be understated, as according to local sources, even one in four children suffers from malnutrition. In 2016 about 136,000 people were reported to be in need of nutrition in subdistricts covering Eastern Ghouta. Lack of access to healthcare and necessary medicine compound the situation. *Al Jazeera 23/10/2017*

Education: All schools reportedly remain closed in November because of the conflict escalation. Repeated attacks on educational facilities were reported as of the end of October, with three facilities targeted in three days in Jisreen, Kafr Batna and Misraba. School buildings in Saqba and Hamouriya were targeted in November. *UNICEF 31/10/2017 Theirworld 30/10/2017* Most of the schools in the area have been destroyed or damaged by conflict, forcing children to drop out of school. Some classes have been moved to residential buildings and basements. Severe shortages of teachers and textbooks further deteriorate access to education. *Children of Syria 2/08/2017*

Livelihoods: Clashes between Jaish al-Islam and Al-Rahman Corps are taking place in the outskirts of Misraba and in areas of Ashari and Beit Sawa farms as of November. Thousands of people cannot access their land because of access restrictions, and fuel shortages further hinder agricultural activities. The common sources of income, such as selling agricultural goods and livestock are severely affected due to restricted movement and shortages of fuel or fertilisers. Irrigation systems are often damaged. *SOHR 8/11/2017*

WASH: Water supply networks have been destroyed by airstrikes and chemical attacks, compounding the risk of malnutrition and other diseases. Water is only accessible through shallow wells and is often contaminated. *MEMO 29/10/2017*

Drinking water was available from vendors for a price seven times higher than in other parts of Syria as of August. This water is filtered using locally made equipment, meaning it isn't entirely safe. Boiling water in order to make it safe to drink is often impossible due to fuel shortages. *Children of Syria 2/08/2017*

Inadequate access to safe water and basic hygiene items will likely result in prevalence of diseases. Contamination of water has led to spread of typhoid and other conditions associated with unsanitary water, such as diarrhoea, hepatitis A, and inflammatory bowel disease. The current escalation is likely to aggravate those problems. SAMS 27/09/2017 UNICEF 03/11/2017

Health: At least one-third of health facilities in the area are not fully functional, while others face staff and medicine shortages. Reportedly 107 doctors remained in Eastern Ghouta as of September. Both health personnel and health facilities have been targeted deliberately and can no longer cover the needs of residents. In November, at least three medical facilities have been attacked: a nursery in Hamouriya and a clinic in Saqba were destroyed. A medical office of Harasta was partially damaged. Three other facilities were targeted in September, one completely destroyed. Medical staff have been arbitrarily detained, beaten, and threatened in 2017. AI Monitor 16/06/2017, UMCRO 10/11/2017 UNHCR 10/11/2017 SAMS 27/09/2017

The conflict results in high numbers of casualties, including injuries from ongoing clashes. Increasing malnutrition compounds the risk of secondary illnesses because of the lack of resistance. According to a local doctor, over the past three months at least one person suffering from easily preventable disease dies every week as a result of lack of medicine. More deaths are expected. Syria Direct 26/10/2017 At least 430 people are in need of urgent medical help outside of Eastern Ghouta as of October, but the evacuation efforts are obstructed by the GoS. UNHCR 10/11/2017

The government siege in Eastern Ghouta prevents medical supplies from reaching the area, affecting both the availability and price of medicines. Severe shortages of anesthetics and surgical equipment were recorded as of October. Medicines necessary for the treatment of chronic illnesses and non-communicable diseases are not available, which increases risks of preventable deaths. UMCRO 24/10/2017 There is a shortage in vaccines, especially for tuberculosis and the measles. Cancer patients have no access to chemotherapy, biopsies, or cancer treatment. Syria Direct 17/04/2017 Al Jazeera 24/10/2017

Protection: Civilians face constant exposure to physical harm with the escalation of airstrikes and shelling. Casualties are reported daily and the hospitals no longer have capacity to cover health needs. More than 5,000 people were reported permanently disabled due to conflict as of October. Incendiary rockets reportedly were used during an attack on Harasta town in October. Chemical weapons have been used in Eastern Ghouta in the past, so the risk of exposure to harmful substances and further water contamination is high. Children face additional risks: child labour has been reported widely in parts of Eastern Ghouta due to depletion of livelihoods, and security risks prevent children from attending school. Siege watch July 2017 UMCRO 10/11/2017

Shelter: Ongoing shelling and airstrikes are causing high levels of structural damage, targeting residential areas, hospitals, market places, and schools. IDPs in Saqba and Kafr Batna were reported to live in partially built structures and other ad hoc types of shelters. Siege watch July 2017

Vulnerable groups affected

Children are the most vulnerable group in the area and constitute about half of the population (200,000) according to UNICEF. About 13,000 children are in acute need of medical care as of October. UNICEF 03/11/2017 SAMS 2017 Several infants and young children have died as of October due to malnutrition or other health conditions exacerbated by lack of access to food and health services.

Repeated attacks on educational facilities resulted in tens of child casualties as of the end of October. The exact number of fatalities and casualties is impossible to verify. Theirworld 31/10/2017

Coping mechanisms involving children have been reported. Children often are responsible for getting water from the wells, which exposes them to risk of shelling. MEMO 29/10/2017 Child labour preventing school attendance has been reported as a very common issue in Duma. Protection Cluster 2017

Children in Eastern Ghouta were found to be in an extreme high state of toxic stress caused by prolonged exposure to war, stress and uncertainty. This indicates an urgent need for mental healthcare and affects children's ability to learn. Save the Children 6/10/2017

Lactating women are especially vulnerable to food insecurity and malnutrition.. On average there are 1,200 births per month in Eastern Ghouta. SAMS 2017 UMCRO 24/10/2017

IDPs are particularly exposed to harsh winter conditions due to shelter vulnerabilities. Approximately one-third of the population of Eastern Ghouta are IDPs. SAMS 27/09/2017

Humanitarian and operational constraints

Ongoing airstrikes severely limit the humanitarian access in Eastern Ghouta. The shelling and airstrikes are often intensified in the areas reached by humanitarian aid. SOHR 13/11/2017 MSF had already suspended their activities in 2017 due to insecurity. Siege Watch July 2017 Furthermore, the only entry point to the besieged enclave, the Al-Wafideen checkpoint, was fully closed in October, further limiting flow of food, fuel and medicine. Reuters 30/10/2017

The siege imposed on the area severely restricts humanitarian access and limits freedom of movement of the residents. Checkpoints established by armed groups controlling different areas of the territory of Eastern Ghouta compound the situation. Armed opposition groups restrict humanitarian access by exerting pressure on medical personnel, stealing stocks managed by relief groups, and trying to control the distribution

of aid. Territorial divisions restrict access of residents to health facilities, livelihoods, and food. SOHR 30/10/2017 OHCHR 10/11/2017

In 2017 humanitarian access was more restricted than in 2016 with six interagency convoys able to reach the area in 2017 compared to 10 in 2016. Humanitarian access was further restricted in 2017 with the closure of smuggling routes by the GoS offensive. SOHR 22/10/2017

Aggravating factors

Approaching winter

Winter in Syria can be very harsh and include prolonged periods of snow and temperatures below zero. The winter season typically lasts from December to February. IDPs living in makeshift shelters are likely to be particularly affected. Humanitarian needs are expected to increase. IFRC 2017

Fuel shortages

The residents suffer from chronic shortages of fuel. In Duma LPG has not been available since May. Local humanitarian workers reported that substitutes such as wooden benches and plastic bags have been mostly used up as of October. This is likely to result in a rapid increase in humanitarian needs. Diesel prices have increased by more than 1000% since January. USAID 27/10/2017 Washington Post 31/10/2017

Government advances

With the government steadily advancing in Deir-ez-Zor and other governorates, gaining control over more territory, soon they will likely focus on regaining the strategic territories long-held by the opposition, including Eastern Ghouta. This will likely result in more airstrikes and shelling, possibly continued until government forces take control over the disputed territory. BBC 4/11/2017

Depleted livelihoods

Protracted conflict has resulted in serious depletion of livelihoods, with continued displacement and insecurity exacerbating vulnerability. On average, a family in Eastern Ghouta needs USD 200 per month to provide only for basic needs, whereas many heads of household earn less than USD 100 per month. SAMS 27/09/2017 UNICEF 03/11/2017 High levels of unemployment and poverty lead to food insecurity with many families unable to afford food, even when available.

Contextual information

Eastern Ghouta is a collection of rural, working-class suburbs northeast of government-held Damascus. The area has been besieged by the GoS since 2013, following a year of partial besiegement. A ceasefire was declared in Eastern Ghouta on 22 July 2017. Further, the area is a part of de-escalation zone agreement between Russia, Turkey and Iran, but despite the establishment of the de-escalation zone in May, breaches, including airstrikes, continue to be reported.

Since 2012, over 18,000 people have been killed and 50,000 injured in the conflict in Eastern Ghouta. According to Syrian Network for Human Rights at least 397 civilians have died in Eastern Ghouta due to starvation and lack of access to healthcare since the beginning of the siege. UMCRO 24/10/2017 SNHR 2017

Government of Syria aims to regain territory taken by various armed groups since the conflict broke out in 2011, and to strengthen President Assad's position. In late 2017 the government has been advancing in Hama, Deir-ez-Zor, Dara, and Homs governorates. The GoS has besieged opposition-controlled Eastern Ghouta since 2013.

Jaish al-Islam is a coalition of Islamist and Salafist groups. They constitute one of the largest opposition factions in the area and control Douma city. They aim to create an Islamic state under Sharia law.

Faylaq al-Rahman (Al-Rahman Corps) is an Islamist group affiliated with the Free Syrian Army. They control much of central and western parts of Eastern Ghouta, including Saqba and Ein Tarma cities, which are currently prime targets for the GoS.

Hayat Tahrir al-Sham (HTS) is an Islamist coalition including Jabhat Fatah al Sham, formerly known as Jabhat al-Nusra. It formally split from al-Qaeda in 2016. In Eastern Ghouta they have a very limited control over smaller districts such as Arbin, al-Ashari and Bait Naim.

International and neighbouring countries' relationship to the conflict

Eastern Ghouta is a part of a de-escalation agreement guaranteed by Russia, Turkey and Iran. A six-month renewable truce was agreed upon in May 2017. In de-escalation zones, opposition and government forces were expected to halt hostilities, including airstrikes, and allow humanitarian aid into opposition-held areas. HTS was excluded from the truce. Al Jazeera 15/09/2017

Past conflict and displacement

Since 2012, residents of Eastern Ghouta have been facing frequent aerial attacks and shelling. These attacks continue in 2017, despite the de-escalation agreement in the area.

The GoS offensives have intensified and the fighting between armed groups has worsened in recent months. *Siege Watch July 2017*

One-third of the population of Eastern Ghouta (about 140,000 people) is estimated to be displaced. High levels of internal displacement were reported in 2017 from Jobar and other residential centres in Ein Tarma in Eastern Ghouta. Most of IDPs were received in Kafr Batna and Saqba, with smaller groups going to Madeira, Beita Sawa and other communities. More than 10,000 people were displaced in March from Qaboun, Barzeh and West Harasta to At Tall, while 17,000 others have been displaced within Eastern Ghouta. *SAMS 2017 Shelter needs were reported, with some IDPs sleeping in makeshift shelters. Siege Watch July 2017* Hosh al-Dawahirah neighbourhood was completely depopulated as of July. No information about Al-Rayhan, Al-Shaifuniya, Beit Naim, and Al-Salhiyeh communities' population is available.

Key characteristics

- **Demographic profile, Eastern Ghouta:** total population estimated as of July: 425,910, children estimated: 200,000
- **WASH:** 492,000 people are in need of WASH in subdistricts covering Eastern Ghouta (2016)
- **Health:** 418,000 people are in need of health support in subdistricts covering Eastern Ghouta (2016). Country level statistics indicate: infant mortality rate: total: 14.8 deaths/1,000 live births, male: 17 deaths/1,000 live births, female: 12.5 deaths/1,000 live births (2017 est.); maternal mortality rate: 68/100,000 (2015 est.)
- **Food insecurity:** Over 330,000 people are in need of food assistance in subdistricts covering Eastern Ghouta (2016)
- **Nutrition:** 136,000 people are in need of nutrition in subdistricts covering Eastern Ghouta (2016)
- **NFI:** About 275,000 people are in need of nutrition in subdistricts covering Eastern Ghouta (2016)
- **Literacy** (country levels): total population: 86.4% male: 91.7%, female: 81% (2015 est.)

Sources: Humanitarian Needs Overview 2017, CIA World Factbook, Siege Watch July 2017

Response capacity

Local and national response capacity

The government, as a party to the ongoing conflict, does not respond to needs of the affected population. There are several local NGOs working in the area, including Syrian Arab Red Crescent. The GoS closed the remaining Al-Wafideen checkpoint in October and rarely allows humanitarian aid to access the residents. Denial of needs and manipulation of aid deliveries are common governmental methods. *OHCHR 10/11/2017 SAMS 27/09/2017*

International response capacity

Humanitarian assistance convoys of the United Nations – Syrian Arab Red Crescent joint mission, reached Kafr Batna and Saqba towns on 30 October, delivering health supplies, hygiene kits, nutrition supplements and high energy biscuits. Food rations were delivered for 40,000 people and specialised nutrition products for nearly 13,000 children. Another convoy reportedly reached Douma on 12 November, no clear information on the number of beneficiaries was reported. Previous transports, in September, reached about 25,000 people in East Harasta, Misraba, and Modira.

Since the beginning of 2017, interagency transports were only able to access Eastern Ghouta six times, covering needs of 110,000 out of 400,000 residents.

Population coping mechanisms

Coping mechanisms reported in Rural Damascus governorate to remedy the food shortages involve: prioritising children by reducing food quantities for adults, reducing portions and numbers of meals, and looting relief organisations, which was reported twice in October. *Food Cluster 19/10/2017 SOHR 22/10/2017*

Residents in Eastern Ghouta are using wood and burning plastic bags as a substitute of fuel. *UNICEF 1/08/2017*

Information gaps and needs

- No information about Al-Rayhan, Al-Shaifuniya, Beit Naim, and Al-Salhiyeh communities' population is available.
- No reliable information about the numbers of IDPs in the area and their needs.
- No clear information about humanitarian needs due to access restrictions for assessment teams.
- Lack of gender/age aggregated data and data on sexual and gender based violence.

Lessons learned

- Preparedness for prolonged winter allows timely procurement (IFRC 08/12/2015).
- Greenhouses during winter months can enhance food production and employment levels (FS Cluster 24/10/2016). This could be particularly beneficial in Eastern Ghouta, where many rely on agriculture for livelihood.
- Negotiating humanitarian access is extremely challenging in Syria, and blocking of humanitarian aid has been used as a tactic of war by various parties to the conflict. International organisations have frequently operated through Syrian Arab Red Crescent (SARC) as a result of the access constraints faced by international organisations (OCHA 29/12/2015).
- Areas remain besieged for a long time and international organisations are allowed none or very irregular access. Besieged populations usually face severe shortages of food, safe drinking water, and medicines (HRW 08/02/2016; UN News 27/01/2016).

SYRIA: EASTERN GHOUTA

Siege classification and aid deliveries as of November 2017

