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COVID-19 The Economic, Social and Educational Impact in Northern Syria

"The Economic, Social and Educational Impact in Northern Syria COVID-19" report monitors the impact of the spread of COVID-19 in areas outside the control of the Syrian regime within the Syrian Arab Republic, in light of the war which has been ongoing for more than ten years and under the deteriorating humanitarian conditions and the continuous increase in COVID-19 cases.



Issued by: Information Management unit (IMU)



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COVID-19

The Economic, Social and Educational Impact in Northern Syria

T h e m a t i c R e p o r t

Aril 2021

Issued by the Information Management Unit of ACU

Funded by MEAE

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**MINISTÈRE
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ÉTRANGÈRES**

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COVID-19

The Economic, Social and Educational Impact in Northern Syria

Thematic Report

Aril 2021

Executive Summary

“The Economic, Social and Educational Impact in Northern Syria COVID19-” report monitors the impact of the spread of COVID19- in areas outside the control of the Syrian regime within the Syrian Arab Republic, in light of the war which has been ongoing for more than ten years and under the deteriorating humanitarian conditions and the continuous increase in COVID19- cases.

SECTION 01: METHODOLOGY

The assessment was conducted in 64 sub-districts affiliated with 21 districts within the governorates of Idleb, Aleppo, Ar-Raqqa, Al-Hasakeh and Deir-ez-Zor, and all the cities and towns covered by the assessment are outside the control of the regime forces. The study included interviews with 1,479 persons, of whom, females constituted 22% (325 females); All of those interviewed were workers or providers for their families. The Information Management Unit (IMU) developed a questionnaire for this study based on a set of studies issued by the United Nations Development Program (UNDP) during previous health crises such as the Ebola virus. The enumerators were trained on-line via Skype for Business program to fill out questionnaires and collect information over two consecutive days. 101 enumerators participated in data collection distributed among cities, towns and displacement camps.

SECTION 02: General Information

Based on the findings of the study, 84% (1,235 persons) of those surveyed are the breadwinners for their families. 4% (66 persons) suffer from disabilities, of whom, 22 persons provide for their families despite their disabilities. 18% (261 persons) of those surveyed were infected with the COVID-19 at an earlier point. The results further showed that 91% (251 persons) of the persons who provide for individuals aged between 19-59 years do so because these individuals do not have any source of income. and 4% (11 persons) are breadwinners for individuals aged between 19-59 years because these individuals suffer from incurable diseases that prevent them from working. 4% (10 persons) are breadwinners for individuals aged between 19-59 years because these individuals are handicapped.

SECTION 03: The Impact of COVID19- on Income Sources

According to the study, it was found that 22% (324 persons) of those surveyed do not have any sources of income; Looking at the coping mechanisms followed by persons who do not have any source of income, it was found that 47% (271 persons) depend on the aid provided by humanitarian organizations. 21% (121 persons) depend on aid provided by friends and relatives inside Syria. 19% (111 persons) depend on remittances from a family member or relative outside Syria. 53% (1,034) of the persons surveyed reported that aid provided by humanitarian organizations decreased after the spread of COVID-19. 19% (370 persons) reported that family members and relatives outside Syria were no longer able to help after the spread of the virus. Similarly, 17% (336 persons) reported

that friends and relatives who are inside Syria became unable to help after the spread of the virus. When asked about the number of working family members, 84% (973 persons) stated that one member of the family works, and all the family members depend on this person's work. 23% (347 persons) of the persons who previously owned sources of income, stated that the family lost its source of income after the spread of the virus. 39% (583 persons) reported that the average income had decreased after the spread of the virus, and to cope with the loss or decrease of the average income 45% (697 Households) of the families, whose sources of income have been affected by the spread of COVID-19, resorted to reducing expenses by dispensing with some basic needs; 25% (383 households) resorted to borrowing from friends and relatives; whereas 10% (155 households) reduced the number of daily meals.

SECTION 04: Social Impact of COVID-19

17% (250 persons) of the persons surveyed stated that the rate of domestic violence increased after the spread of the virus; According to the results, wives (older than 18 years of age) are among the most targeted groups by domestic violence; Whereas male children (under 10 years old) ranked second; Female children (under 10 years old) ranked third, and single adolescent girls (aged 10-18 years old) ranked fourth. 95% (1,349 persons) reported that there are no organizations working on prosecuting the perpetrators of domestic violence. 21% (315 persons) of the persons surveyed reported that domestic violence survivors face difficulty in obtaining assistance due to restrictions imposed by the spread of COVID-19. 20% (299) of the persons surveyed said that divorce rates increased after the virus spread. 65% (965) of the persons surveyed reported an increase in social isolation of elderly persons after the virus spread. 52% (771 persons) of the persons surveyed reported a high rate of social isolation of persons with disabilities. 70% (1,035 persons) of the persons surveyed reported increased isolation for those with chronic diseases. 58% (865) of the persons surveyed reported that no precautionary measures were taken to limit the spread of COVID-19 in areas of displacement. 30% (442 persons) of the persons surveyed reported that the decline in family income as a result of the spread of the virus resulted in the denial of women access to adequate health services and their basic women's needs; 28% (412 persons) reported that the spread of the virus affected women's access to their needs during pregnancy, childbirth and postpartum period, and 83% (365 persons) confirmed that humanitarian organizations did not double their response to ensure that women are having their women-specific needs met during their pregnancy, childbirth, and postpartum period. 81% (1,197) of the persons surveyed stated that workers in the private sector do not get paid sick leave if they are infected with the virus; in that they are not paid during quarantine.

SECTION 05: The Impact of COVID-19 on Education

On top of the negative effects of the suspension of school attendance comes the decrease of children's educational level. School's high dropout rates of children ranked second. In the third place comes the fact that the lower and higher secondary school students are denied access to a sound education and are unable to pass the exams. Moreover, Interest in education from external agencies and donors has decreased dramatically, the thing which has led to a decline in the support provided. 58% (825 persons) of the persons surveyed stated that schools and teaching staff did not take any measures to help students continue their education from home (distance learning) during school suspensions to limit the spread of COVID-19, and 38% (506 persons) think that distance learning requires the availability of some supplies (internet - electricity - smartphones ...) which are not available. At the forefront of distance learning needs comes the provision of free internet packages for students, where 19% (1,206 persons) of the persons surveyed stated that students need to be provided with free internet packages due to the inability of their parents to afford the costs of the internet; 17% (1,073 persons) said that there is a need to provide additional equipment for teachers such as visual aids, recording devices, or cameras so that the distance learning lessons become clearer and more interactive. 14% (833 persons) reported that there is a need to train teachers on the application of distance learning and its various types.

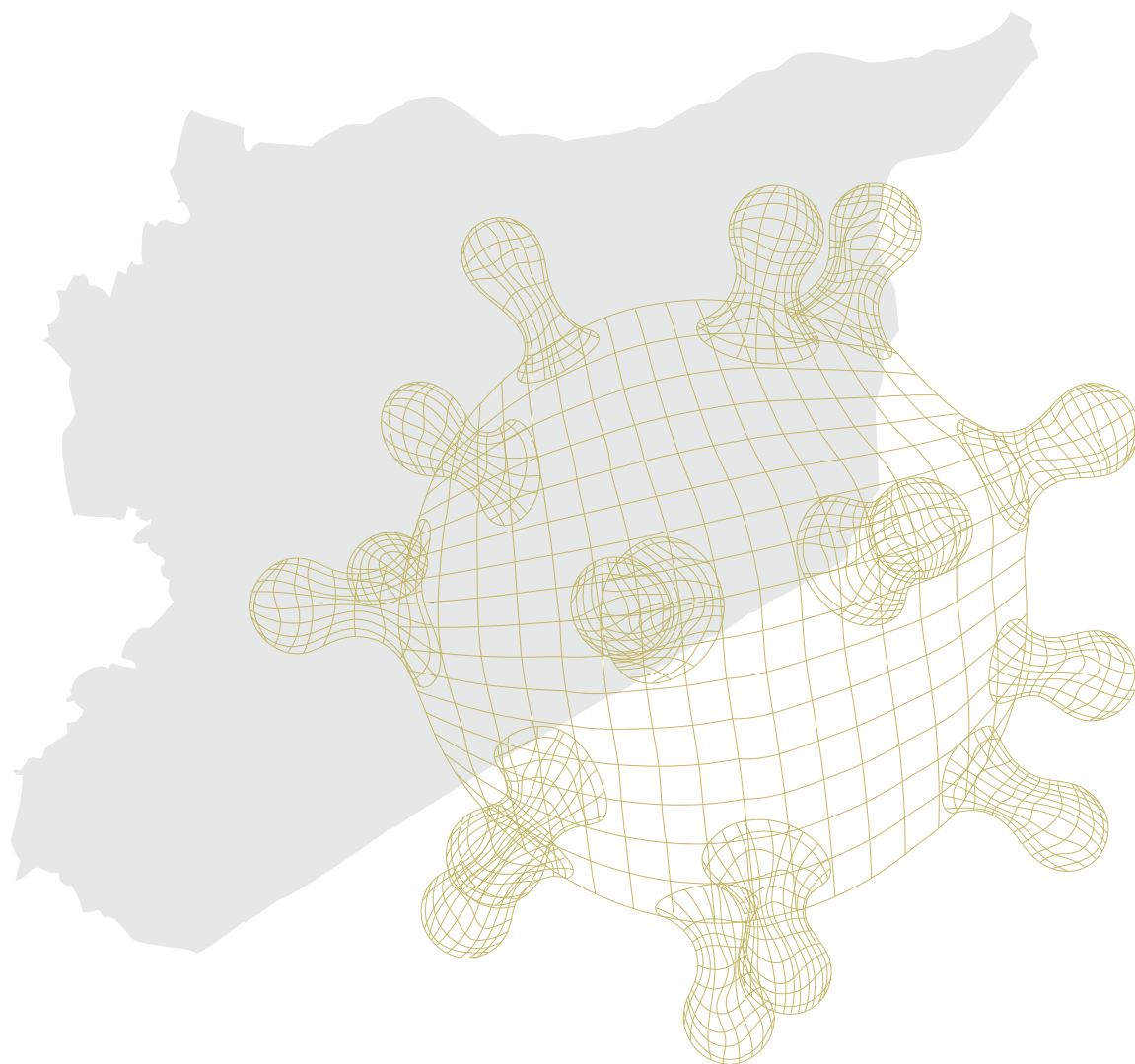
SECTION 06: Recommendations

This section of the report provides a set of recommendations that contribute to alleviating domestic violence, which has increased during the spread of COVID-19, protecting survivors of violence, providing clear mechanisms and instructions for those suspected of being infected with the virus, providing assistance to those infected with the virus, in addition to workers in the private sector and the unemployed as compensation for the disruption of their income sources during the quarantine period, ensuring that women's basic needs are met in light of the obstacles imposed by the spread of the virus, and providing distance learning requirements for students, given that the current circumstances imposed this methodology of education on all countries of the world.



S e c t i o n 0 1

M e t h o d o l o g y



01 Assessment Sample

The assessment was conducted in 64 sub-districts affiliated with 21 districts within the governorates of Idlib, Aleppo, Ar-Raqqa, Al-Hasakeh and Deir Ez-Zor, and all cities and towns covered by the assessment are outside the control of the regime forces. The study included interviews with 1,479 individuals. Females constituted %22 (325 females) of the total number of surveyed persons, while males constituted 1,154 (%78 males) of the total number of surveyed persons, and all of those interviewed were workers or breadwinners for their families.

Table (1) Assessment Sample

#	Governorates	No. of districts	No. of sub districts	No. of villages	No. of Camps	No. of interviews
1	Idlib	4	17	51	155	537
2	Al-Hasakeh	4	15	51		216
3	Ar-Raqqa	3	6	49		156
4	Aleppo	7	22	89	32	434
5	Deir-ez-Zor	3	6	26		136
Total		21	66	266	187	1,479

Data of the report are displayed according to 8 areas, 5 areas in NES and 3 areas in NWS. This division has been made based on the controlling forces, geographical location, and accessibility. These geographical areas are:

- Al-Hasakeh governorate:** This governorate is under the control of SDF and it includes all cities and towns of Al-Hasakeh governorate with the exception of Ras Al Ain which is under the control of the opposition. It is noted that Al-Hasakeh city is also not included. The number of sub-districts covered in this geographical area is 14 sub-districts which are: Quamishli, Malikeyyeh, Ya'robiyah, Hole, Areesseh, Tall Hmis, Tal Tamer, Darbasiyah, Jawadiyah, Markada, Shadadah, Amuda, Qahtaniyyeh, and Be'r Al-Hulo Al-Wardeyyeh.
- Deir ez-Zor governorate:** This governorate is under the control of SDF and includes all cities and towns of Deir-ez-Zor governorate eastern the Euphrates; and the regime forces is taking control over the cities and towns located western of the river and this is why they are not covered in the report. The number of sub-districts included in this geographical area is 6 sub-districts which are Kisreh, Basira and Hajin, Thiban, Susat and Sur.
- Ar-Raqqah governorate:** This governorate is under the control of SDF and it includes all the northern cities and towns of Ar-Raqqah governorate, with the exception of Tell Abiad, Suluk, parts of Ein Issa which is under the control of the opposition. The regime forces is taking control of the southern sub-districts of Ar-Raqqah governorate which is why it is not covered in the report. The number of sub-districts covered in this geographical area is 4 sub-districts which are Ar-Raqqah, Al-Thawrah, Al Karama, and Mansura.
- Eastern Aleppo countryside:** This geographical area is under the control of the so-called SDF, and the number of sub-districts covered in this area is 5 sub-districts, namely the center of Menbij, the center of Ain al Arab, Abu Qalqal, Lower Shyookh and Sarin.
- Ras Al Ain and Tell Abiad:** This geographical area is under the control of the opposition forces; the number of sub-districts in this area is 4 sub-districts which are Ras Al Ain, the center of Tell Abiad, Suluk, and parts of Ein Issa.
- Idlib governorate:** This geographical area is under the control of the opposition forces; and it includes the cities and towns outside the control of the Syrian regime in Idlib governorate in addition to the western countryside of Aleppo. The number of the sub-districts in this area is 20: Tefnaz, Ehsem, Armanaz, Janudiyeh, Badama, Harim center, Maaret Tamsrin, Bennsh, Sarmin, Al Dana, Darkosh, Salqin, Jisr-Ash-Shugur center, Qourqeena, Kafr Takharim, Mhambal, Idlib center, Jisr-Ash-Shugur, Ariha, in addition to the sub-districts of Atareb, and Daret Azza in western Aleppo countryside.

7. **Northern Aleppo countryside:** This geographical area is controlled by the opposition forces; and the number of sub-districts in this area is 9 sub-districts which are Aghtrin, Ar-Ra'ee, Jarablus, Ghandorah, Suran, Al Bab, A>zaz, Tadaf, and Mare>.
8. **Afrin:** This geographical area is controlled by the opposition forces and the number of sub-districts in this area is 7 sub-districts which are Bulbul, Jandairis, Raju, Sharan, Sheikh Hadid, Afrin center, and Ma>btali.

02 Assessment Tools

IMU developed a questionnaire for this study based on a set of studies issued by UNDP during previous health crises such as the Ebola virus. Additionally, a set of questions for the education department were developed through the precautionary measures applied in schools to limit the spread of COVID-19. The questions have been drawn from the checklist¹ to support reopening of schools and prepare for the emergence of new mutations of COVID-19; Or similar public health crises issued by the World Health Organization (WHO). The checklist for safe return to schools has been made use of in light of the spread of COVID-19 and was shared by the Southern Turkey Education cluster.

03 Enumerators Training and Data Collection

IMU has a network of 101 enumerators trained to administer the questionnaires for the data collection. The enumerators training lasted for 2 consecutive days and was conducted online via Skype for Business. The enumerators received a total of 10 hours of training. The training sessions were recorded and sent to the enumerators to be a reference in case they needed to recall any of the information presented during the training. The training included a two-day test period for piloting. The enumerators' feedback was collected after the piloting phase, and some points were modified in the questionnaire based on that feedback. One or more enumerators were assigned to collect data according to the size of the population of each assessed sub-district. The coordinators based in Turkey Office, provided organizational oversight and daily support to the enumerators during the data collection process, where the enumerators referred to them in case they encountered any problem. Each enumerator received a work plan from the network coordinators stipulating the coverage of their data collection.

04 Data Management, Analysis and Report Preparation

The enumerators filled the questionnaires electronically using ONA program. Coordinators, who were responsible for research oversight encoded the data into an Excel database. Data analysis team proceeded with data cleaning and validation to find and correct any odd or missing values or complete them in conjunction with the data collection. After data cleaning, IMU data analysis team proceeded with data visualization, generating tables, and graphs. Tools such as Dax, Query Editor, Arc GIS, Adobe Illustrator, Adobe InDesign and Adobe Photoshop were used to generate a visual interpretation of the collected data. The first draft of the report was written in Arabic and simultaneously translated into English. Both versions of the report (Arabic - English) have been subjected to quality assurance standards in the preparation and content internally and externally.

1. <https://www.who.int/publications/i/item/9789240017467>

05 Reporting Timetable

Preparation for the «COVID-19 The Economic, Social and Educational Impact in Northern Syria» began in December 2020; Work has begun on developing the questionnaires and adding all the suggested modifications by the economist. Data and analysis officials programmed the questionnaires electronically using ONA software. IMU enumerators were trained to fill out questionnaires for information collection. The training lasted for 2 consecutive days and was conducted online via Skype for Business. Enumerators received a total of 10 hours of training which ended on 6 January 2021. After that, the period for piloting began and lasted 2 days during which the enumerators sent experimental data on all questionnaires and perception surveys. Data and analysis officials tested the data and verified incoming values. Data collection started on 13 January 2020 and ended in February 2021. The data and analysis officials started by cleaning the data and reviewing the missing and odd values, after which the data analysis started. The report was written in Arabic, and simultaneously translated into English. The last step was the designing of the report, as the final version was released in April 2021.

06 Difficulties and Challenges

During data collection, a number of challenges have been experienced. Some of these difficulties are related to the controlling forces and military operations, while others are related to natural factors such as weather conditions and distances.

■ Prevalence of COVID-19

The spread of the virus imposed restrictions on the movement of the enumerators and on interviewing key informants KIs; The Assistance Coordination Unit provided the enumerators with masks, gloves and sterilizers to be used during the data collection period.

■ Reaching out to Persons who have Contracted COVID-19

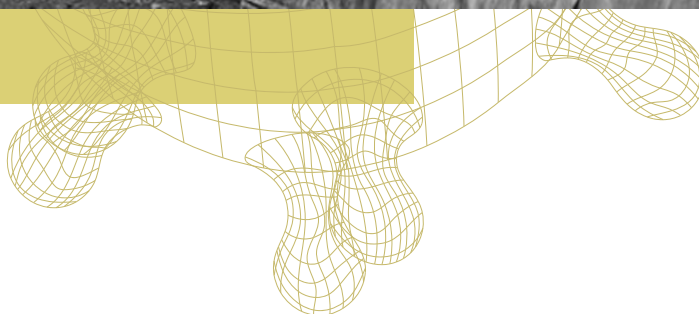
It was difficult for IMU enumerators to reach and conduct interviews with persons who have contracted the virus. Enumerators of Early Warning, Alert and Response Network (EWARN) have contributed to facilitating interviews with persons who have contracted and recovered from the virus, considering that EWARN enumerators conduct COVID-19 tests for those infected with the virus.

■ Bad Weather Conditions

The period of data collection coincided with severe rainstorms in northwestern Syria; This made it difficult for the enumerators to travel and sometimes suspended work for a day or two due to the difficulty of movement.

Section 02

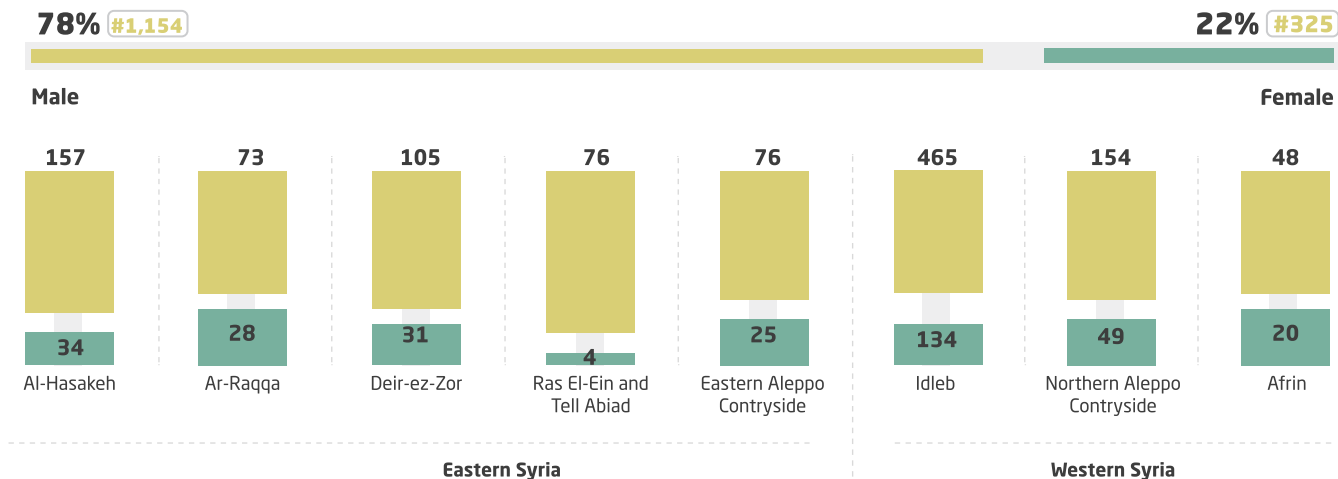
General Information



01 Surveyed Persons

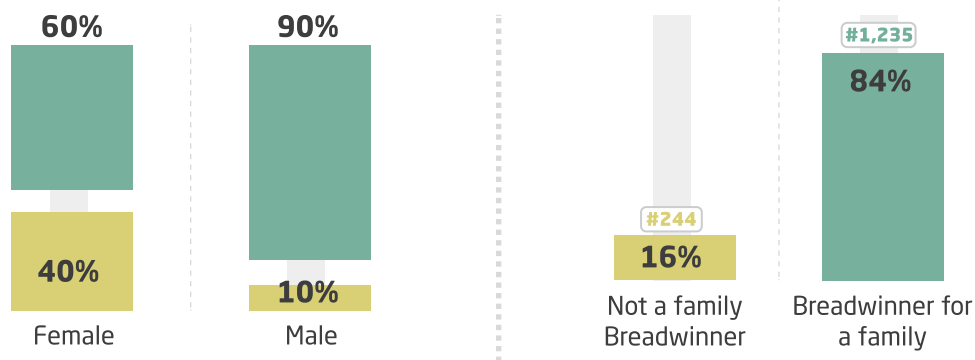
The number of persons interviewed was 1,479; Females constituted 325 (%22 females) of the total number of the persons surveyed in the study, while males constituted 1,154 (%78 males); and all of those interviewed were workers or breadwinners for their families.

Figure 1: Number and percentage of persons surveyed by gender



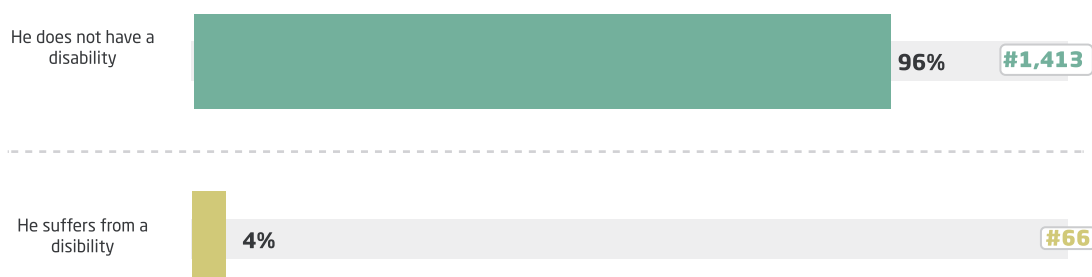
The study revealed that 1,235 (%84 persons) of those surveyed are the breadwinners for their families, and the percentage of females who support their families reached %60 of the females interviewed; While the percentage of male breadwinners for their families was %90 of the males interviewed.

Figure 2: Number and percentage of persons surveyed according to provision for their families



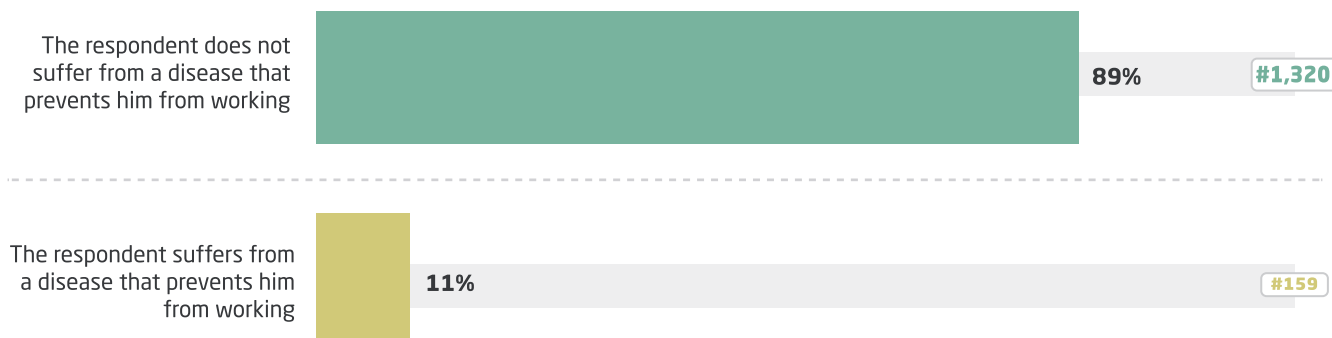
Based on the study, it was found that 66 (%4 persons) of those surveyed suffer from a disability, of whom, 22 persons provide for their families despite their disability.

Figure 3: Number and percentage of persons surveyed according to (suffering from a disability - being healthy)



It was also found that 159 (11% of the those surveyed suffer from chronic diseases that prevent them from working, of whom, 146 are the breadwinners for their families despite their illness.

Figure 4: Number and percentage of persons surveyed according to (suffering from a disability - being healthy)

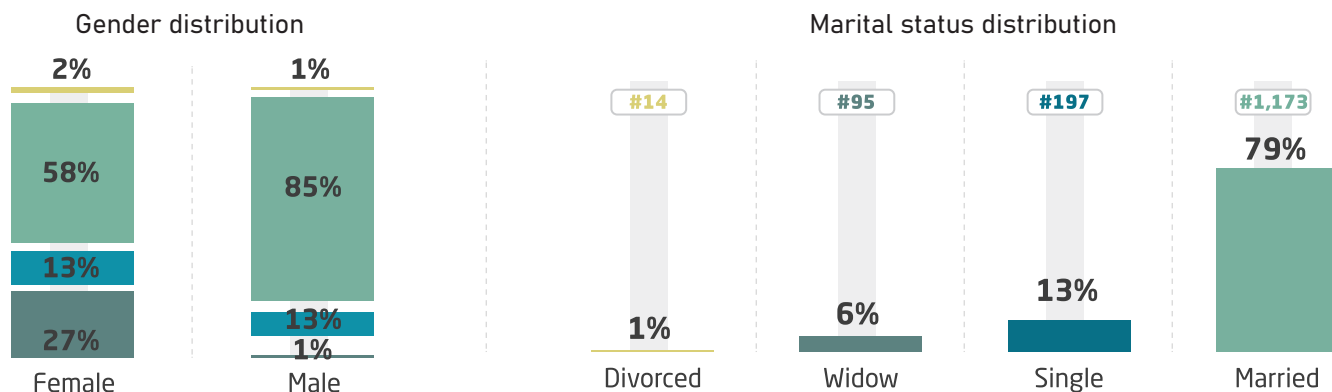


02 Marital Status of the Surveyed Persons

The study revealed that 79% (1,173 persons) of those surveyed are married; Married males made up 83% of the total number of the males interviewed; Whereas single females made up 58% of all interviewed females. 13% (197 persons) of those surveyed are single; Single persons made up 13% of all the persons surveyed, of both genders. 6% (95 persons) of those surveyed lost their spouses (widowed); Widowed men made up only 1% of all the males. While widowed females constituted 27% of the total number of females surveyed.

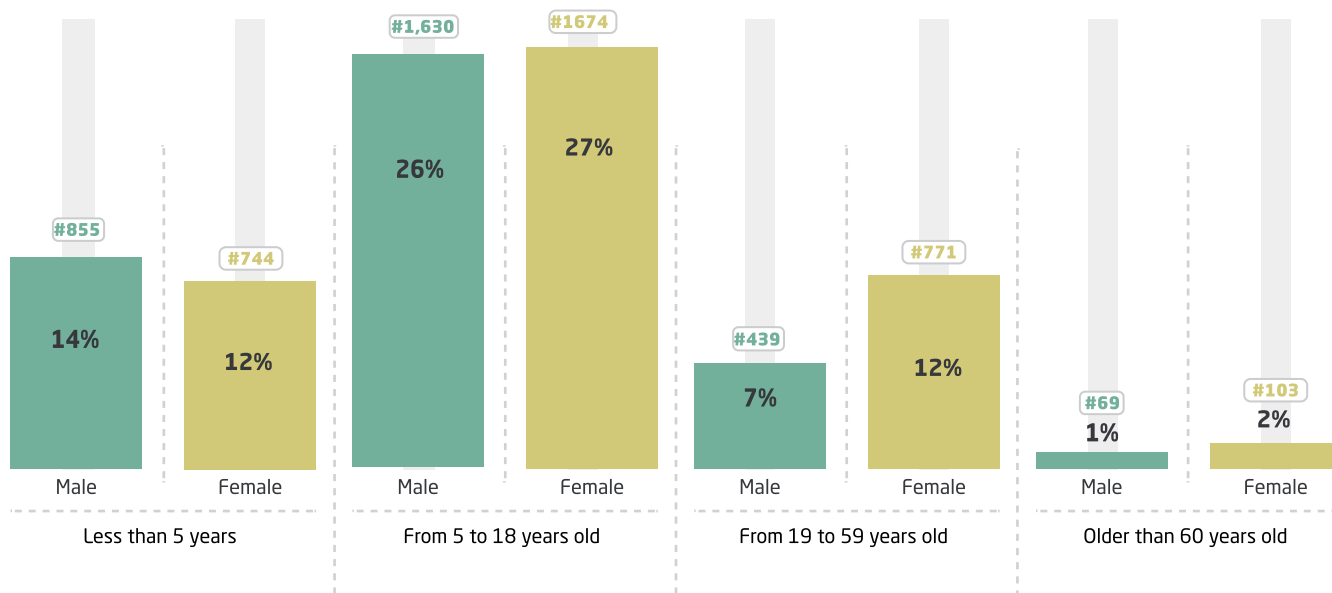
Only 1% (14 persons) of those surveyed were separated from their spouses (divorced); Divorced men made up only 1% of all male interviewees, while divorced females constituted 2% of the total female interviewees.

Figure 5: Number and percentage of persons surveyed according to their marital status



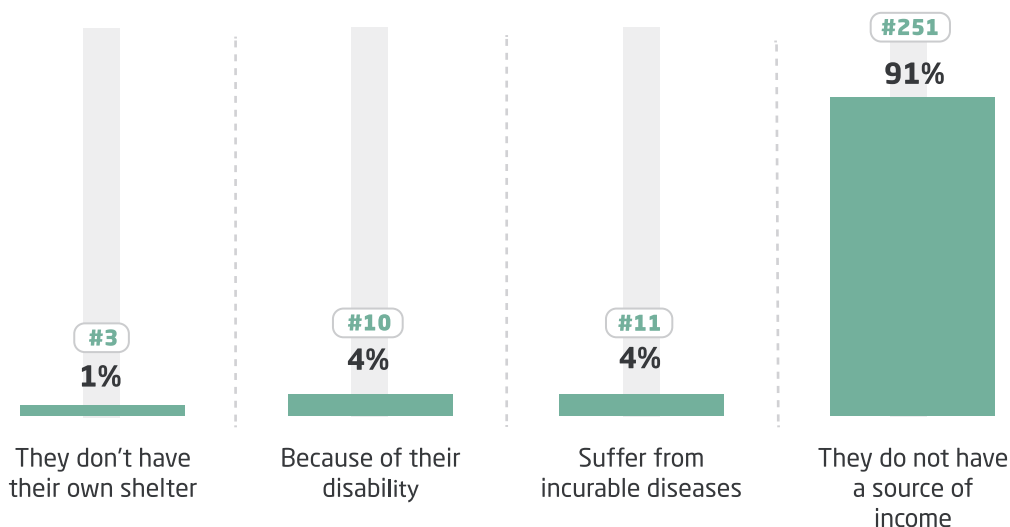
The number of persons interviewed was 1,479; These persons support 6,285 individuals, meaning that each person supports approximately 4.2 individuals. The largest part of the individuals who are supported are children, and they account for 97% of the dependent individuals. The percentage of adults (between 19-59 years) is 19% of the dependents. The percentage of the elderly (over 60 years of age) is 3% of the dependents. It is noteworthy that the percentage of dependent females within the age groups of adults and the elderly is higher than that of the males.

Figure 6: Number / percentage of dependent persons by age group



The study revealed that 19% (275 persons) of those surveyed provide for individuals aged 19-59 years. This is despite the fact that this age group makes up the productive group of the society; However, 91% (251 persons) of the persons support individuals aged 19-59 years because these individuals do not have any source of income; 4% (11 persons) are persons who support individuals between the ages of 19-59 years because these individuals suffer from incurable diseases which prevent them from working. 4% (10 persons) support individuals between the ages of 19 and 59 years because these individuals are handicapped, and 3 persons reported that they gave shelter to homeless individuals and supported them.

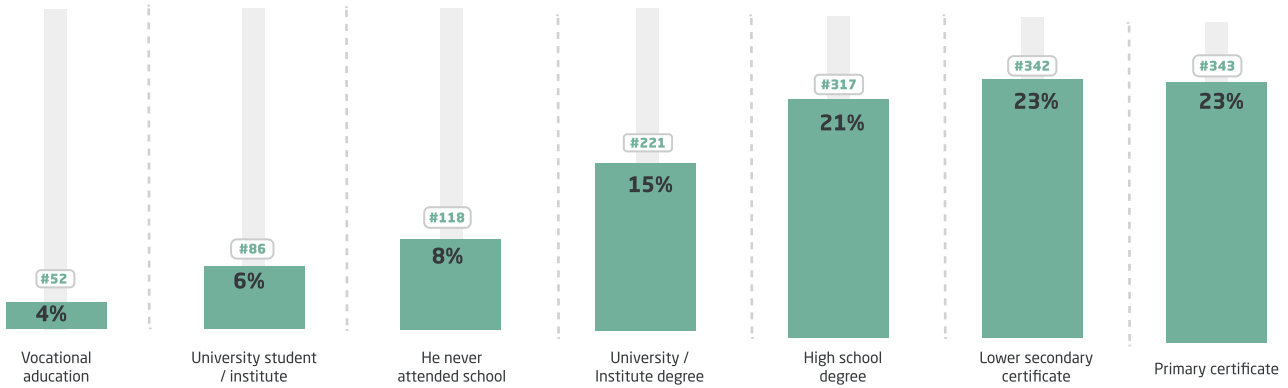
Figure 7: Number / percentage of persons who support persons from the productive group, according to the reason for dependency



03 Educational Attainment

The study revealed that 8% (118 persons) of the persons interviewed had never attended school. 23% (343 persons) have a primary education certificate or a certificate of a lower level; 23% (342 persons) have a lower secondary certificate; 21% (317 persons) have a higher secondary certificate; 6% (86 persons) are higher education students (university or institute students who have not completed their education); 15% (221 persons) have a higher educational degree (university or institute); 4% (52 persons) have completed their vocational education.

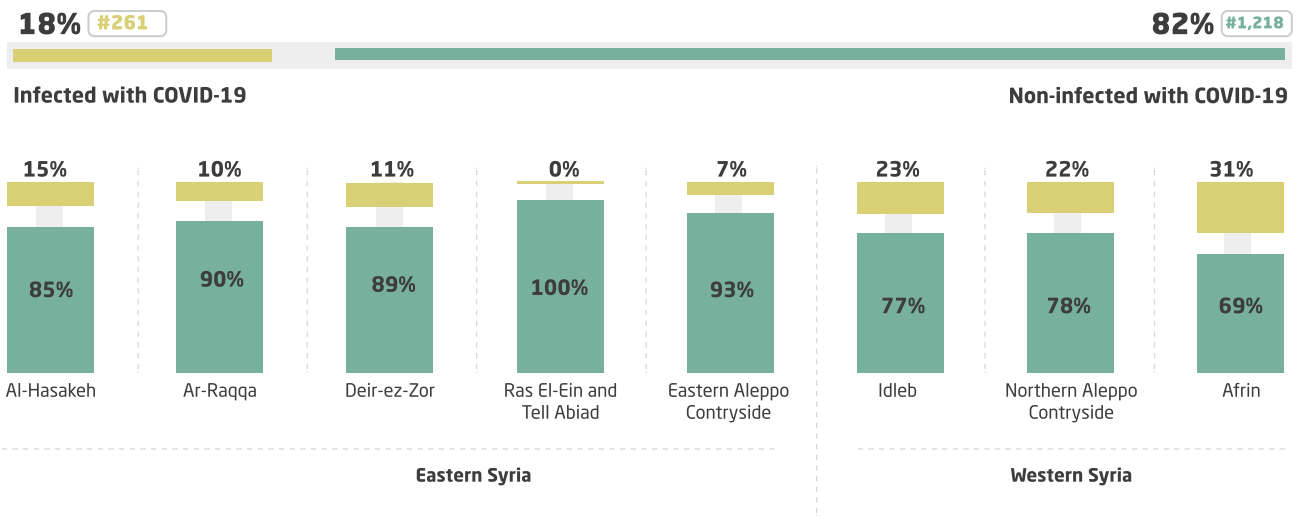
Figure 8: Number / percentage of persons surveyed by educational degree



04 Contracting COVID-19

According to the study, it is found that 18% (261 persons) of the persons interviewed had been infected with the COVID-19 at an earlier point; While 82% (1,218 persons) had never been infected with the virus.

Figure 9: Number / percentage of persons surveyed according to infection with the COVID19- virus



In northwestern Syria; On 9 April 2021, EWAR of ACU released COVID-19 surveillance report in northwestern Syria. According to the report, the total number of positive cases reached 21,476; Of these, 18 cases are new (confirmed in the last 24 hours); The number of recoveries reached 19,596, and the number of deaths as a result of infection with the virus reached 638 deaths. EWAR conducted 112,853 tests for COVID-19.

It is worth mentioning that the vaccination campaigns against COVID-19 haven't started in northern Syria until the date of preparing this report.

Section 03

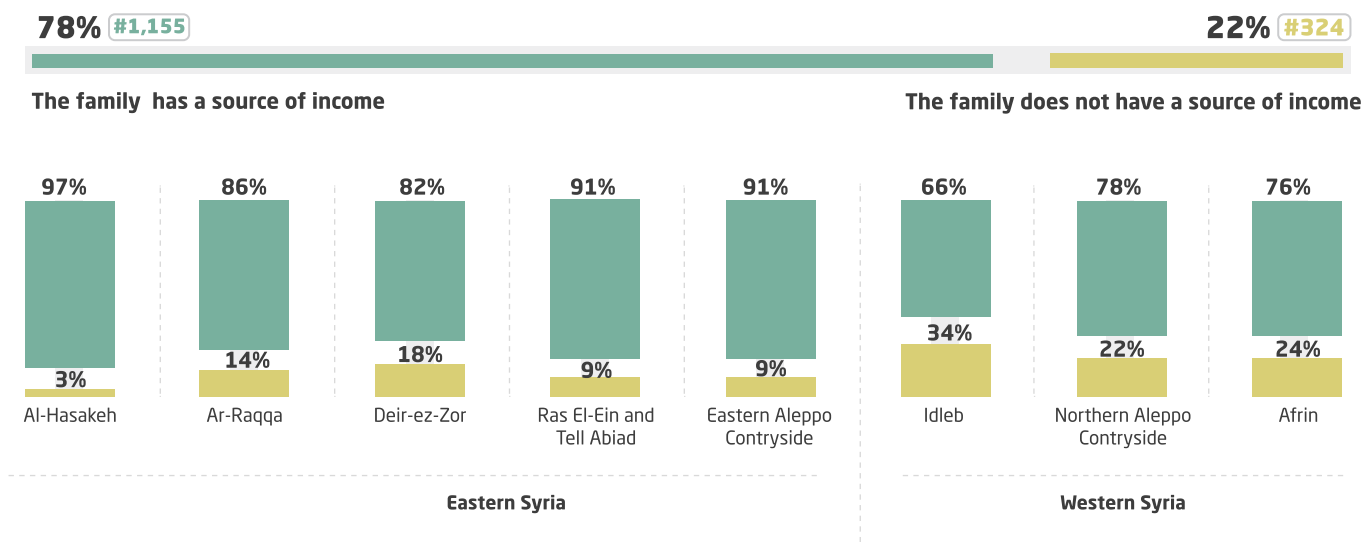
The Impact of COVID-19 on Income Sources



01 Income Sources

Based on the study, it is found that 22% (324 persons) of the persons surveyed do not have any sources of income. The highest percentage of individuals without any source of income was found in Idleb governorate, and they accounted for 34% of the total number of surveyed persons.

Figure 10: Number / percentage of persons surveyed by source of income

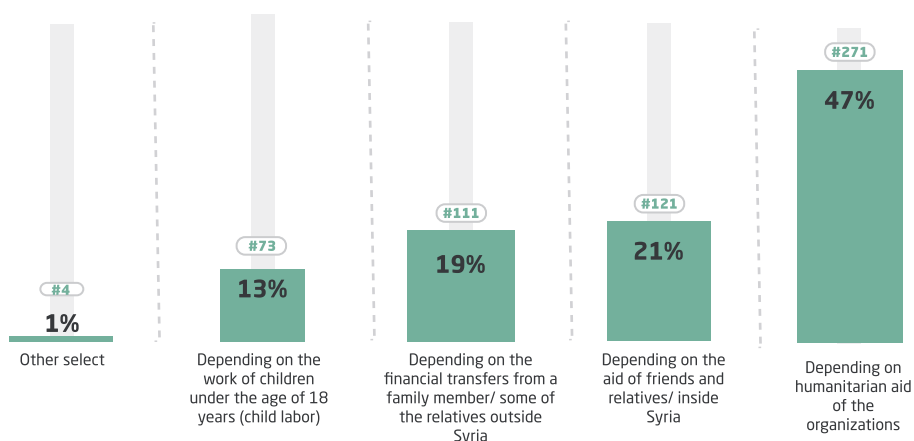


According to “The Economic Reality in Northern Syria”² report issued by ACU; “The results of the study showed that the percentage of male workers between the ages of 20–45 years is 59% in northern Syria, while 51% of this age group of males could not obtain any job opportunity. The percentage of female workers between the ages of 20–45 years is 32% in northern Syria; while 68% of this age group of females were unable to obtain any job opportunity”.

02 Coping Mechanisms in the Absence of any Source of Income

In view of the coping mechanisms followed by the persons without any source of income who made up 22% (324 persons) of the persons surveyed; 47% (271 persons) were found to be dependent on aid provided by humanitarian organizations. 21% (121 persons) depend on aid provided by friends and relatives inside Syria; 19% (111 persons) rely on remittances from a family member or relative outside Syria; 13% (73 persons) resorted to having the children under the age of 18 years (child labor) work to contribute to providing for the families; 4 persons started spending their savings or selling assets and household furniture to cover family expenses. It is reported that the largest part of families that do not have any source of income rely on more than one coping mechanism; This is due to the lack of a stable coping mechanism or the provision of all family requirements as the humanitarian aid provided by the organizations is not stable and does not meet all the needs; Also, friends and relatives inside and outside Syria cannot always help.

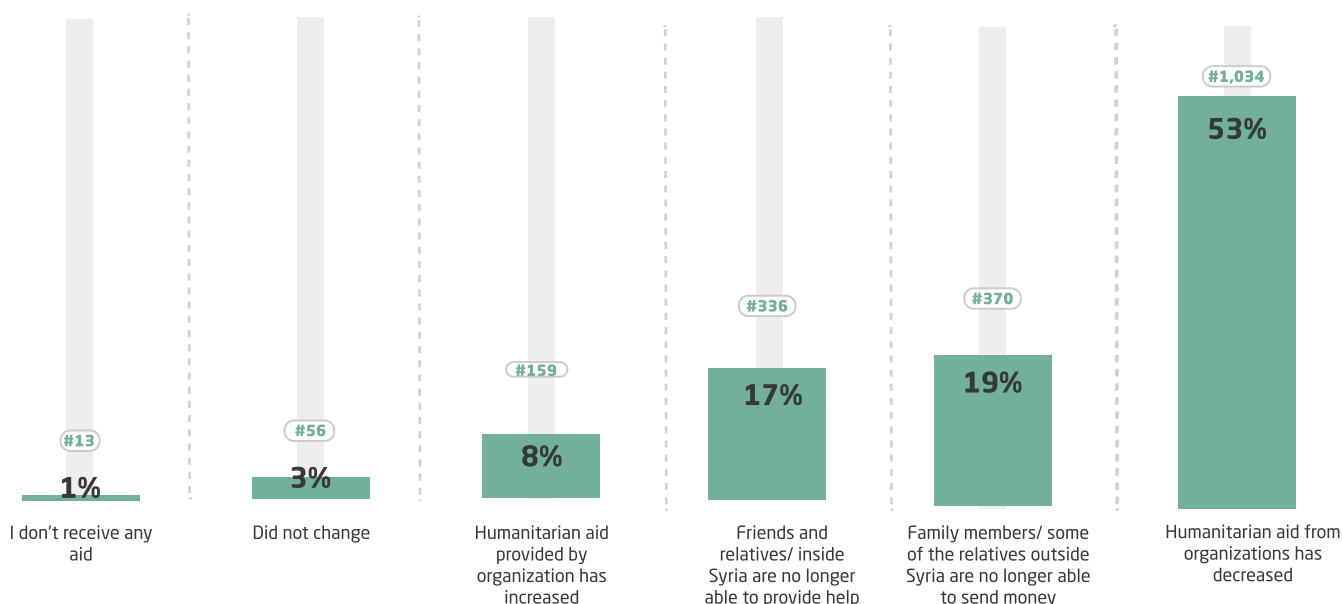
Figure 11: Number / percentage of persons surveyed who do not have a source of income according to the followed coping mechanisms



03 Impact on the Coping Mechanisms - Response of the Humanitarian Organizations in Light of the Spread of COVID-19

In view of the coping mechanisms followed by the persons without any source of income who made up 22% (324 persons) of the persons surveyed; 47% (271 persons) were found to be dependent on aid provided by humanitarian organizations. 21% (121 persons) depend on aid provided by friends and relatives inside Syria; 19% (111 persons) rely on remittances from a family member or relative outside Syria; 13% (73 persons) resorted to having the children under the age of 18 years (child labor) work to contribute to providing for the families; 4 persons started spending their savings or selling assets and household furniture to cover family expenses. It is reported that the largest part of families that do not have any source of income rely on more than one coping mechanism; This is due to the lack of a stable coping mechanism or the provision of all family requirements as the humanitarian aid provided by the organizations is not stable and does not meet all the needs; Also, friends and relatives inside and outside Syria cannot always help.

Figure 12: Number / percentage of persons surveyed by source of income

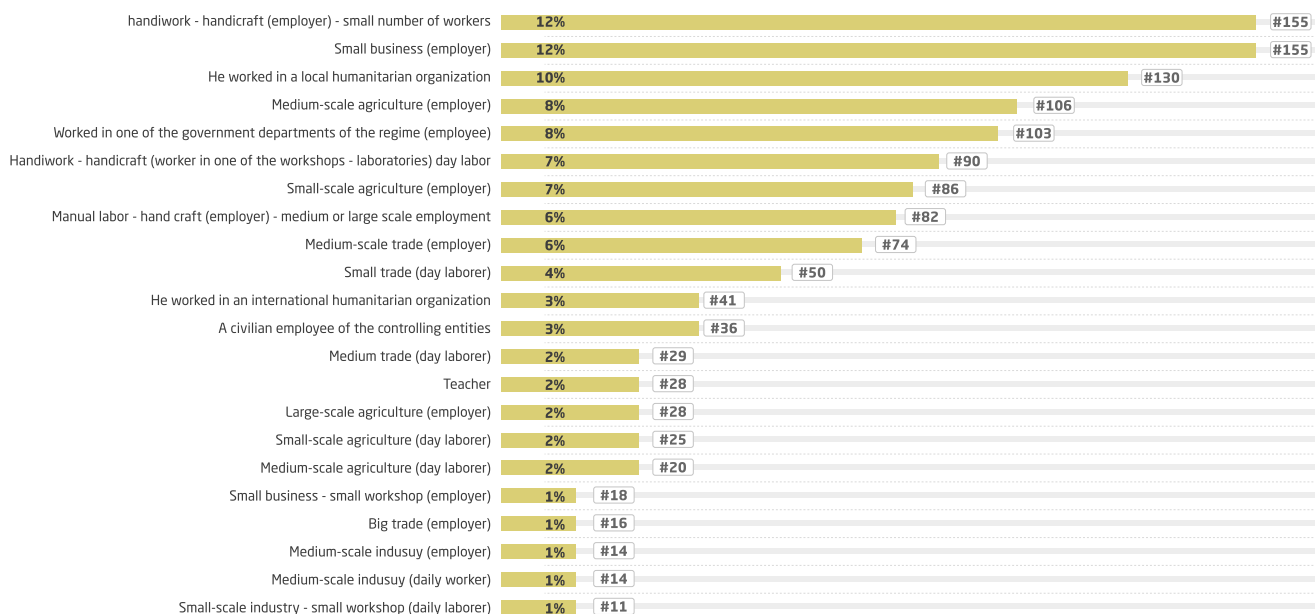


“In May 2020, the World Food Program (WFP) announced a new reduction in the amount of items within the food basket that is being distributed in northwestern Syria; The amount of rice in the food basket will be reduced from 15 kg to 7.5 kg; and the food basket will not contain white beans. Therefore, The total calories of one food basket will be 1.650 calories. This reduction is the second of its kind after the reduction that was made last April; WFP attributed the reduction in the food basket items to the failure of the program to obtain Sufficient funding to maintain the number of items in the food basket”. According to Mark Lowcock, the UN Assistant Secretary-General for Humanitarian Affairs, during a virtual UN meeting, “nearly half a million children in Syria are stunted due to malnutrition.”

04 Types of Income Sources

At the forefront of the income sources of the surveyed persons came manual labor, whether the person is the owner of the shop or works in it. In the second place came the owners of small trade shops in which only the owner of the shop works (he does not need workers with him since it is a small-scale trade). Workers of humanitarian organizations ranked third.

Figure 13: Number / percentage of persons surveyed by source of income



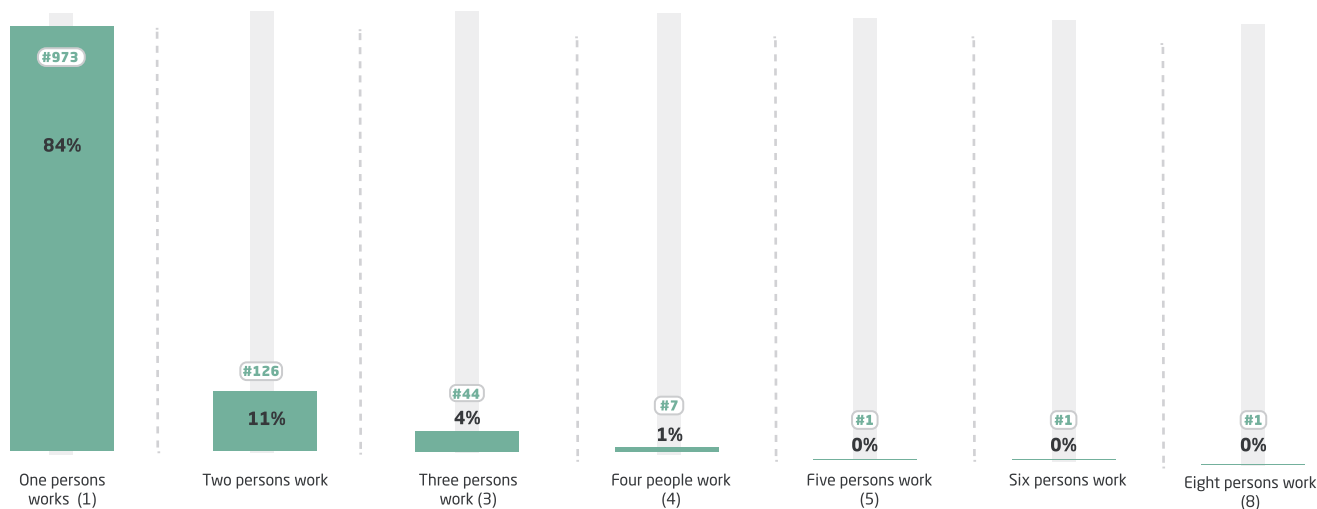
According to “The Economic Reality in Northern Syria”³ report issued by ACU “The largest sources of income available in northern Syria are for those working in the education sector, and both manual professions and seasonal vegetables accounted for 8% of the available job opportunities. Self-employment (day-labor), small trade (street sellers and small shops), construction work, and work within humanitarian organizations and Within the health sector, livestock raising, building materials production and trade constituted 6% of the available professions, while work within governmental departments of the opposition, fruit tree cultivation and poultry farming accounted for 3% of the total available professions. Both work within SDF government departments and hand-crafts accounted for 3% of the available professions. Both work within government departments of the regime (receiving salaries even when not permanently) and work within factories only 2%.

03 https://www.acu-sy.org/en/wp-content/uploads/04/2021/Economic-Reality_IMU2021-.pdf

05 Number of Working Family Members

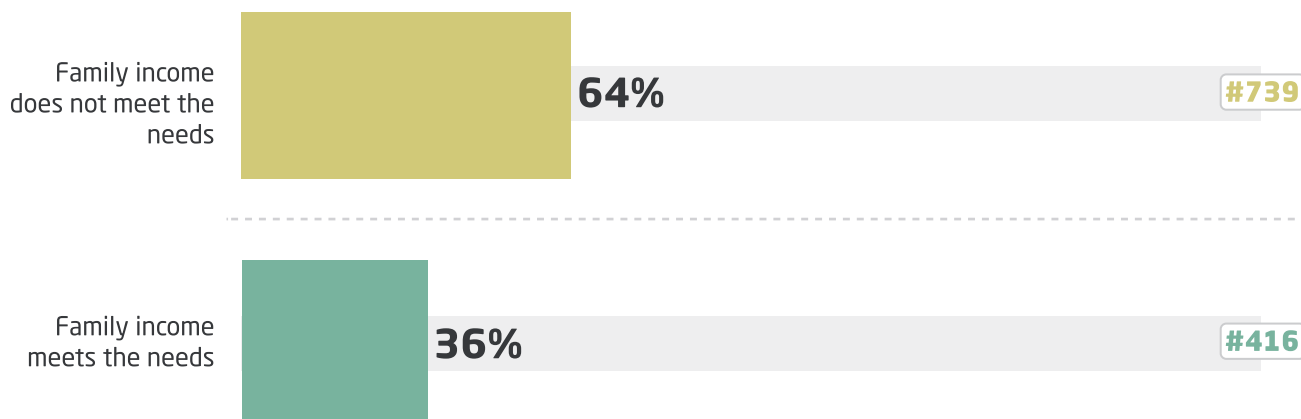
According to the study it is found that 78% (1,155 persons) of the individuals interviewed have sources of income. These persons were asked about the number of working family members; 84% (973 persons) reported that only one family member works; All family members depend on this person's work; This means that this family is threatened with losing its source of income if this person stops working. 11% (126 persons) reported that only two family members work; whereas 4% (44 persons) reported that three family members work.

Figure 14: Number / percentage of persons who have sources of income according to the number of working family members



The study further reveals that persons with sources of income were asked about the adequacy of these sources to meet the needs of their families before the spread of COVID-19; Only 36% (416 persons) reported that they had sources of income or these sources of income were sufficient to meet the needs of their families; 64% (739 persons) said that the sources of income were not sufficient to meet the needs of their families.

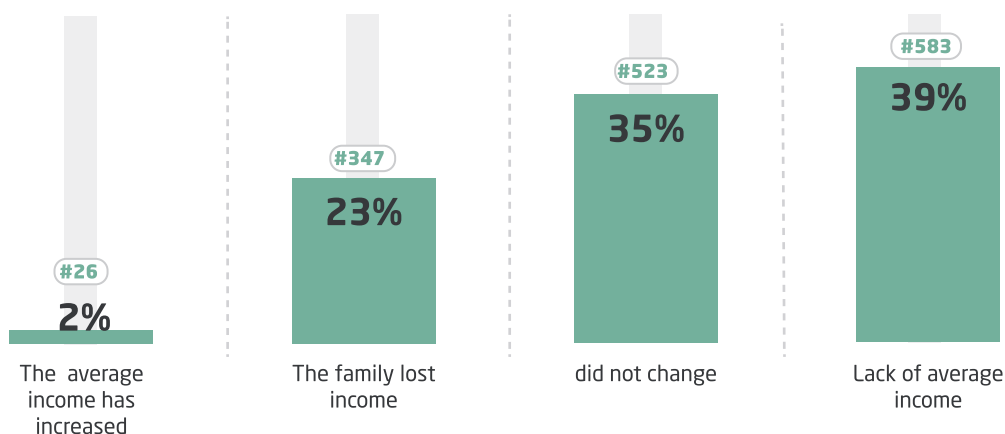
Figure 15: Number / percentage of persons who have sources of income according to these sources meeting the needs of the families



06 The Impact of the Spread of COVID-19 on Income Sources

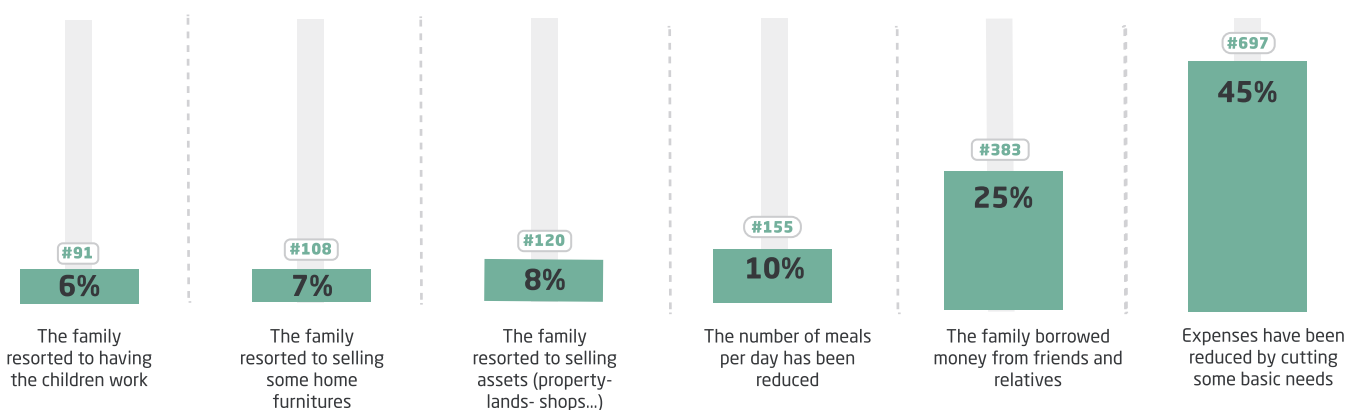
Based on the study, persons with sources of income were asked about the extent to which these sources of income have been affected by the spread of COVID-19; 23% (347 persons) of those who owned sources of income reported that their families lost their sources of income after the spread of the virus, 39% (583 persons) reported that the average income decreased after the spread of the virus, 35% (423 persons) reported that the average income did not change after the spread of the virus, and only 2% (26 persons) reported that the average income increased after the spread of the virus.

Figure 16: Number / percentage of persons who have sources of income according to the impact of the spread of COVID-19 on these sources of income



The results of the study showed that 45% (697 families) of families whose sources of income were affected by the spread of COVID-19 resorted to reducing the expenses by dispensing with some basic needs to cope with their income being affected, 25% (383 families) of families resorted to borrowing money from friends and relatives, 10% (155 families) of families reduced the number of daily meals, 8% (120 families) of families resorted to selling assets of property, real estate and land, 7% (108 families) of families resorted to selling home furniture, 6% (91 families) of families resorted to child labor to contribute to cover the family's expenses.

Figure 17: Number / percentage of persons whose sources of income have been affected by the spread of the COVID-19 virus according to the coping mechanisms



Section 04

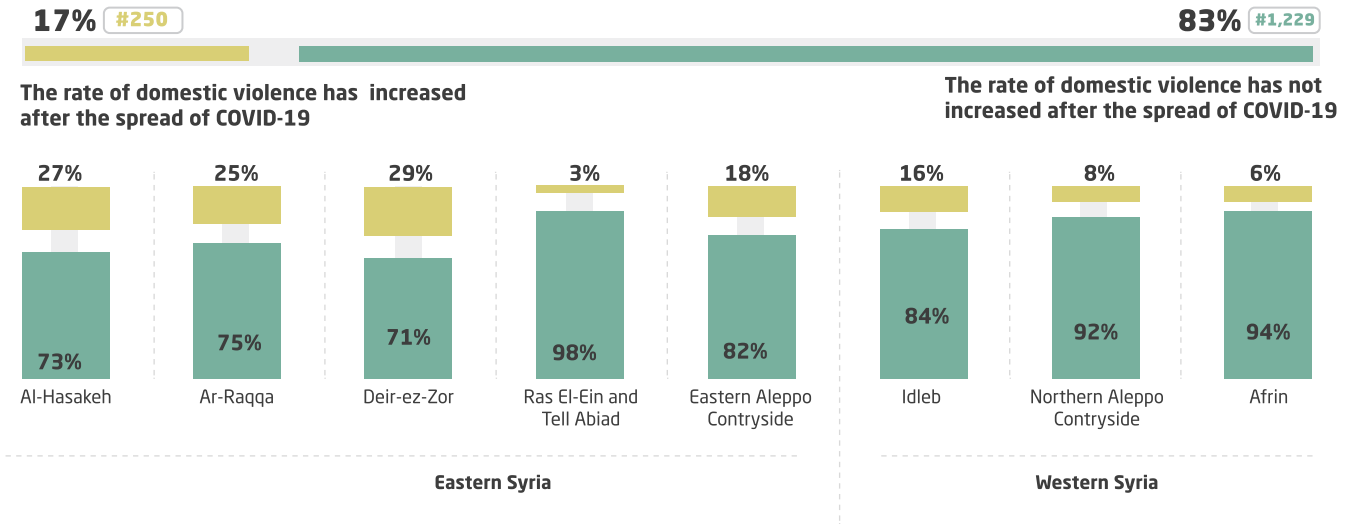
The Social Impact of COVID-19



01 The Increase in Domestic Violence Rates Following the Spread of COVID-19

According to the study, the interviewees were asked about their opinion of the high rates of domestic violence after the spread of COVID-19; 17% (250 persons) of the persons interviewed reported that the rates of domestic violence increased after the spread of the virus, while 83% (1,229 persons) reported that the rates of domestic violence did not increase after the spread of the virus.

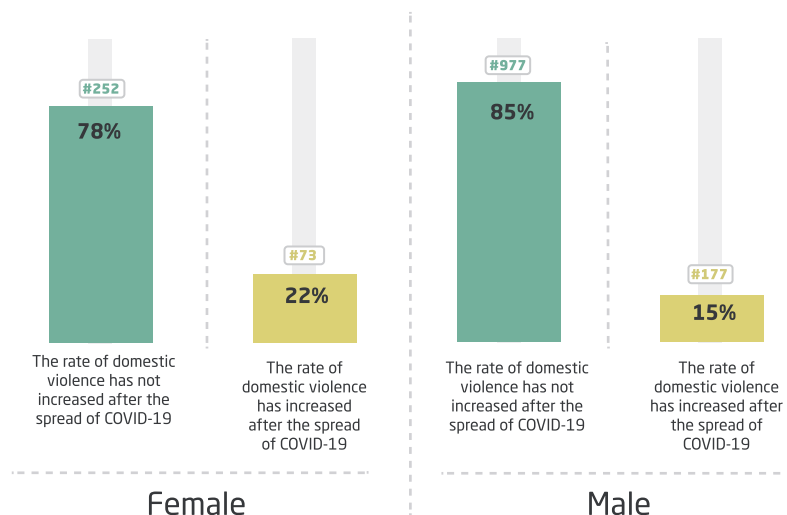
Figure 18: Number / percentage of persons according to the high rate of domestic violence after the spread of the COVID-19 virus



It should be noted here that domestic violence is not limited only to physical violence, but rather includes other forms of violence. According to UN definition of domestic violence³ “Domestic abuse, also called “domestic violence” or “intimate partner violence”, can be defined as a pattern of behavior in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse is physical, sexual, emotional, economic or psychological actions or threats of actions that influence another person. This includes any behaviors that frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, or wound someone. Domestic abuse can happen to anyone of any race, age, sexual orientation, religion, or gender. It can occur within a range of relationships including couples who are married, living together or dating. Domestic violence affects persons of all socioeconomic backgrounds and education levels.”

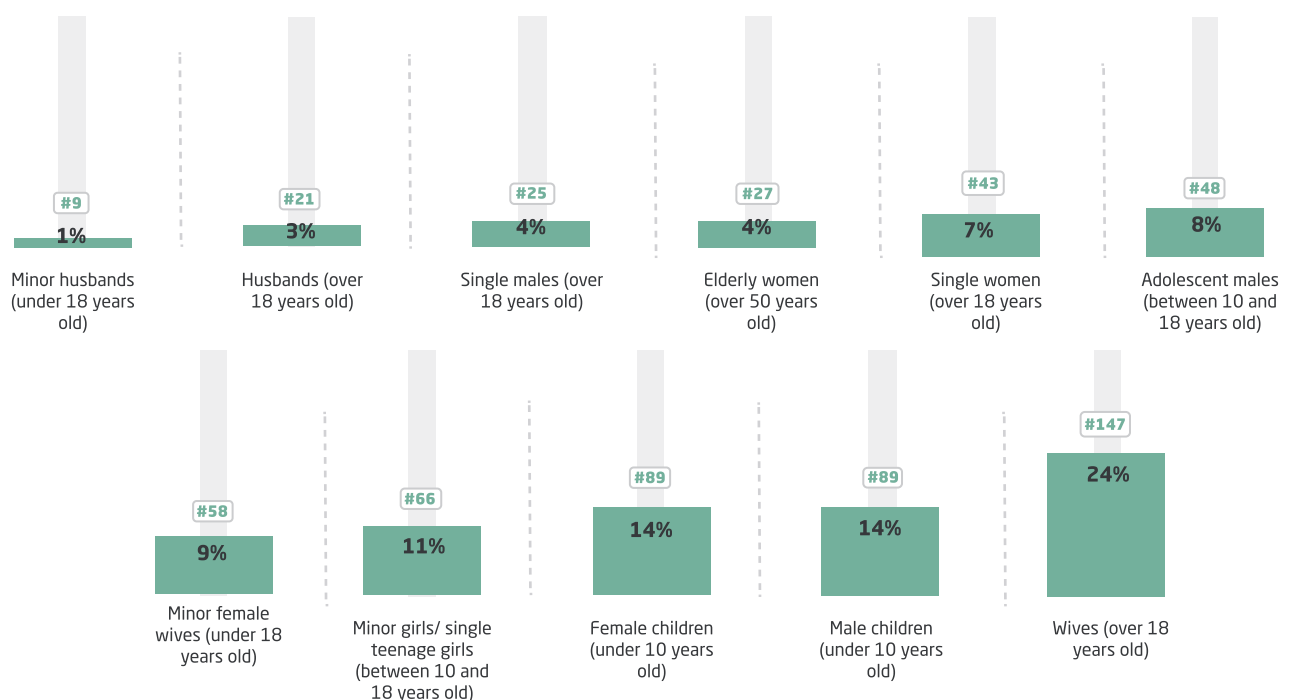
Given the views of both genders regarding the rise in domestic violence after the spread of COVID-19; We find that females reported a higher rate of domestic violence than males.

Figure 19: Number / percentage of persons according to the high rate of domestic violence after the spread of the COVID-19 virus, by gender



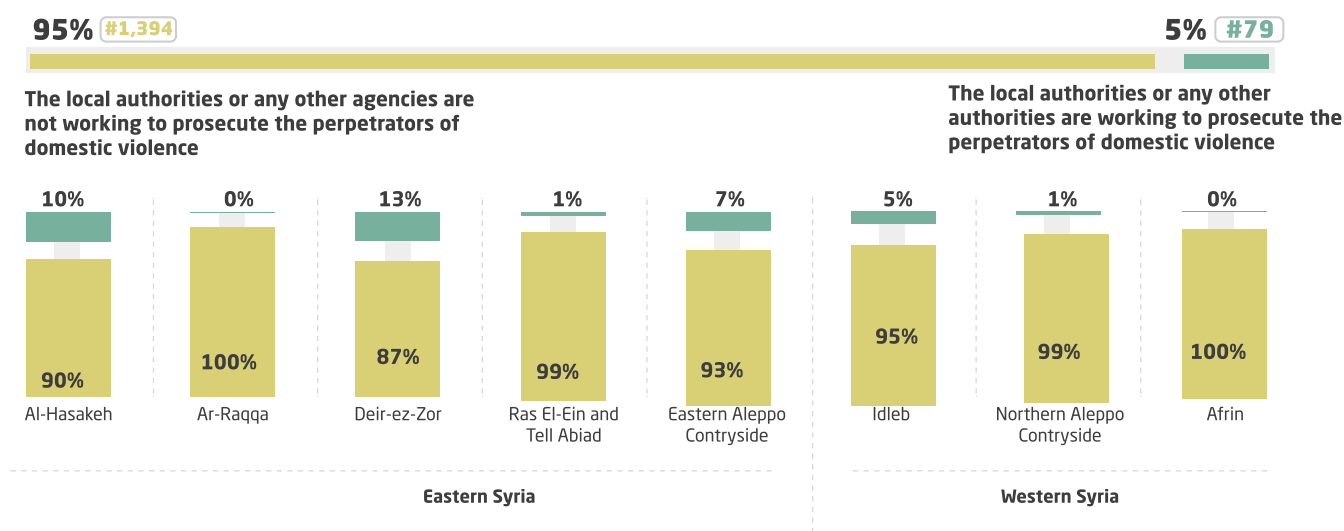
According to the results of the study, wives (older than 18 years of age) are among the most targeted groups by domestic violence, where 147 persons reported that domestic violence targets wives; Male children (younger than 10 years) ranked second; Female children (younger than 10 years old) ranked third, and single adolescent girls (ages 10-18) ranked fourth.

Figure 20: Number / percentage of persons who reported a high rate of domestic violence according to the groups targeted by the violence



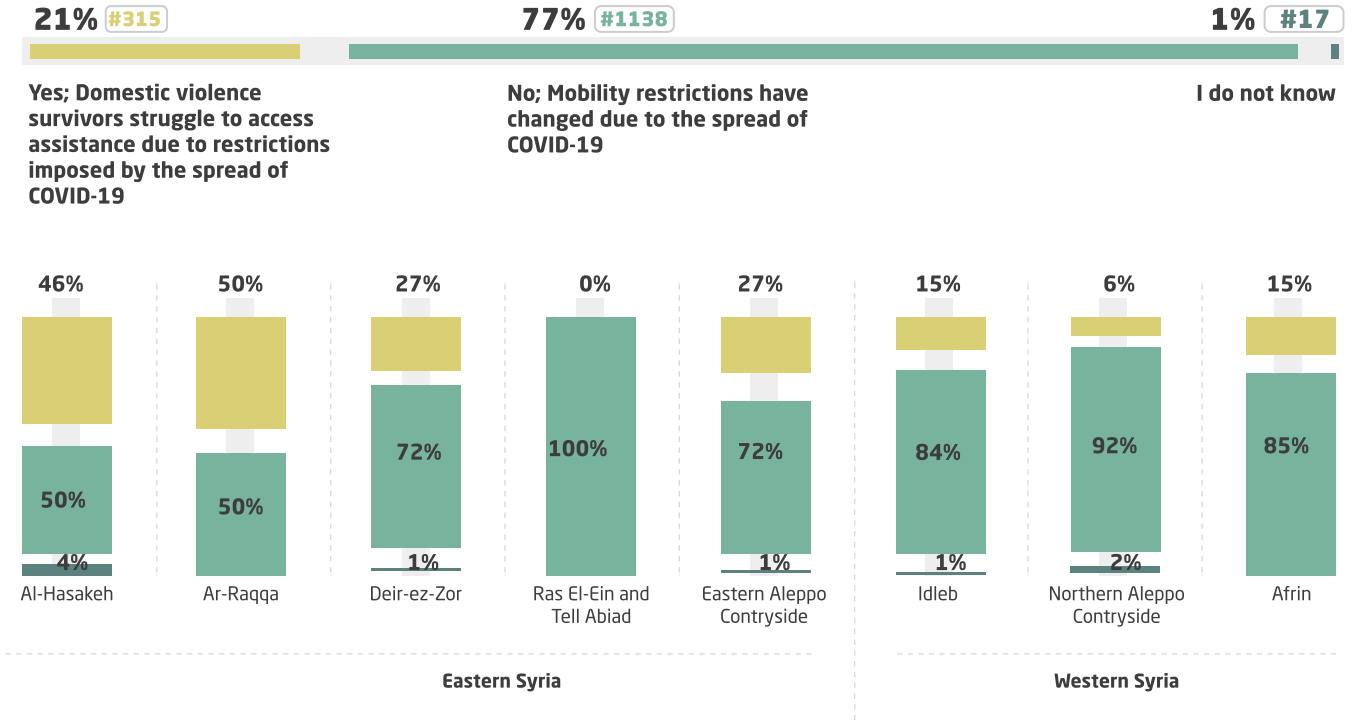
Only 5% (79 persons) of the persons interviewed stated that local authorities or any other bodies are working to prosecute perpetrators of domestic violence, while 95% (1,349 persons) stated that there is no agency working to prosecute perpetrators of domestic violence.

Figure 21: Number / percentage of persons who were surveyed according to their opinions of the existence of a body that prosecutes perpetrators of domestic violence



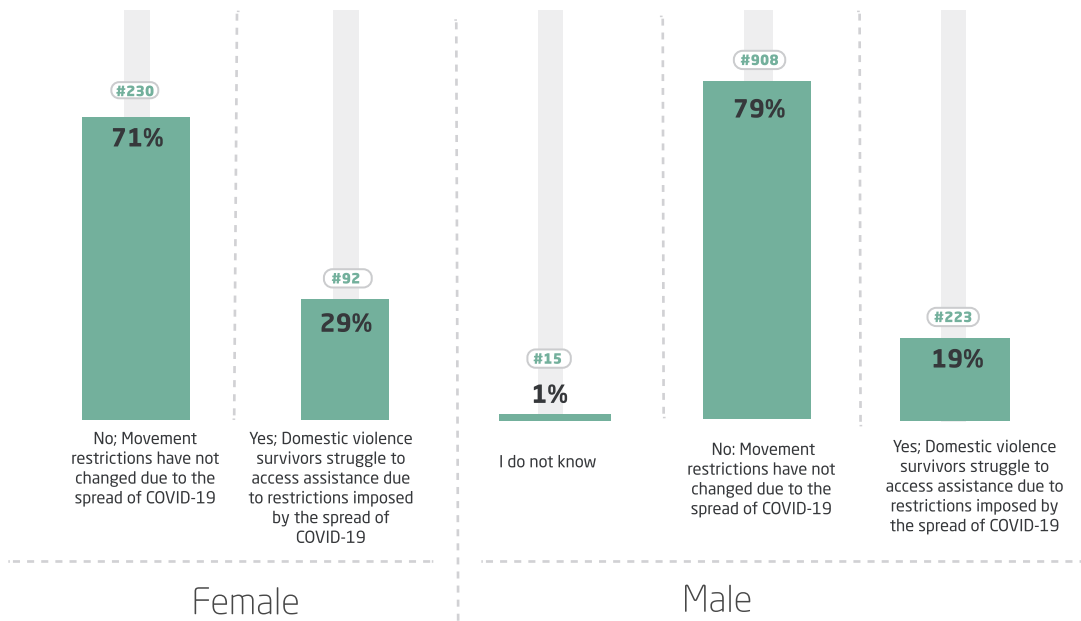
21% (315 persons) of interviewees reported that domestic violence survivors have difficulty obtaining assistance due to restrictions imposed by the spread of COVID-19; 77% (1,138 persons) said that movement restrictions did not change after the spread of the virus, and 1% (17 persons) said that they did not know whether restrictions changed after the spread of the virus.

Figure 22: Number / percentage of persons who were surveyed based on their opinions of the high rate of domestic violence



Considering the opinions of both genders concerning restrictions imposed by the spread of COVID-19 with regard to domestic violence survivors receiving assistance, we find that females report that it is more difficult for female survivors of domestic violence to obtain assistance than males.

Figure 23: Number / percentage of persons who were surveyed according to their views on the high rate of domestic violence by gender

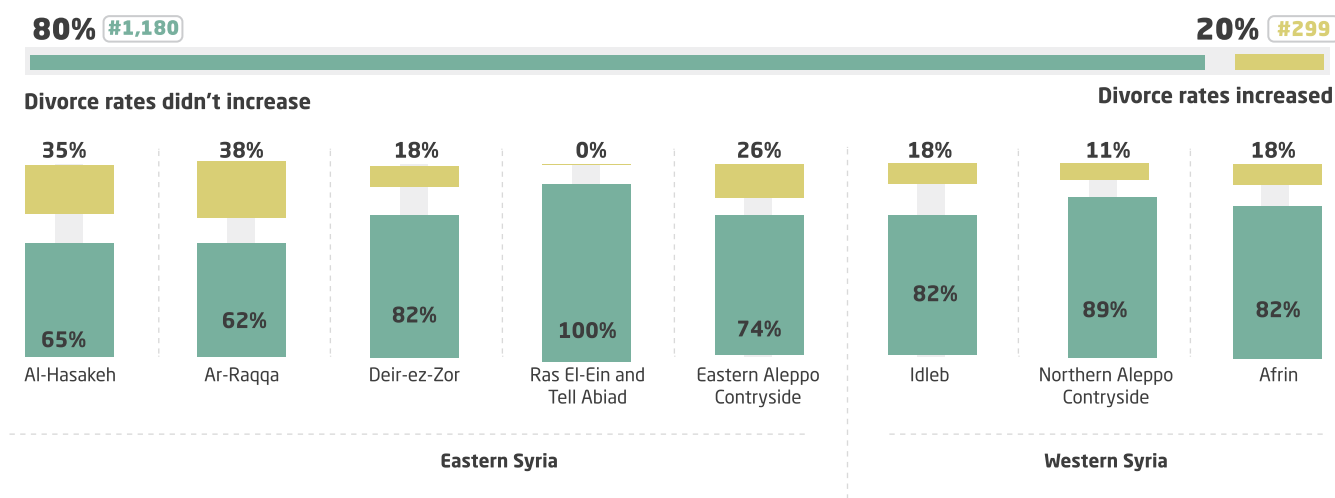


Commonly, gender based violence (GBV) and domestic violence survivors turn to referral pathways; the Standard Operating Procedures (SOPs) of GBV Prevention and response to it define Referral Pathways⁴ as the following “A flexible mechanism that safely links survivors to supportive and competent services, such as medical care, mental health and psychosocial support, police assistance and legal/justice support.”

02 The Increase in Divorce Rates Following the Spread of COVID-19

20% (299) of persons interviewed reported that divorce rates increased after the spread of COVID-19; 80% (1,180 persons) said that divorce rates did not increase; It is noteworthy that the measures of full lockdown have not been applied in northern Syria. This explains why divorce rates are not so high, which often result from family problems that arise due to staying at home for long periods of time.

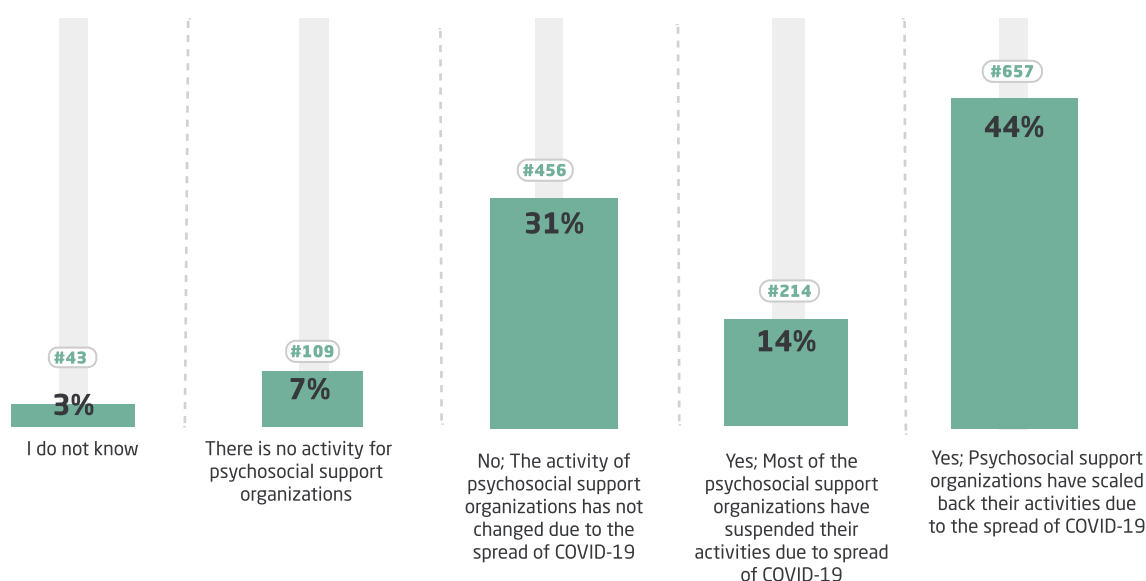
Figure 24: Number / percentage of persons surveyed according to their opinions of high divorce rate



03 The Impact of the Spread of COVID-19 on PSS Activities

44% (657 persons) of interviewees reported that psychosocial support organizations have reduced their activities due to the spread of COVID-19; 14% (214 persons) reported that most psychosocial support organizations have suspended their activities due to the spread of COVID-19; While 31% (456 persons) stated that the activity of psychosocial support organizations has not changed after the spread of COVID-19; 7% (109 persons) reported that there are no activities for psychosocial support organizations in their cities and towns.

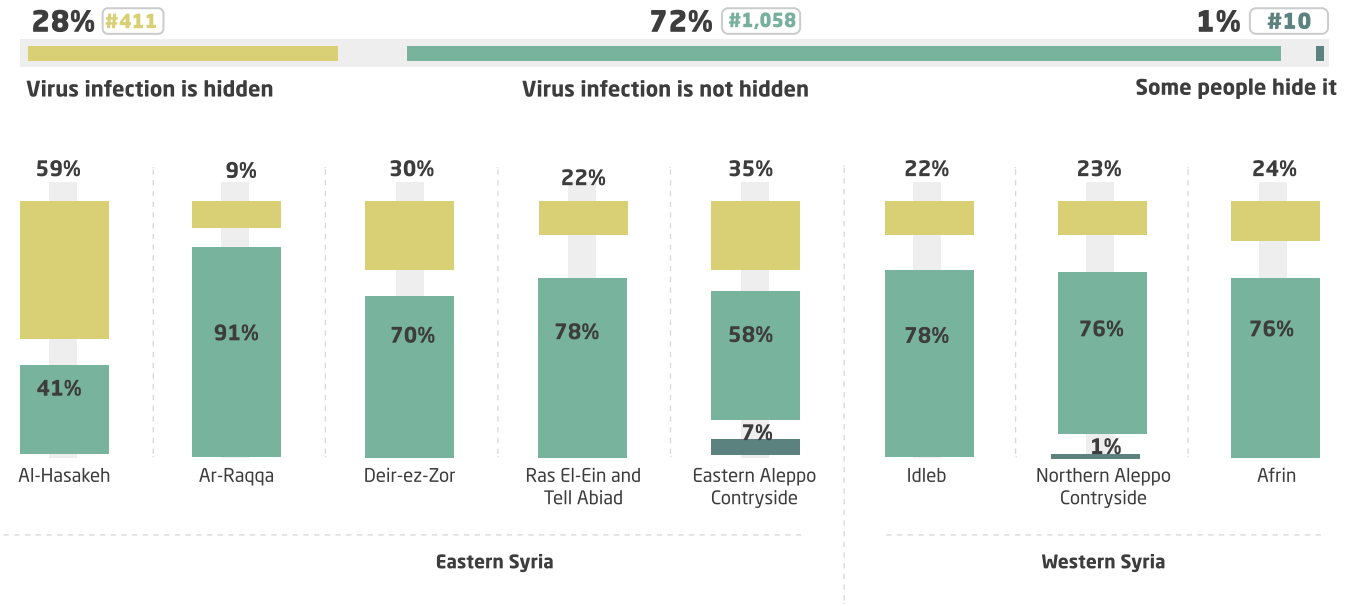
Figure 25: Number / percentage of persons who were surveyed according to their opinions concerning the activity of psychosocial support organizations being affected



04 Hiding COVID-19 Infection

28% (411 persons) of interviewees reported that those infected with COVID-19 hide their infection for many reasons, the most important of which is the fear that the source of family income will be cut off (a member of a family having a person infected with the virus stop working); While 72% (1,058 persons) reported that those infected with COVID-19 do not hide their infection; only 10 persons reported that some persons hide their infection with the virus.

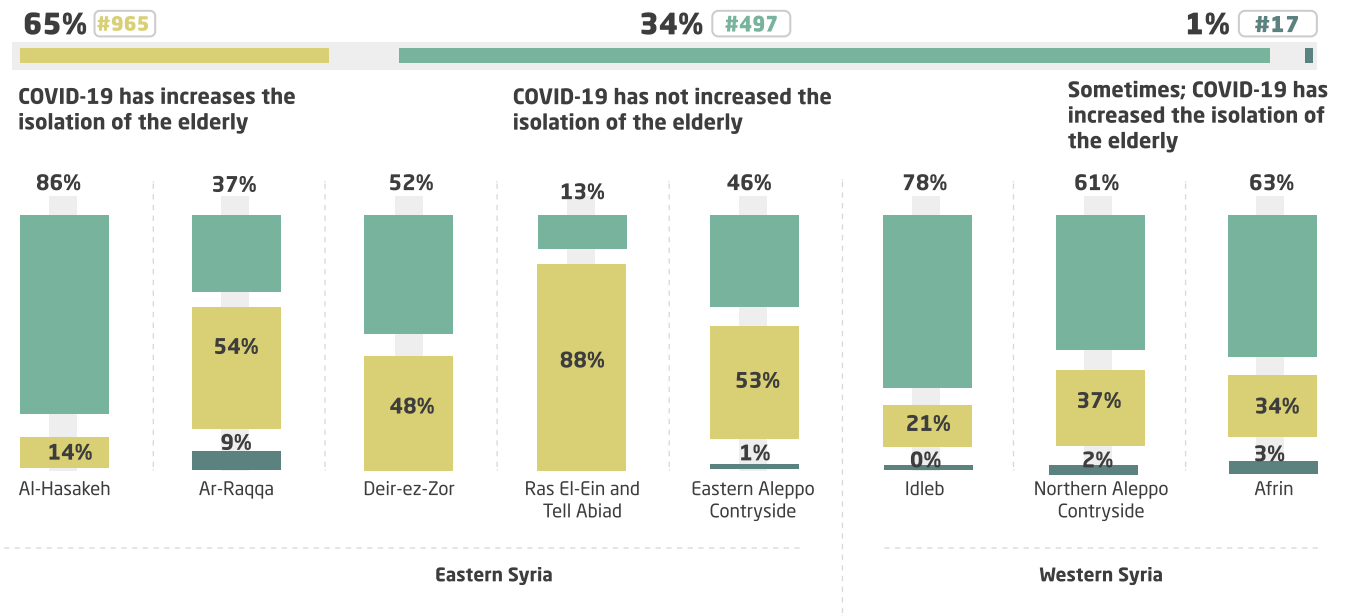
Figure 26: Number / percentage of persons surveyed according to their opinion of hiding their infection with the virus



05 The Increase in Elderly Isolation Following the Spread of COVID-19

65% (965) of interviewees reported an increase in elderly isolation after the spread of COVID-19; 1% (17 persons) reported that sometimes the spread of COVID-19 it increased the isolation of the elderly, while 34% (965 persons) reported that the isolation of the elderly did not increase after the spread of COVID-19.

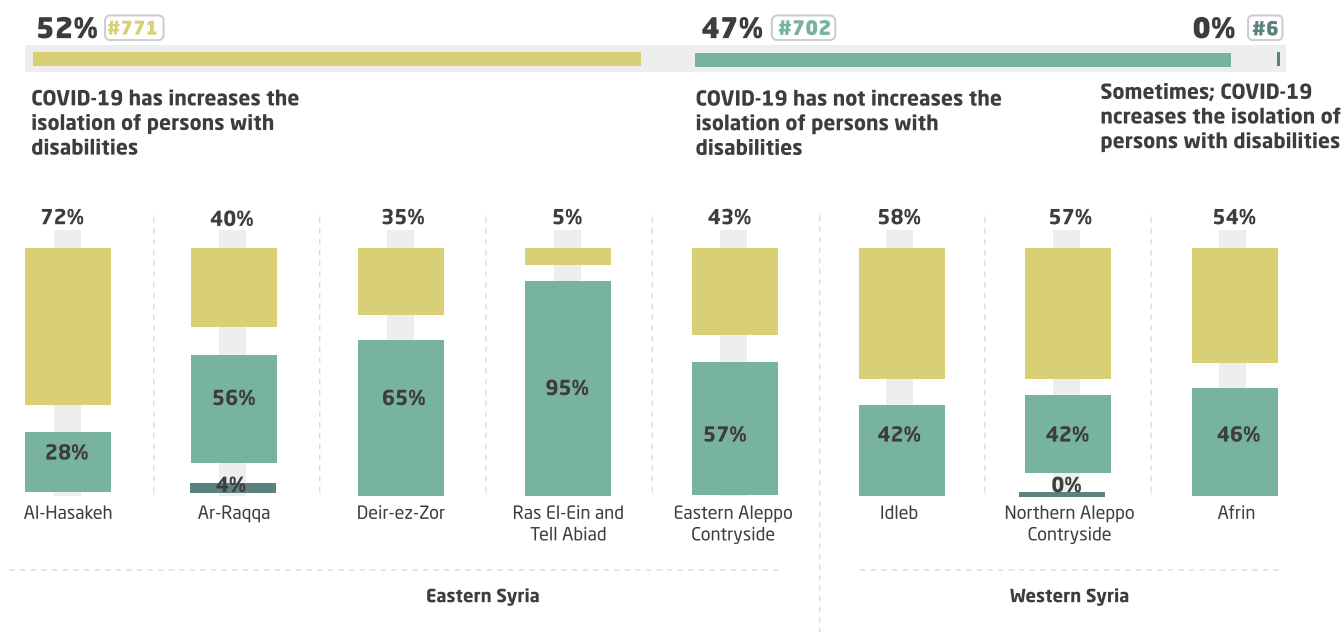
Figure 27: Number / percentage of persons surveyed according to their opinions of the high rate of isolation suffered by the elderly due to the virus



06 The Increase in Isolation of Persons with disabilities Following the Spread of COVID-19

52% (771 persons) of interviewees reported an increase in the isolation of persons with disabilities after the spread of COVID-19; Only 6 persons reported that the spread of COVID-19 sometimes increased the isolation of persons with disabilities, while 47% (702 persons) reported that the isolation of persons with disabilities did not increase after the spread of COVID-19.

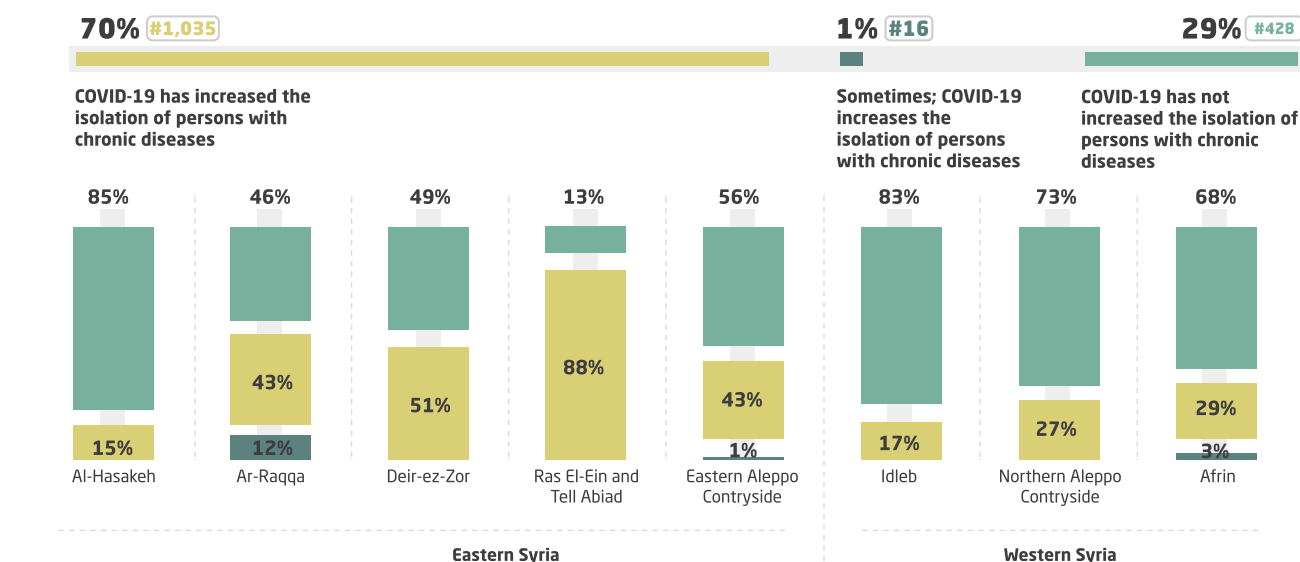
Figure 28: Number / percentage of persons surveyed according to their opinions of the high rate of isolation suffered by those with disabilities due to the virus



07 The Increase in Isolation of Persons with Chronic Diseases Following the Spread of COVID-19

70% (1,035) of interviewees reported an increase in the isolation of those with chronic diseases following the spread of COVID-19; Only 1% (16 persons) reported that the spread of COVID-19 sometimes increased the isolation of those with chronic diseases, while 29% (428 persons) reported that the isolation of those with chronic diseases did not increase after the spread of the COVID-19.

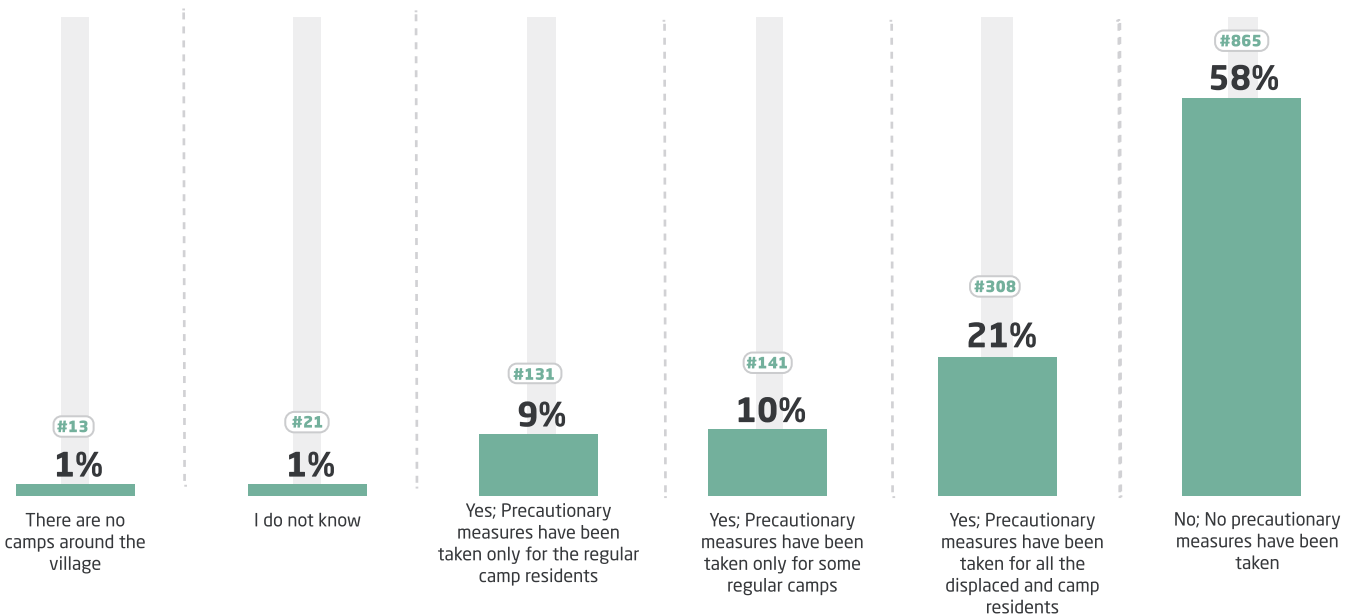
Figure 29: Number / percentage of persons surveyed according to their opinions of the high rate of isolation suffered by those with chronic diseases due to the virus



08 Precautionary Measures to Limit the Spread of COVID-19 in Displacement Areas

In the study, the surveyed persons have been asked about any precautionary measures taken to limit the spread of COVID-19 in areas of displacement given that these areas are crowded with internally displaced persons (IDPs) and lack basic necessities of life, which leads to the spread of the infection faster; 58% (865 persons) of the persons interviewed stated that no precautionary measures have been taken to limit the spread of COVID-19 in areas of displacement; 21% (308 persons) reported that there were precautionary measures taken and targeted all IDPs in camps, cities and towns; 10% (141 persons) said that there were precautionary measures taken that targeted only some regular camps (large and organized camps that meet a set of criteria). 9% (131 persons) said that precautionary measures targeting all regular camps, and all KIs confirmed that no precautionary measures targeting informal camps had been taken.

Figure 30: Number / percentage of persons surveyed according to their opinions of precautionary measures taken in areas of displacement

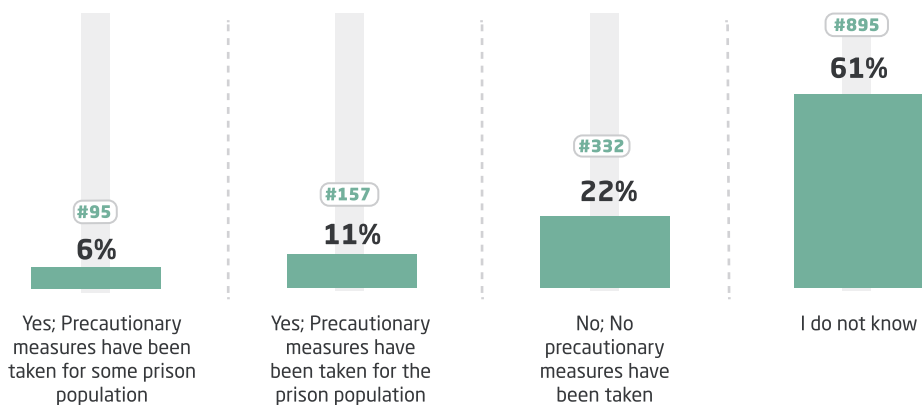


It is noteworthy that the Free Syrian Civil Defense Organization worked to sterilize facilities in northwestern Syria. Camps, schools, health centers, government buildings of the opposition and mosques have been sterilized, but the sterilization process must be carried out periodically and not just once.

09 Precautionary Measures to Limit the Spread of COVID-19 in Prisons

In the study, the surveyed persons have been asked about any precautionary measures taken to limit the spread of COVID-19 in prisons; 61% (895 persons) of interviewees said they did not know whether precautionary measures were taken to limit the spread of COVID-19 in prisons; 22% (332 persons) said that no precautionary measures were taken in prisons; 11% (157 persons) said that there were precautionary measures that targeted all prisons; and 6% (95 persons) there were precautionary measures that targeted some of the prisons.

Figure 31: Number / percentage of persons surveyed based on their opinions of precautionary measures in prisons

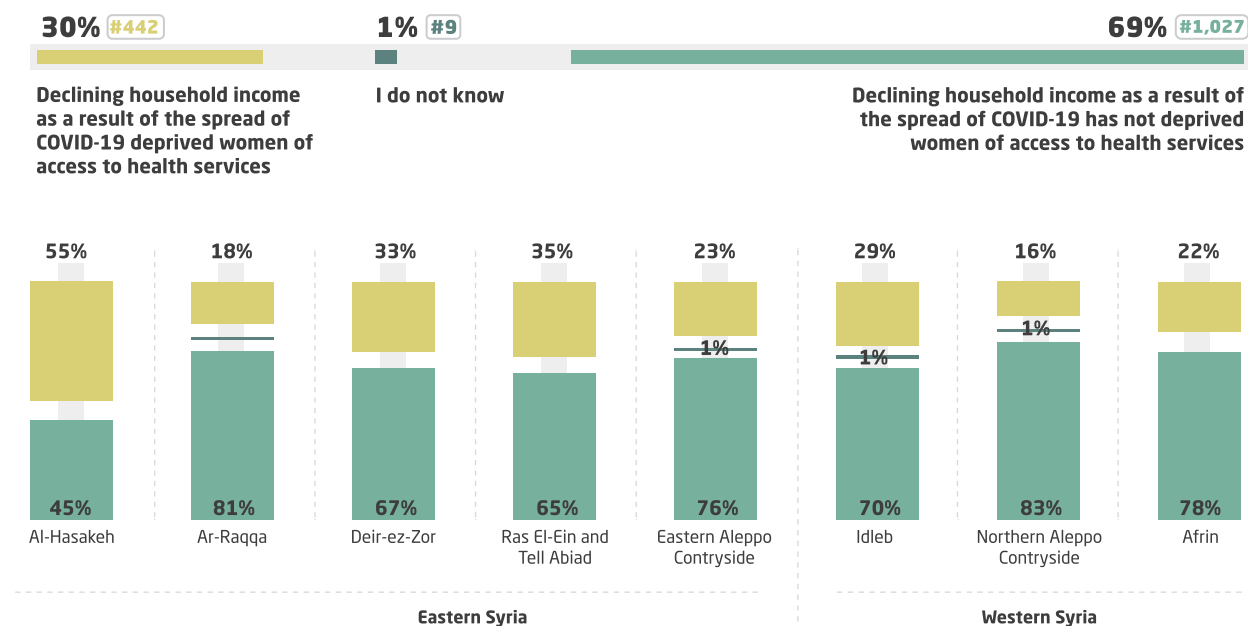


WHO called on all countries to take special measures for vulnerable groups, and persons deprived of their freedom, especially prisoners, are among the vulnerable groups at risk of getting infected with the virus due to overcrowding in prisons, the difficulty of applying the rules of social distancing, deteriorating environment and conditions of detention, poor ventilation in prisons, and the large number of prisoners in poor health.

10 Women's Access to Health Services during the Spread of COVID-19

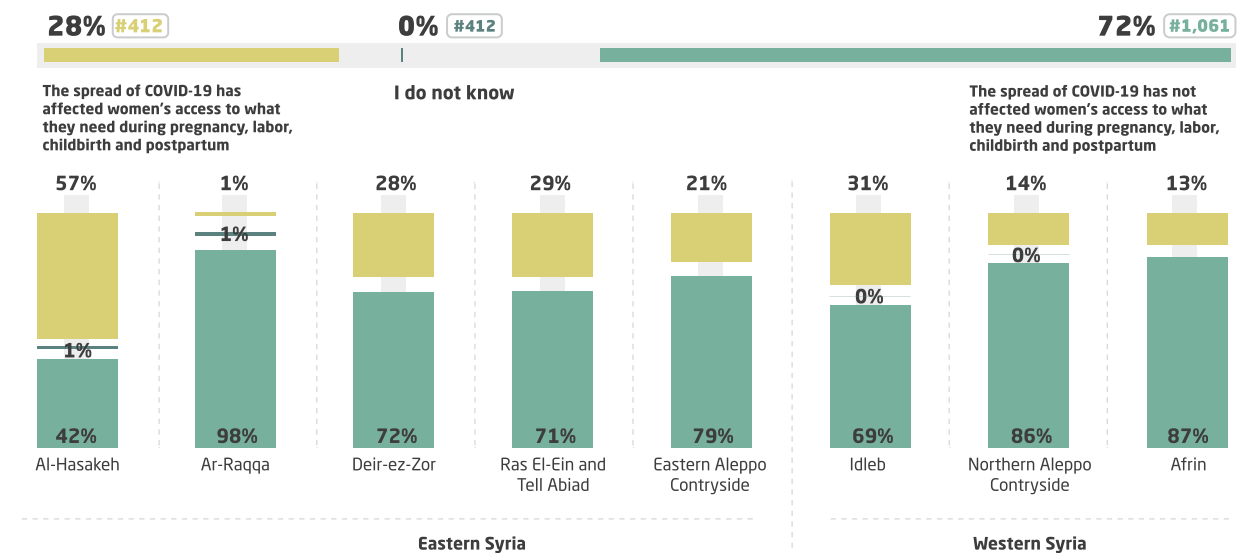
30% (442 persons) of interviewees reported that household income declined due to the spread of COVID-19; It deprived women of access to adequate health services and their basic women's needs; 69% (1,027 persons) reported that the spread of COVID-19 did not deprive women of access to adequate health services and basic women's needs.

Figure 32: Number / percentage of persons who were surveyed according to their views on the decline in women's access to basic needs



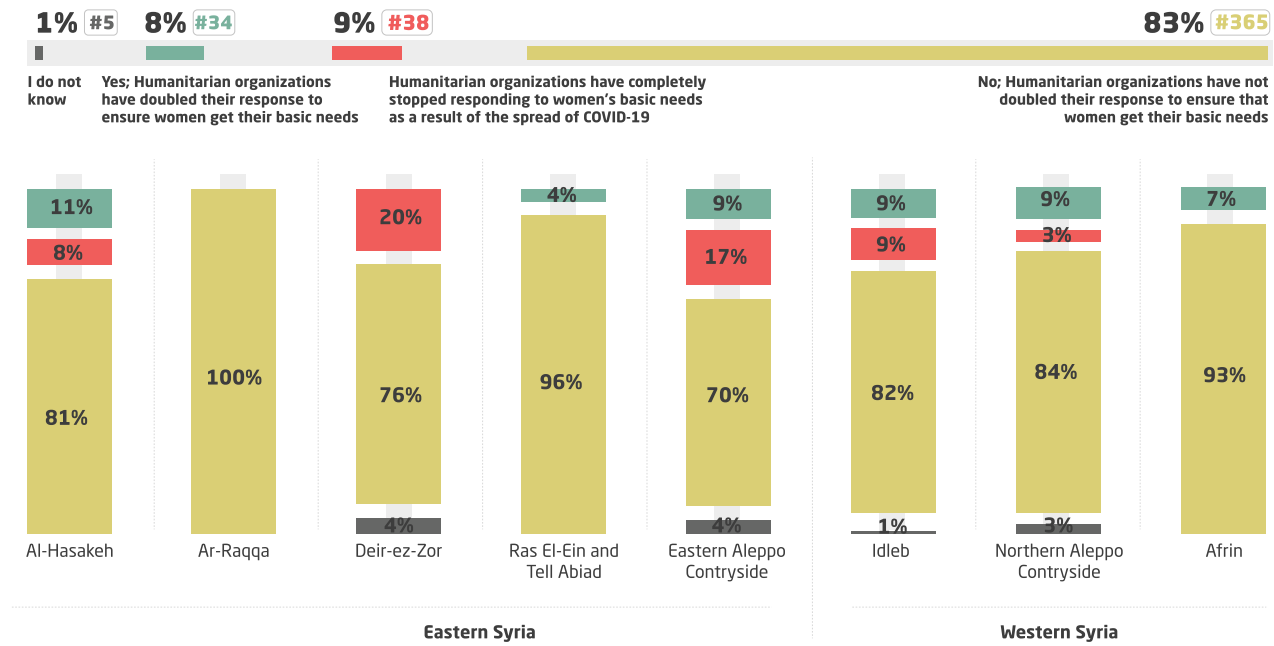
28% (412 persons) of interviewees reported that the spread of COVID-19 affected women's access to their needs during pregnancy, childbirth and postpartum period; while 72% (1,061 persons) reported that the spread of COVID-19 did not affect women's access to their needs during pregnancy, childbirth and postpartum period.

Figure 33: Number / Percentage of persons surveyed according to their views on the decline in women's access to what they need during pregnancy and childbirth



In the study, 422 respondents who said that the spread of COVID-19 affected women's access to their needs during pregnancy, childbirth and postpartum period where asked whether humanitarian organizations doubled their response to ensure that women have access to the needs of pregnancy, childbirth and postpartum period, only 8% (34 persons) confirmed that humanitarian organizations doubled their response to ensure that women receive the needs of pregnancy, childbirth and postpartum, while 83% (365 persons) confirmed that humanitarian organizations did not double its response to ensure that women have access to the needs of pregnancy, childbirth and postpartum, and 9% (38 persons) confirmed that humanitarian organizations completely stopped responding to the basic needs of women after the spread of COVID-19.

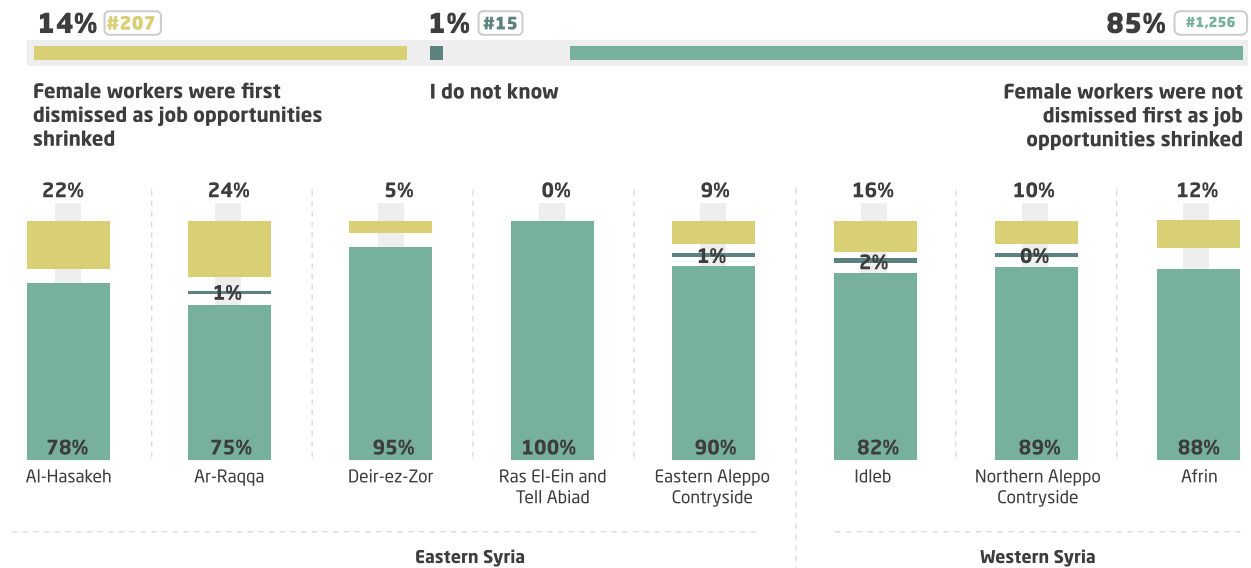
Figure 34: Number / percentage of persons surveyed based on their views on organizations multiplying their response to women's needs



11 The Impact of the Spread of COVID-19 on the working conditions of women

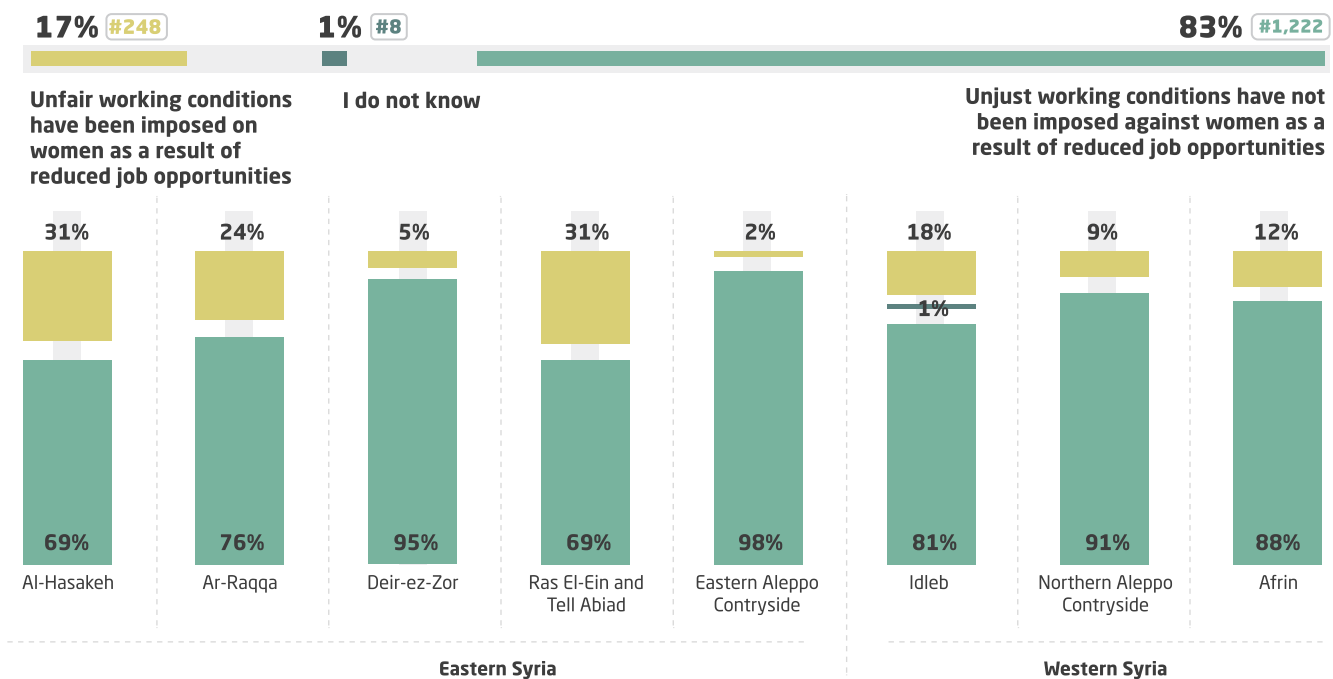
14% (207 persons) of interviewees reported that the spread of COVID-19 resulted in dismissing women first in the event of downsizing or limited work opportunities, while 85% (207 persons) reported not having women dismissed first when there in the event of downsizing.

Figure 35: Number / percentage of persons who were surveyed according to their views on dismissing working women first



17% (248 persons) of interviewees reported that the spread of COVID-19 led to imposing unfair working conditions against working women, while 83% (1,222 persons) reported not imposing unfair working conditions against working women.

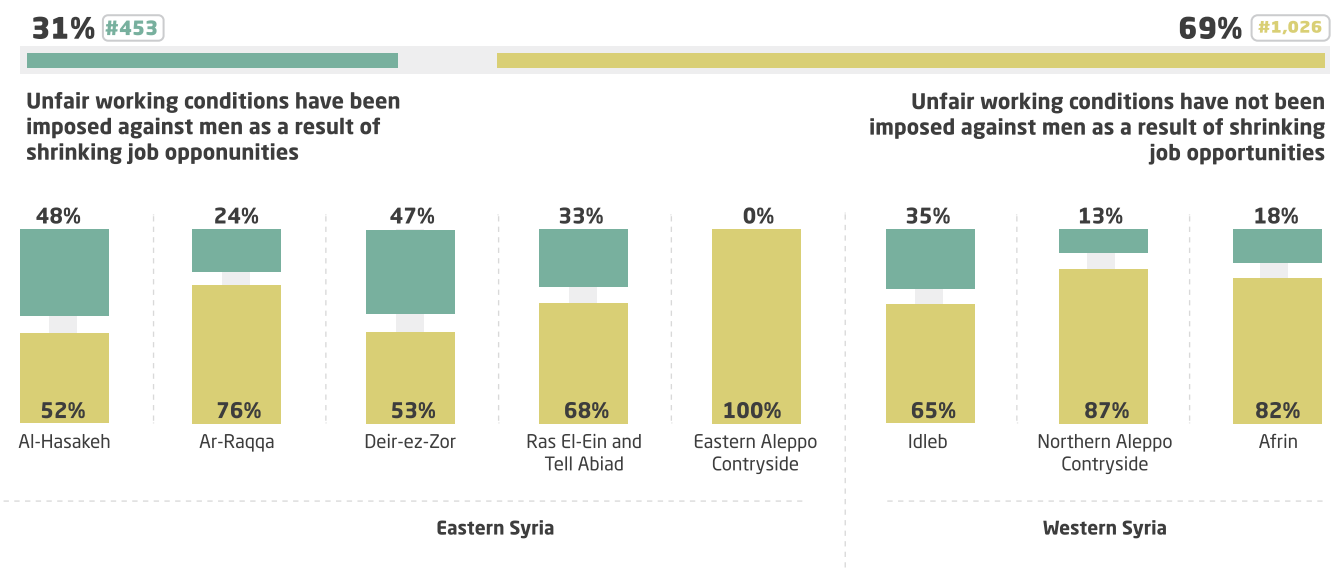
Figure 36: Number / percentage of persons who were surveyed according to their opinions of imposing unfair conditions on working women



12 The Impact of the Spread of COVID-19 on Men's Working Conditions

31% (453 persons) of interviewees reported that the spread of the COVID-19 led to imposing unfair working conditions against working men, while 69% (1,026 persons) reported not imposing unfair working conditions against working men.

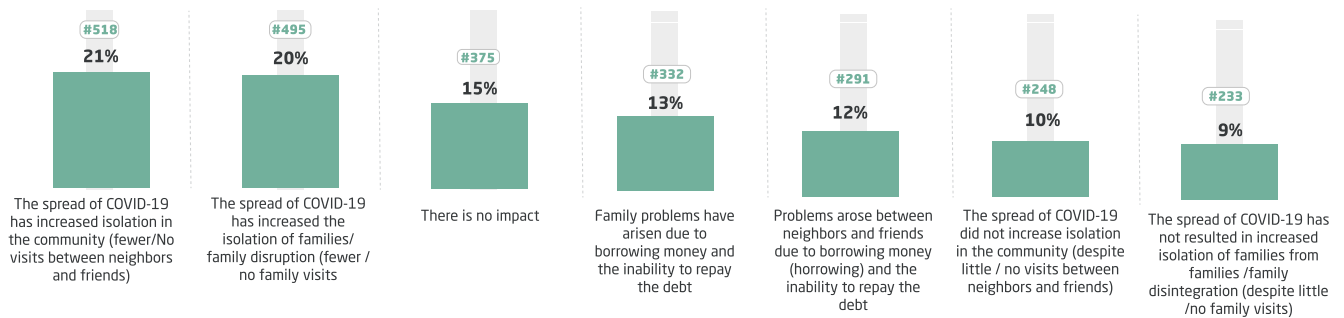
Figure 37: Number / percentage of persons who were surveyed according to their opinions of imposing unfair conditions on working men



13 The Impact of the Spread of COVID-19 on Social Connections

21% (518 persons) of interviewees reported that the spread of COVID-19 increased societal isolation; in that visits between neighbors and friends decreased or stopped; 20% (495 persons) reported that COVID-19 increased isolation of families, in that family visits decreased or stopped; 13% (332 persons) reported that COVID-19 led to the emergence of family problems due to the deterioration of living conditions that leads to borrowing money from other family members and the inability to repay the debt; similarly, 12% (291 persons) reported that the spread of COVID-19 led to the emergence of problems between neighbors and friends due to the poor living conditions that lead to borrowing money from neighbors or friends and the inability to repay the debt, while the bulk of persons interviewed, 34% (856 persons), stated that the spread of the virus did not lead to any negative impact on social links

Figure 38: Number / percentage of persons surveyed based on their views on the impact of the spread of the virus on social ties

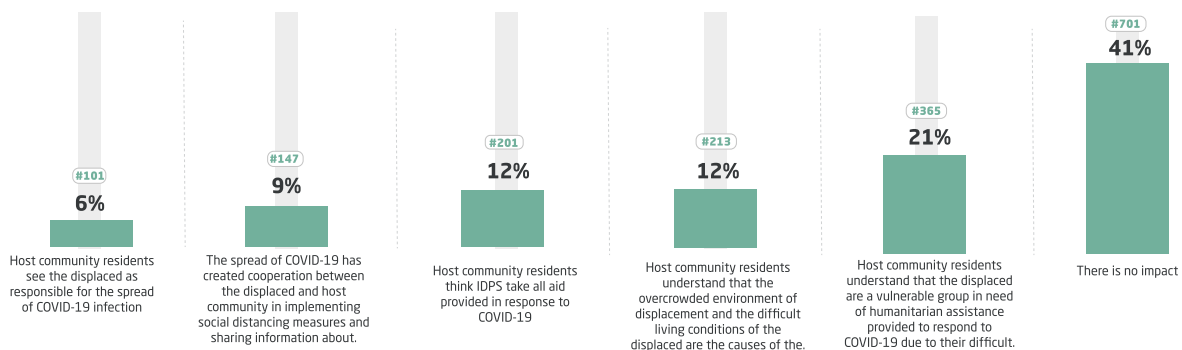


14 The Impact of the spread of COVID-19 on the relationship between IDPs and host community

According to the study, the majority of the persons interviewed think that the emergence of the virus did not lead to negative effects on the relationship between the displaced and host community, as 41% (701 persons) of the persons interviewed reported that the spread of COVID-19 did not lead to any impact on the relationship between the displaced and host community; 21% (365 persons) reported that the host community population understands that the displaced are the vulnerable group who are in need of humanitarian assistance provided to respond to COVID-19 due to their difficult circumstances; 12% (213 persons) reported that host community residents understand that the overcrowded environment of displacement and the difficult living conditions of the displaced are the causes of the spread of COVID-19 infection despite following the preventive measures; 9% (147 persons) reported that the spread of COVID-19 created cooperation between the displaced and host community in implementing social distancing measures and exchanging information about the spread of the virus and methods of prevention.

12% (291 persons) of the interviewees said that the host community residents think that IDPs are taking all the aid provided in response to COVID-19; 6% (101 persons) reported that the host community residents believe that the IDPs are responsible for the spread of COVID-19 infection.

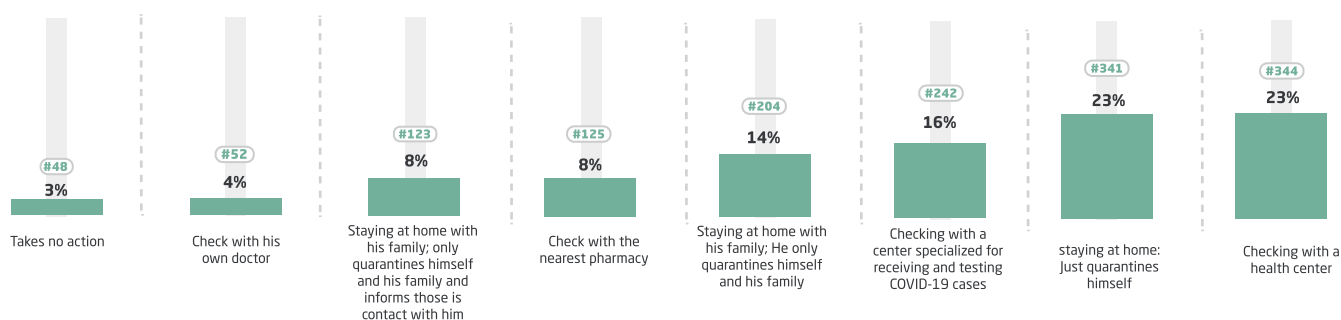
Figure 39: Number / percentage of persons surveyed based on their opinions of the impact on relationship between the displaced and the host community



15 Procedures Followed by those Showing Symptoms Similar to COVID-19

23% (344 persons) of interviewees reported that suspected COVID-19 cases (persons with symptoms similar to those of COVID-19) go to the nearest health center to check their situation (regardless of whether the health center contains tests to detect the infection or not), 23% (341) of the persons interviewed reported that those suspected of having COVID-19 stay at home (they only quarantine themselves without doing the test, whereas other family members are not quarantined); 16% (242 persons) of interviewees reported that those suspected of having COVID-19 go to a center specialized for the reception and testing of COVID-19 cases; 14% (204 persons) of the persons interviewed reported that those suspected of having COVID-19 stay at home (they only quarantine themselves and their families without doing the test); 8% (125 persons) of the interviewees reported that those suspected of having COVID-19 only go to the nearest pharmacy to check their situation; 8% (123 persons) of persons interviewed said that those suspected of having COVID-19 stay at home (they only quarantine themselves and their families without doing the test, but they inform their contacts of their infection), 4% (52 persons) of the interviewees reported that those suspected of having COVID-19 go to their doctor to check their situation; Only 3% (48 persons) of the persons interviewed reported that those suspected of having COVID-19 do not take any measures such as medical tests or home quarantine.

Figure 40: Number / percentage of persons who were surveyed according to their opinions about the health measures followed by those suspected of being infected with the virus

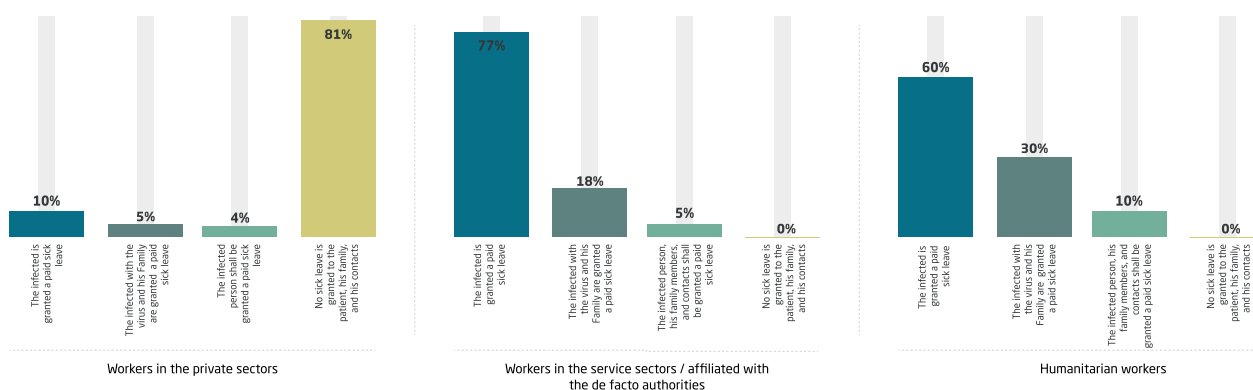


Health authorities usually publish educational measures about dealing with infectious diseases in the area; These measures are commensurate with the capacities of local authorities to limit the spread of diseases and provide means of prevention. With the onset of COVID-19, the educational measures issued by WHO included that the person showing symptoms of infection with COVID-19 should go to a relevant medical centers to do the test, and if the test result is positive (carrying the virus), the infected person is sent to health isolation centers until recovering from the infection. With the increase in the number of persons infected with the virus and inability of isolation centers to receive the large numbers of infected persons, COVID-19 testing centers began to call on those infected with the virus to quarantine themselves at home for 15 days (until they do the test again and the result is negative – the person recovered from the infection); Meanwhile, the testing centers send the critical positive cases that need to be monitored by a doctor or require ventilators, to special isolation centers. After hospitals and testing centers became one of the hotspots for transmitting the virus (until the person with suspected COVID-19 arrives at the testing center and until it is confirmed that he is infected, it is likely that he already transmitted the infection to his surroundings in the hospital or on the way there or within public transport), the largest part of countries provided COVID-19 infection tests at home; As the medical authorities within these countries designated a hotline to receive calls from persons suspected of being infected with the virus; then a specialized medical team goes to the house of the person suspected of being infected with the virus and conducts the necessary test for him; if the result is positive (the person is a carrier of the virus), he/she is asked to quarantine himself and his family at home for a period of 15 days; The medical authorities provide the infected patient with the necessary medicines and monitor his health condition remotely through periodic contacts; While the local authorities monitor the commitment of the person infected with the virus to stay at home by calling the patient or sudden periodic visits to make sure that the infected patient does not leave the house.

16 Granting a Paid Sick Leave to the Person Infected with COVID-19

- The private sector:** 81% (1,197 persons) of the persons interviewed stated that workers in the private sector in their area do not receive paid sick leaves if they are infected with the virus; Where their salaries are cut during the quarantine period; Moreover, family members or contacts are not granted any paid sick leave. 10% (147 persons) reported that workers in the private sector within their vicinity get paid sick leave if they are infected with the virus, whereas their family members or contacts are not granted any paid sick leave. 5% (72 persons) reported that workers in the private sector in their area receive paid sick leaves if they are infected with the virus; In addition, family members are also granted paid sick leaves, while contacts are not granted any paid sick leave. 4% (59 persons) reported that workers in the private sector in their area get paid sick leaves if they are infected with the virus, as well as their family members and contacts.
- The service sectors of the de facto authorities:** 77% (1,138 persons) of the persons interviewed reported that workers in the service sectors of the de facto authorities in their area receive paid sick leaves if they are infected with the virus; While their family members or contacts are not granted any paid sick leave; 18% (266 persons) reported that workers in the service sectors within their surroundings get paid sick leaves if they are infected with the virus; Their family members are also granted paid sick leaves, while contacts are not granted any paid sick leave. 5% (74 persons) reported that workers in the service sectors within their surroundings get paid sick leave if they are infected with the virus, as well as their family members and contacts.
- The humanitarian organizations:** 60% (887 persons) of the persons interviewed reported that workers of humanitarian organizations within their vicinity take paid sick leaves if they are infected with the virus; Whereas their family members or contacts are not granted any paid sick leave. 30% (444 persons) reported that workers of humanitarian organizations within their vicinity receive paid sick leaves if they are infected with the virus; Their family members are also granted paid sick leaves, while their contacts are not granted any paid sick leaves; 10% (148 persons) reported that workers of humanitarian organizations within their vicinity get paid sick leaves if they are infected with the virus, as well as their family members and contacts.

Figure 41: Number / percentage of persons who were surveyed according to their opinions about granting the infected person and his contacts a paid leave



Precautionary measures require that the person infected with COVID-19 be subject to quarantine until recovering from the virus; Additionally, family members of the infected person and those in contact with the patient must quarantine themselves for a period of 15 days to avoid transmitting the infection, as medical reports confirm that some persons infected with the virus may not show any symptoms despite the presence of the virus in their bodies; Hence, they may transmit the virus to others without showing any symptoms of infection, consequently, the infected person, his family members, and those in contact with him must be granted a paid sick leave; the local authorities must ensure that those infected with the virus and contacts should be granted paid sick leaves from all public and private sectors. Most of the countries, owners of companies and factories, must pay part of the salaries of the workers, that is not less than 50% of the value of the salary, in the event of implementing a full lockdown as a measure to limit the spread of the virus.

Section 05

The Impact of COVID-19 on Education

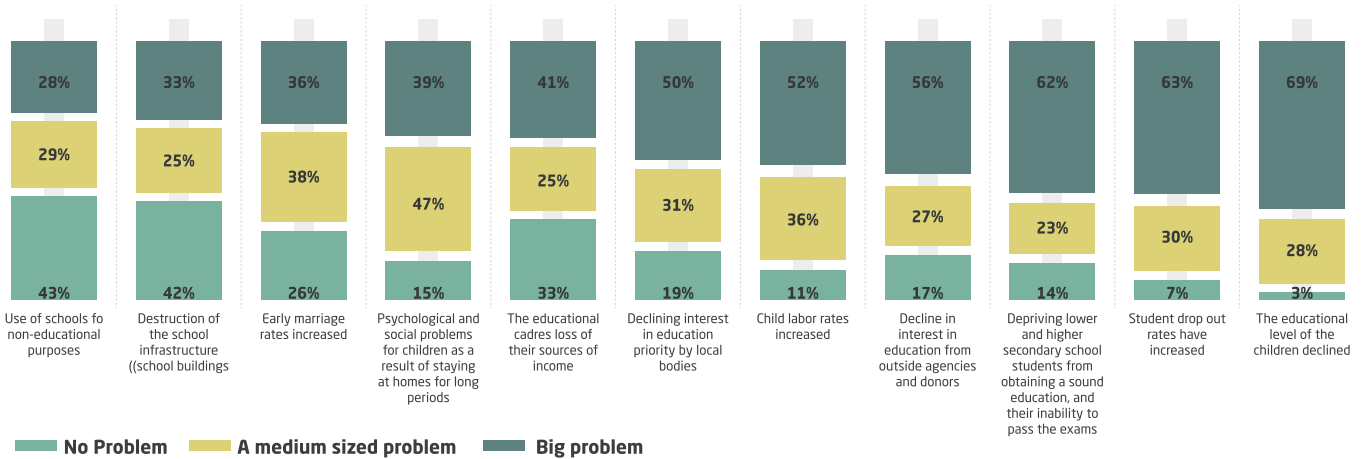


01 The Impact of School Suspension during the Spread of COVID-19

In the study, the persons surveyed were asked about the impact of school suspension as a measure to limit the spread of COVID-19 on the learning process; It is to be noted here that 84% of the surveyed persons support families that contain school age children; the first of the negative effects of school suspension was the decline in the educational level of children; 69% (1,021 persons) of interviewees reported that suspension of school led to a significant decline in the educational level of children; While 28% (409) of the interviewees stated that suspension of school led to an average decline in the educational level of children. The second negative effect is the increase in the rates of school dropouts, in that 63% (934) of the interviewees reported that suspension of schools led to a significant dropout of children; While 30% (438 persons) of the interviewees stated that suspension of schools led to an average dropout of children. The third negative effect of school suspension, comes depriving the lower and higher secondary school students from obtaining sound education and their inability to pass the exams; 62% (924) of the interviewees said that the suspension of schools resulted in the denial of a large portion of the lower and higher secondary school students from obtaining a sound education and in addition to inability to pass the exams; While 23% (343 persons) of the interviewees stated that the suspension of schools led to depriving only some students of the lower and higher secondary school students from obtaining a sound education.

56% (831) of interviewees reported that school suspension led to a significant decline in interest in education by external agencies and donors; While 23% (343 persons) of the interviewees stated that the suspension of schools led to an average decline in interest in education by external agencies and donors.

Figure 42: Percentage of the negative impact of suspending school attendance during the spread of the COVID-19 virus

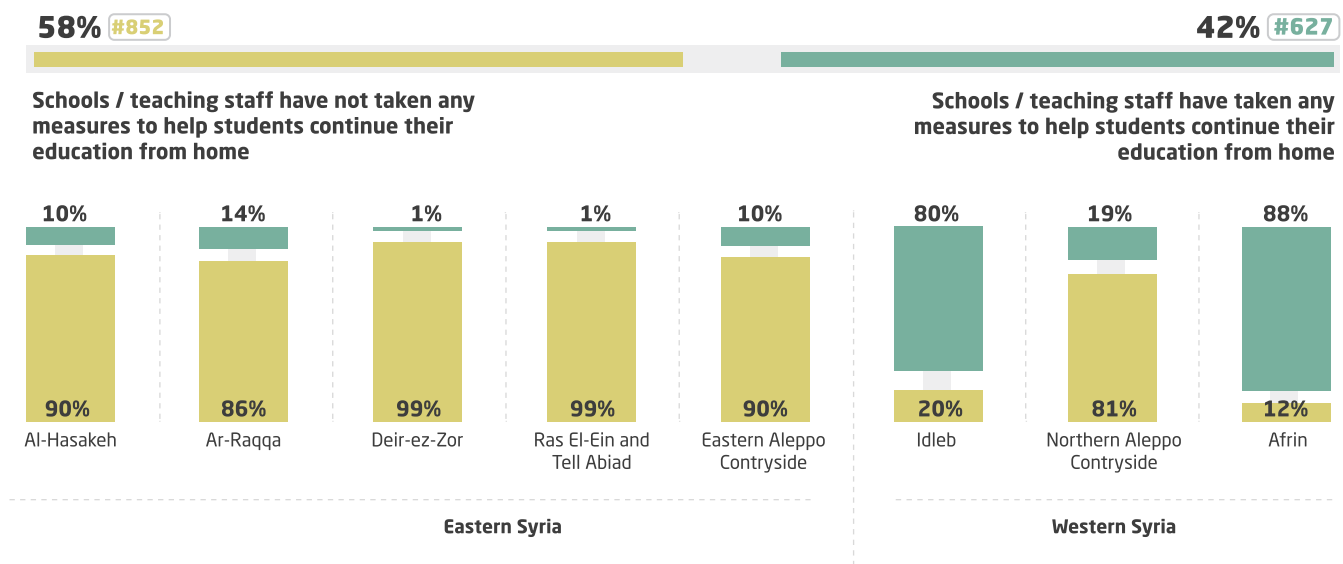


According to the Schools in Syria report issued by ACU; “When conducting the perception surveys, the enumerators asked the teachers about the percentage of their students whose school stages are commensurate with their educational level, and based on the teachers’ answers, an average was calculated for the percentages of students whose educational levels are commensurate with their educational levels; accordingly, it was found, based on the opinions of the teachers that the school stages of only 69% of the total number of students in the schools covered by the assessment, are commensurate to their educational levels.

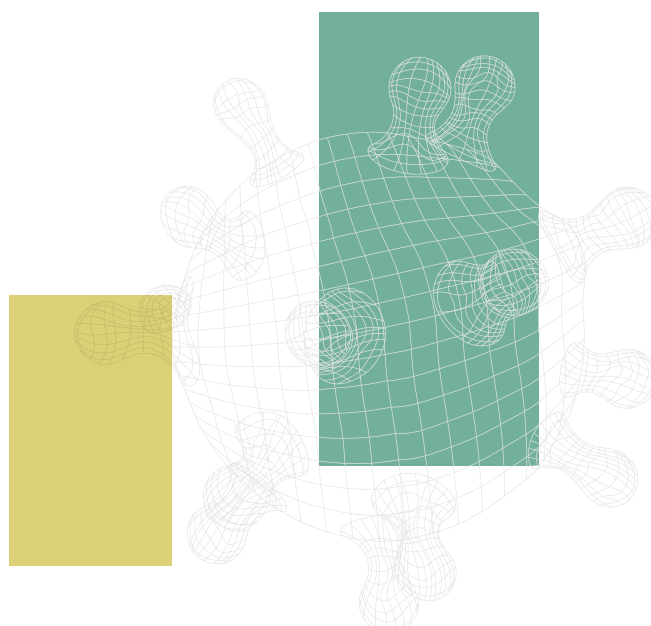
02 Implementing Distance Learning Measures during the Spread of COVID-19

58% (825 persons) of the interviewees reported that schools and teaching staff did not take any measures to help students continue their education from home (distance learning) during school suspensions to limit the spread of the COVID-19, while 42% (627 persons) stated that schools and teaching staff took the necessary measures to help students continue their education from home (distance learning).

Figure 43: Number / percentage of persons who were surveyed according to their views on the implementation of distance learning measures



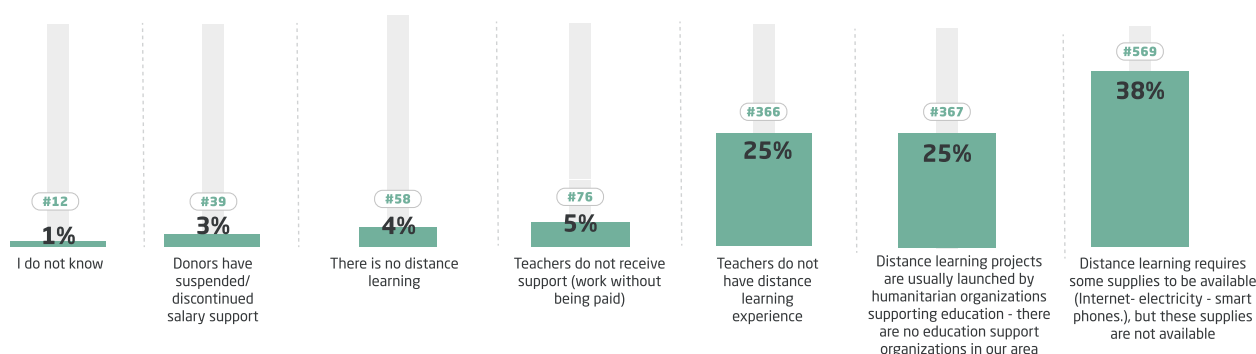
According to the Schools in Syria report issued by ACU; “The study showed that only 23% (761 schools) of schools provide distance learning programs for students who are unable to attend school due to the spread of the COVID-19, while 77% (2,579 schools) of schools do not provide distance learning programs.”



03 Reasons for not Implementing Distance Learning Measures during the Spread of COVID-19

In the study, the interviewees reported that schools and teaching staff did not take any measures to help students continue their education from home (distance learning); Regarding the reason for not taking any measures, from their point of view, 38% (506 persons) think that distance learning requires the availability of some supplies (internet - electricity - smartphones ...) which are not available, and 25% (367 persons) believe that distance learning projects are usually launched by humanitarian organizations that support education, but there are no organizations supporting education in their areas, and 25% (366 persons) believe that teachers do not have experience in distance learning.

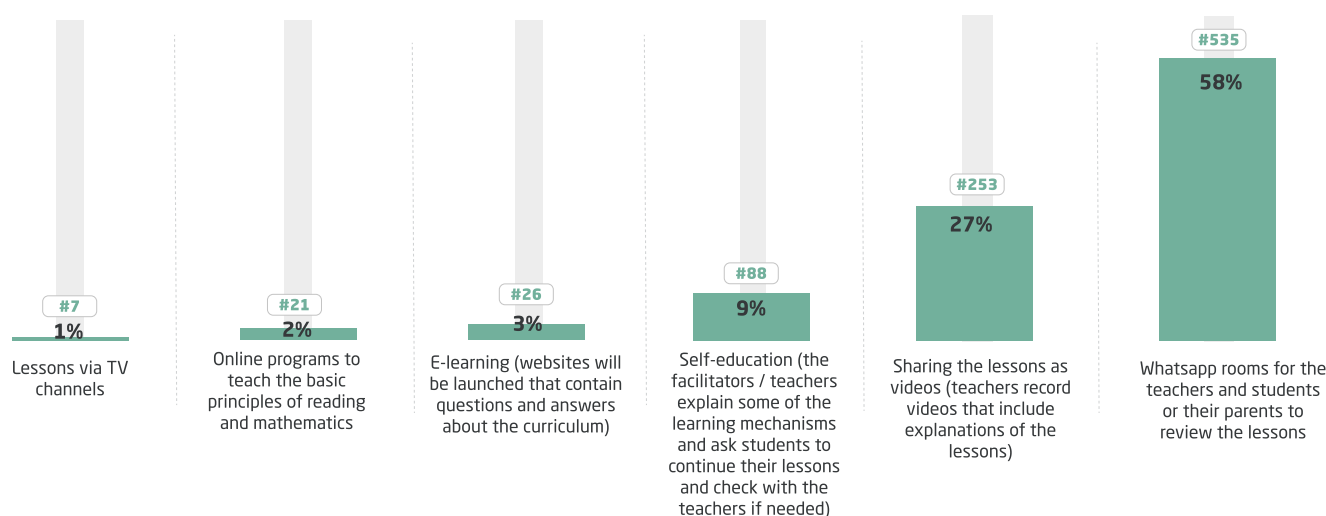
Figure 44: Number / percentage of persons who were surveyed according to their opinions on the reasons for not implementing distance learning measures



04 Distance Learning Mechanisms Applied during the Spread of COVID-19

In the study, the interviewees reported that schools and teaching staff took the necessary measures to help students continue their education from home (distance learning); Concerning the mechanisms followed by schools, 58% (535 persons) reported that schools used WhatsApp rooms that contain students, their parents, and teachers to review the lessons, and 27% (253 persons) reported that schools shared lessons in the form of videos (teachers record videos that include explanations of the lessons); 9% (88 persons) reported that students rely on self-education; Where the facilitators (teachers) explain some of the learning mechanisms and ask students to continue their lessons and return to the facilitators when needed.

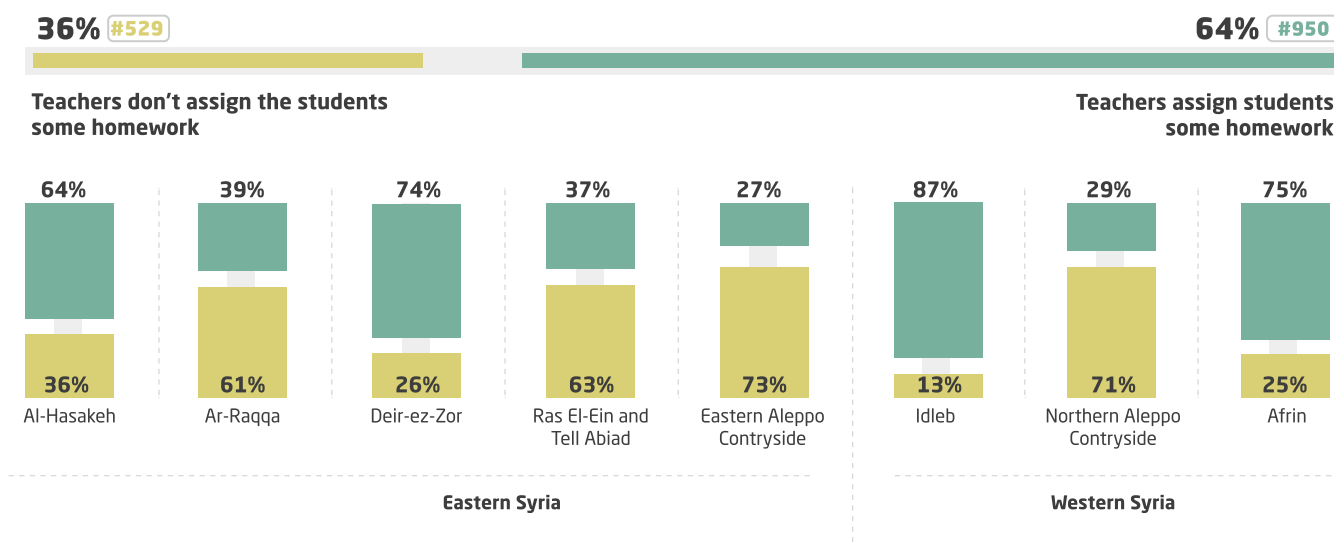
Figure 45: Number / percentage of persons who were surveyed according to the teaching mechanisms used



05 Distance Learning and Homework during the Spread of COVID-19

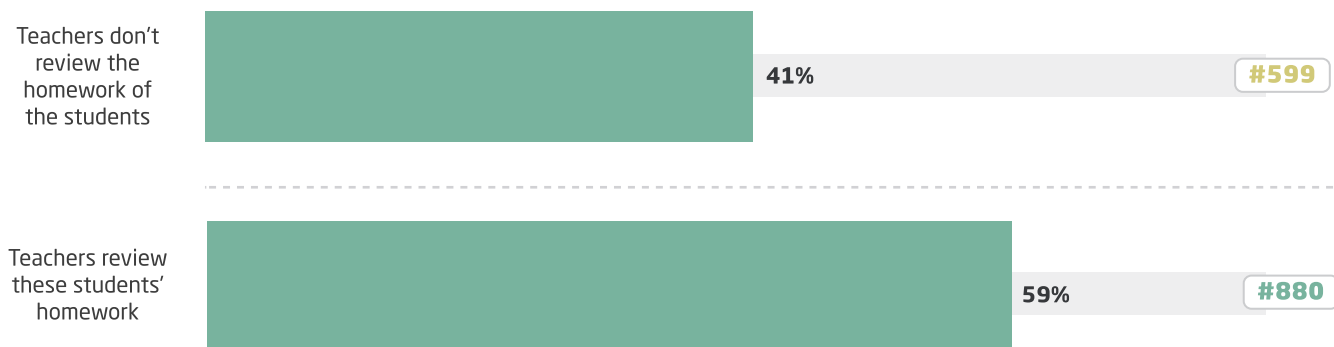
The optimal form of distance learning process requires that teachers assign students some homework at the end of the lesson, once they do their homework, they send them (or send a picture of the homework) to the teacher via WhatsApp or any other approved communication applications. 64% (950 persons) of interviewees reported that teachers assign students some homework; 36% (429 persons) said that teachers do not assign students with homework.

Figure 46: Number / percentage of persons surveyed according to the teachers assigning homework to the students



59% (950 persons) of the interviewees reported that teachers review homework of the students during the distance learning process and send their notes to the students. 41% (599 persons) said that teachers do not review the homework students do.

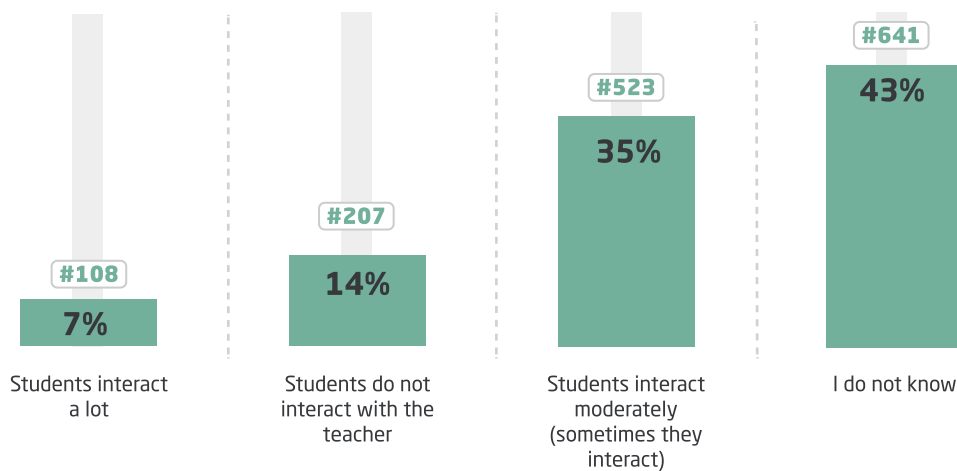
Figure 47: Number / percentage of persons surveyed according to the teachers reviewing students' homework



06 Interaction of Students in Distance Learning during the Spread of COVID-19

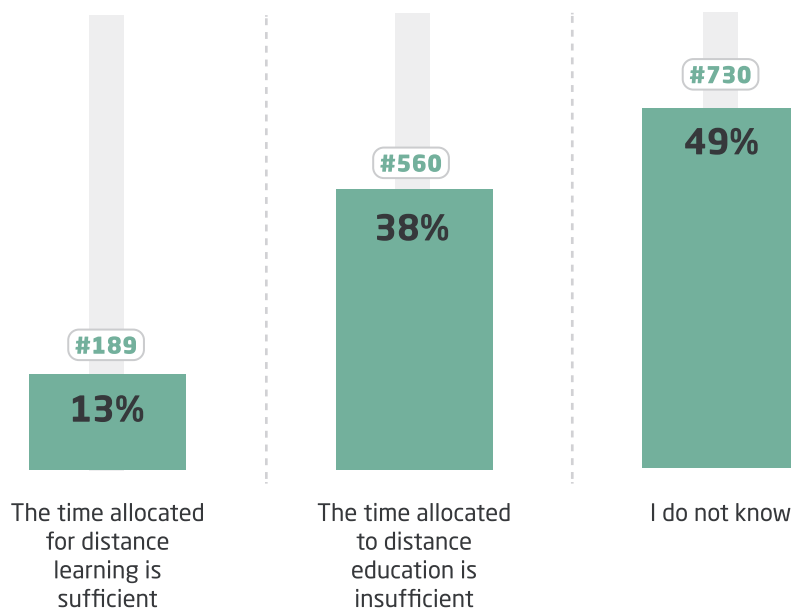
The optimal form of the distance learning process requires students to interact with their teachers during the lessons; Here we see the teacher's skills in distance learning and his choice of methods that attract students' attention and motivate them to participate. In the study, the interviewees were asked about the extent of their children's interaction with their teachers in the distance learning lessons during the suspension of schools to limit the spread of the COVID-19; 43% (641 persons) of the interviewees reported that they did not know the extent of their students' interaction in distance learning lessons; 35% (523 persons) reported that their children's interaction is of a moderate level (sometimes they interact); 14% (207 persons) reported that their children do not interact with the teachers, and only 7% (108 persons) reported that their children interact a lot.

Figure 48: Number / percentage of persons surveyed according to the interaction of their children during the distance learning lessons



49% (730 persons) of the interviewees reported that they did not know whether the time allocated for distance learning lessons was sufficient; whereas 38% (560 persons) reported that the time allocated for distance learning lessons is insufficient; 13% reported (189 persons) said that the time allocated for the lessons of distance learning is sufficient.

Figure 49: Number / percentage of persons who have been surveyed according to the sufficient time allocated for the distance learning lessons

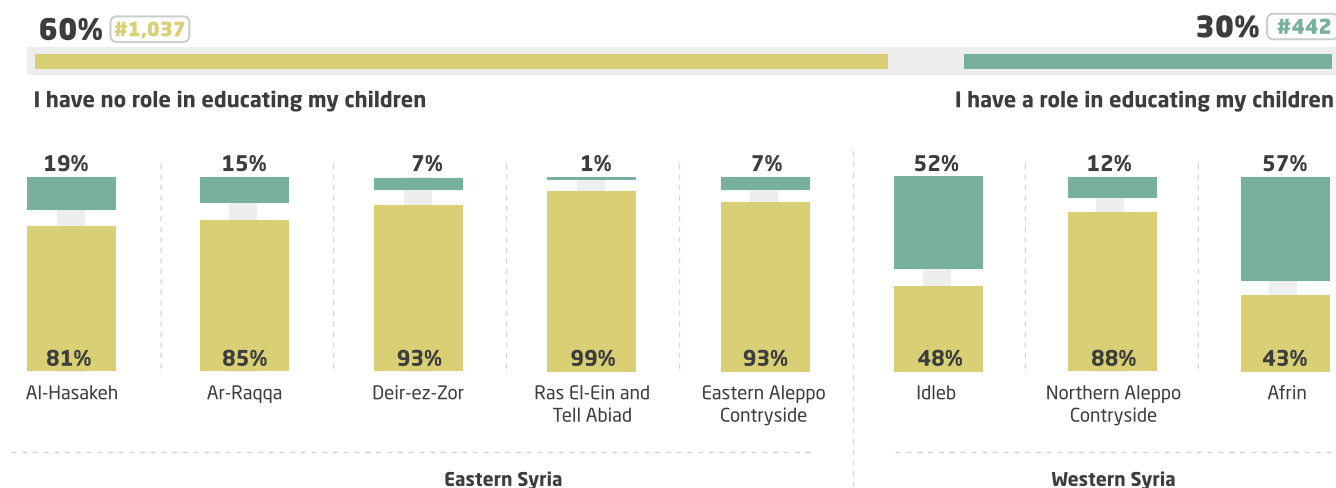


It is noticed that the majority of parents do not know the extent of their children’s interaction with their teachers in distance learning lessons. They also do not know whether the time allocated for distance learning lessons is sufficient, which means that the majority of parents do not follow up on the educational level of their children during the suspension of schools to limit the spread of COVID-19.

07 The Role of Students’ Parents in Distance Learning during the Spread of COVID-19

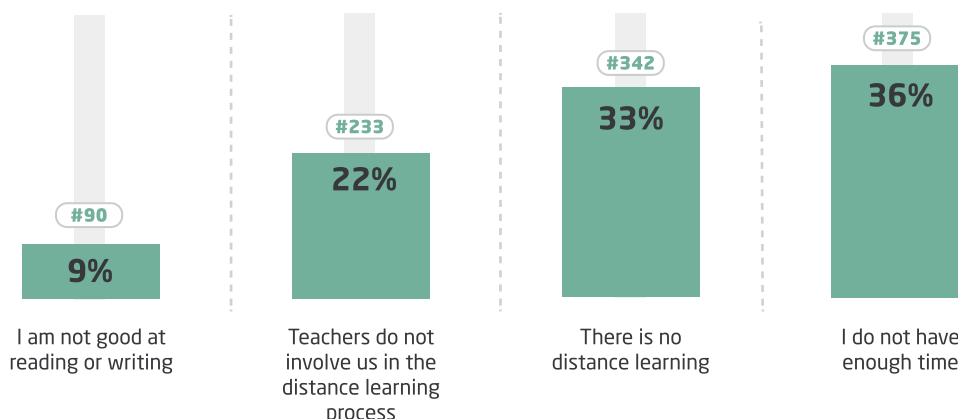
70% (1,037 persons) of the interviewees stated that they do not play any role in the educational process of their children during the implementation of distance learning in the period of school suspension; while 30% (422 persons) said that they follow up on their children’s educational level during the implementation of distance learning in the period school suspension.

Figure 50: Number / percentage of persons surveyed according to their children continuing their education during the suspension of school attendance



In the study, the interviewees stated that they do not play any role in the educational process of their children during the application of distance learning applied in the period school suspension. Concerning the reasons for not following up on their children’s education during the period of school suspension where distance learning is applied, 36% (375 persons) justified by saying that they do not have enough time to follow up on their children’s education; 22% (233 persons) said that teachers do not involve parents in the distance learning process; 9% (90 persons) said that they are illiterate; while 33% (342 persons) reported that there is no distance learning during the school suspension period.

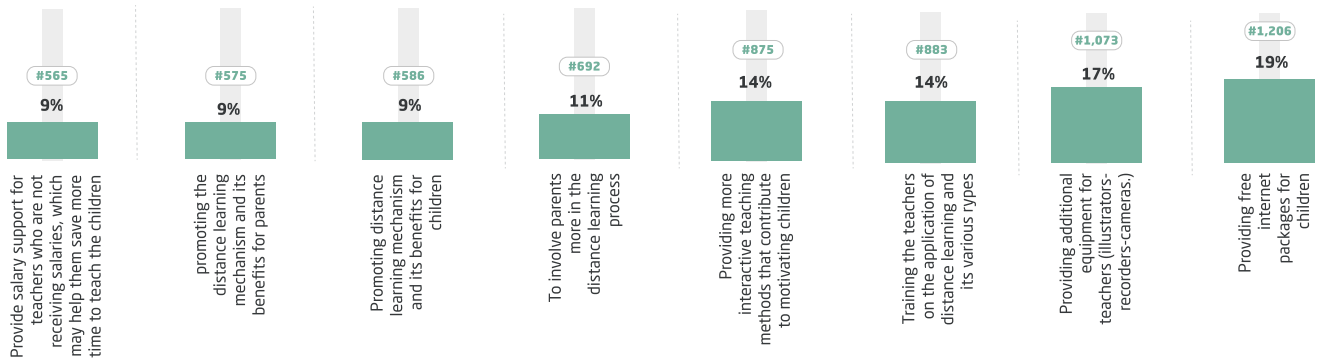
Figure 51: Number / percentage of persons who were surveyed according to what prevents them from having their children continue their education remotely



08 Distance Learning Needs during the Spread of COVID-19

At the top of the distance learning needs comes the provision of free internet packages for students; in that 19% (1,206 persons) of the interviewees stated that students need to be provided with free internet packages due to the inability of their parents to afford the costs of the internet; 17% (1,073 persons) said that it is necessary to provide additional equipment for the teachers such as visual aids, recording devices or cameras in order for the distance learning lessons to be more clear and interactive; 14% (833 persons) reported the need to train teachers on the application of distance learning and its various types.

Figure 52: Number / percentage of persons who were surveyed according to their points of view of distance learning needs



Section 06

Recommendations



Recommendations

- 17% (250 persons) of the persons interviewed stated that the rate of domestic violence has increased after the spread of COVID-19. According to the results of the study, wives (older than 18 years of age) are among the most targeted groups by domestic violence. 95% (1,349) of the persons interviewed stated that there is no organization working to prosecute perpetrators of domestic violence. 21% (315 persons) of the interviewees stated that domestic violence survivors face difficulty in obtaining assistance due to restrictions imposed by the spread of COVID-19. Accordingly, referral pathways mechanisms must be strengthened to provide protection for survivors of domestic violence. **Moreover, work needs to be done with the de facto authorities to develop mechanisms to prosecute the perpetrators of domestic violence crimes and reduce these crimes in accordance with the international laws and mechanisms.**
- 23% (341 persons) of the persons interviewed reported that those suspected of having COVID-19 stay at home (they only quarantine themselves without doing the test; other family members are not quarantined); 14% (204 persons) of the persons interviewed reported that those suspected of having COVID-19 stay at home (they only quarantine themselves and their families without doing the test); 8% (125 persons) of the interviewees reported that those suspected of having COVID-19 only check their situation at a nearby pharmacy.

Work needs to be done to provide clear mechanisms and instructions for those suspected of being infected with COVID-19; It is better to work on providing a hotline and have trained cadres able to reach persons suspected of being infected with the virus in their houses to provide medical services at home wherever possible; It is also necessary to establish adequately equipped isolation centers for the critical cases.

- 81% (1,197 persons) of the persons interviewed stated that workers in the private sector within their surroundings do not receive paid sick leaves if they are infected with the virus, in that their salaries are cut during the quarantine period. There is no mechanism that obliges the private sector employers to pay the wages of their workers in the event that they are absent from work; where the economic conditions in northern Syria are deteriorated and there is no health or social insurance for the workers. **Therefore, humanitarian agencies must provide aid to those infected with the virus, workers in the private sector, and the unemployed as a kind of compensation for the interruption of their sources of income during the period of quarantine. Assistance provided to family members of the person infected with the virus must be sufficient to increase their ability to adhere to the quarantine and not breach it.**
- According to the study, it is found that 4% (66 persons) of the interviewees suffer from a disability; of whom, 22 persons provide for their families despite their disability, and the results show that 91% (251 persons) of the persons who provide for individuals aged between 19-59 years do so because these individuals do not have any source of income. 4% (11 persons) are breadwinners for individuals aged between 19-59 years because these individuals suffer from incurable diseases that prevent them from working. 4% (10 persons) are breadwinners for individuals aged between 19-59 years because these individuals are handicapped.

When asked about the number of working family members, 84% (973 persons) said that one member of the family works, and all the family members depend on the work of this person, which means that the family will lose its source of income in the event that this person stops working, **while families go through financial hardship, this distress may be reflected on the most vulnerable individuals, such as the handicapped, those with chronic diseases, or the elderly; This group of society has special needs that are costly. Therefore, humanitarian organizations must regularly provide for the needs of these groups of society in order to alleviate the burden placed on the family.**

- Based on the study, 30% (442 persons) of the interviewees reported that the decline in household income as a result of the spread of COVID-19 deprived women of access to adequate health services and their basic female needs; 28% (412 persons) reported that the spread of the virus affected women's access to their needs during pregnancy, childbirth and postpartum period, 83% (365 persons) confirmed that humanitarian organizations did not double their response to ensure that women have access to what they need during pregnancy, childbirth, postpartum period, in addition to their basic needs. **Therefore, humanitarian organizations must double their efforts to ensure that women have access to their basic needs in light of the difficult humanitarian conditions that the Syrian society is going through.**
- According to the study, it was found that 22% (324 persons) of those surveyed do not have any sources of income; Looking at the coping mechanisms followed by persons who do not have any source of income, it was found that 47% (271 persons) depend on the aid provided by humanitarian organizations. 21% (121 persons) depend on aid provided by friends and relatives inside Syria. 19% (111 persons) depend on remittances from a family member or relative outside Syria. 53% (1,034) of the persons surveyed reported that aid provided by humanitarian organizations decreased after the spread of COVID-19. 19% (370 persons) reported that family members and relatives outside Syria were no longer able to help after the spread of the virus. Similarly, 17% (336 persons) reported that friends and relatives who are inside Syria became unable to help after the spread of the virus. 23% (347 persons) of the persons who previously owned sources of income, stated that the family lost its source of income after the spread of the virus. 39% (583 persons) reported that the average income had decreased after the spread of the virus, and to cope with the loss or decrease of the average income 45% (697 Households) of the families, whose sources of income have been affected by the spread of COVID-19, resorted to reducing the expenses by dispensing with some basic needs; 25% (383 households) resorted to borrowing money from friends and relatives; whereas 10% (155 households) reduced the number of daily meals. **Therefore, humanitarian organizations must double their efforts to provide more humanitarian support to compensate for the sharp decline or loss in average income. Food aid must be distributed periodically; Furthermore, WASH sector must be greatly supported by providing all its services free of charge to all members of the society.**
- 65% (965 persons) of the interviewees reported an increase in elderly isolation following the spread of the virus; 52% (771 persons) of interviewees reported a high isolation of persons with disabilities; 70% (1,035 persons) of interviewees reported increased isolation for those with chronic diseases. **Accordingly, work must be done to secure vaccines for these groups of society as soon as possible. Work must also be done to reintegrate them into society through psychosocial support services and to urgent provision of their basic needs.**
- On top of the negative effects of the suspension of school attendance comes the decrease of children's educational level. School's high dropout rates of children ranked second. In the third place comes the fact that the lower and higher secondary school students are denied access to a sound education and are unable to pass the exams. Moreover, Interest in education from external agencies and donors has decreased dramatically, the thing which has led to a decline in the support provided. 58% (825 persons) of the persons surveyed stated that schools and teaching staff did not take any measures to help students continue their education from home (distance learning) during school suspensions imposed to limit the spread of COVID-19, and 38% (506 persons) think that distance learning requires the availability of some supplies (internet - electricity - smartphones ...) which are not available. At the forefront of distance learning needs comes the provision of free internet packages for students. **Based on all this, work must be done to enable the community to provide distance learning supplies to students, given that the current circumstances have imposed this methodology in education on all countries of the world.**

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COVID-19

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