



Overall objective:

To enable effective humanitarian planning in line with the intentions of internally displaced persons (IDPs) living in IDP camps across Iraq.

Camp Profiling Research Questions:

- 1. What is the displacement profile of IDP households?
- 2. What is the average household demographic profile? (Number of members, age of members, sex of head of household, time since first displacement)
- 3. What are the protection needs and vulnerabilities amongst IDP households?
- 4. What are the multisectoral needs and living conditions of IDPs households?
- 5. What is the level of access to services?





27 formal IDP camps assessed

2,374 IDP HHs (between 60-100 HHs in each camp)

27 Key informant (KI) interviews (one in each camp)

Data collection: between 16 June – 4 August 2021

Sampling:

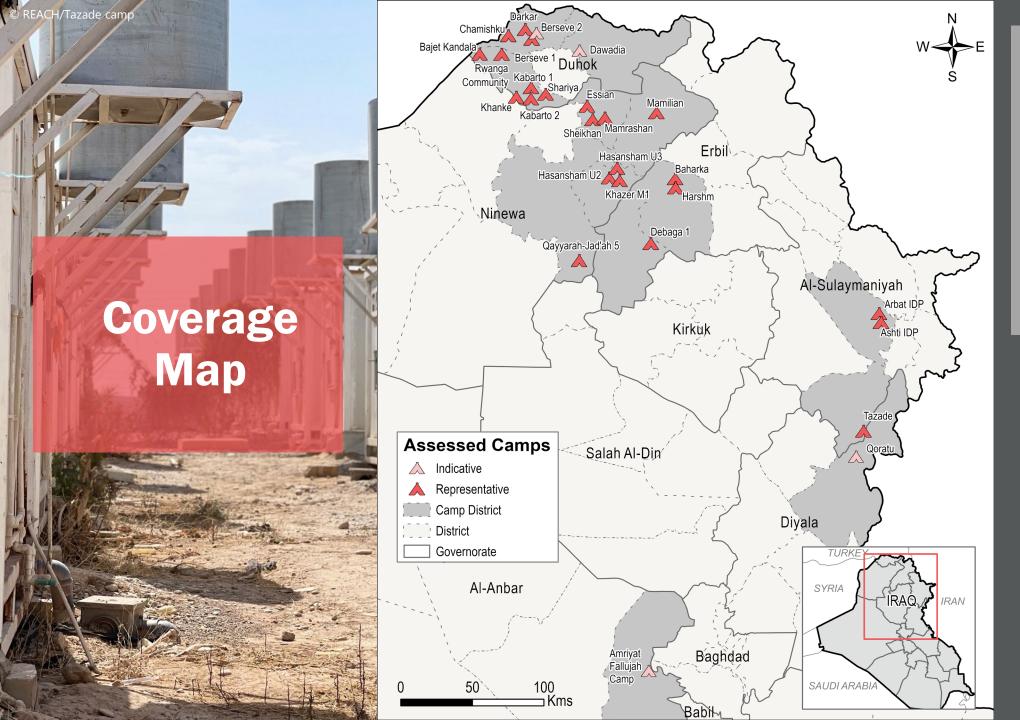
Face-to-face Surveys	Phone-based Surveys
Accessible camps	Safety concerns and/or movement restrictions
23 camps Findings representative with 95% confidence level and 10% margin of error	4 camps: Amriyat Al-Fallujah (AAF) Berseve 2 Mamilian Qoratu Findings should be considered indicative.

Contact lists provided by IOM and UNHCR, snowballing

Mixed methodology: findings at the camp level where were conducted face-to-face interviews are representative.

N.B.: all findings are related to the perception of HHs.





When showing findings at the governorate level we refer to the administering governorate, which sometimes differs from governorates' boundaries.

This is the case for Duhok and Erbil governorates, administering IDP camps within Ninewa's boundaries; and Sulaymaniyah, administering Qoratu which is within Diyala's boundaries.









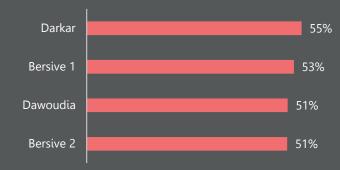


The highest proportion of IDP HHs with reported HH members with a chronic disease or disability level 3 were located in Duhok

 IDP camps with the highest reported proportion of IDP HHs with at least one member with a disability level 3:1,2



• IDP camps with the highest reported proportion of IDP HHs with at least one member with a chronic disease:



¹ The disability level was calculated using the <u>Washington Group on Statistics (WGS) methodology</u>. Disability level 3 as per Washington Group guidance, includes individuals that had "lots of difficulty" or "could not do at all" one of the following activities: seeing, hearing, walking/climbing steps, remembering / concentrating, self care, communicating.





The highest proportion of female heads of household (HoHH) were located in IDP camps in East Mosul and Ninewa

IDP camps with the highest reported proportion of female HoHH:







Acceptable FCS have reportedly worsened from previous rounds

IDP camps' acceptable FCS trends from previous rounds:

	Round XII (2019)	Round XIV (2020)	Round XV (2021)
Overall	93%	99%	88%

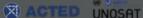
IDP camps with the reportedly lowest proportion of HHs with acceptable FCS:

Camp Name	Acceptable	Borderline	Poor
Khazer M1	68%	26%	5%
Hasansham U3	74%	24%	2%
Qayyarah Jadah 5	76%	15%	9%
Hasansham U2	79%	20%	1%
Harshm	82%	14%	4%
Baharka	82%	17%	1%
AAF	83%	18%	0%

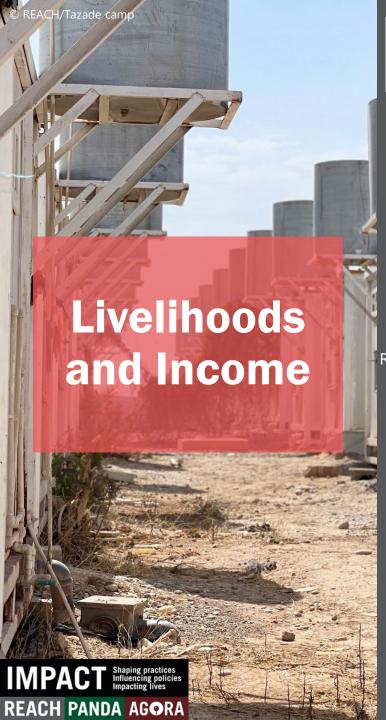
Same IDP camps' acceptable FCS trend from previous rounds:

Camp Name	Round XII (2019)	Round XIV (2020)	Round XV (2021)
Khazer M1	93%	100%	68%
Hasansham U3	87%	100%	74%
Qayyarah Jadah 5	87%	100%	76%
Hasansham U2	90%	100%	79%
Harshm	100%	100%	82%
Baharka	94%	100%	82%
AAF	99%	100%	83%

- suggest food security has worsened in Iraq due to multiple factors:
 - Economic effects/movement restrictions from COVID-19
 - Water scarcity one of driest years in the past 40 years
 - Devaluation of the dinar.
- Overall, 10% of HHs reported that in the past 30 days they had no food to eat due to the lack of resources to get food.
 - IDP camps with the highest proportion of IDP HHs reporting this were AAF (48%) and Bersive 2 (29%).

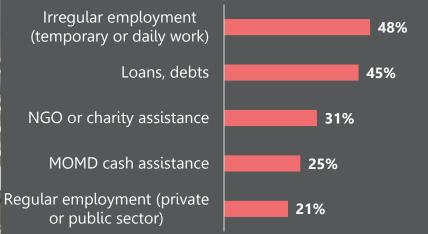






Irregular employment, debt and humanitarian or MOMD² assistance are reportedly the primary sources of income

Most commonly reported primary income sources:*



3 camps with the lowest average income per month, as reported by HHs:

Camp nameIQDKhazer M1121,902Hasansham U2111,670Hasansham U374,785

- Most of IDP HHs do not have regular employment and depend on seasonal or daily work (48%), debt (45%), and humanitarian (31%) or MOMD assistance (25%).
- The IDP Camps with the lowest proportion of IDP HHs reporting receiving income from employment (both regular or irregular employment): Hasansham U2 and U3, and Khazer M1.
 - Regular employment: Khazer M1 (7%), Hasansham U2 (6%) and U3 (1%); irregular employment: Khazer M1 (25%), Hasansham U2 (20%) and U3 (19%).
 - These camps also have the highest proportion of female HoHH and the highest reported movement restrictions to move in and out the camp.³
- ² Ministry of Migration and Displacement (MOMD), Iraqi government.
- ³ International Organization for Migration (IOM). <u>Perceptions on women's economic opportunities in</u> urban areas of Iraq: motivations and mechanisms to overcome barriers. June 2019.
- * Question allowed multiple choices, hence the sum exceeds 100%





12 KIs in 12 IDP camps reported WASH related issues

- Six KIs reported waste collection services to be insufficient
- Three KIs reported the water quantity and tank capacity was insufficient for the IDP households' needs

Camp name	Water quantity and tank capacity insufficient	Waste collection services are not enough	WASH facilities needing maintenance	Improve WASH infrastructure and septic tanks	HHs low hygiene awareness	Problem with WASH services provider
Khanke	1	0	0	0	0	0
Kabarto 1	0	1	0	0	0	0
Kabarto 2	1	1	0	0	0	0
Bajed kandala	0	0	1	0	0	0
Rwanga Community	0	1	0	0	0	0
Chamishku	0	1	0	0	0	0
Bersive 1	0	1	0	1	0	0
Darkar	1	0	0	0	0	0
Arbat IDP	0	0	0	0	1	0
Ashti IDP	0	0	0	0	1	0
Qoratu	0	0	0	0	0	1
AAF	0	1	0	0	0	0
Total	3	6	1	1	2	1





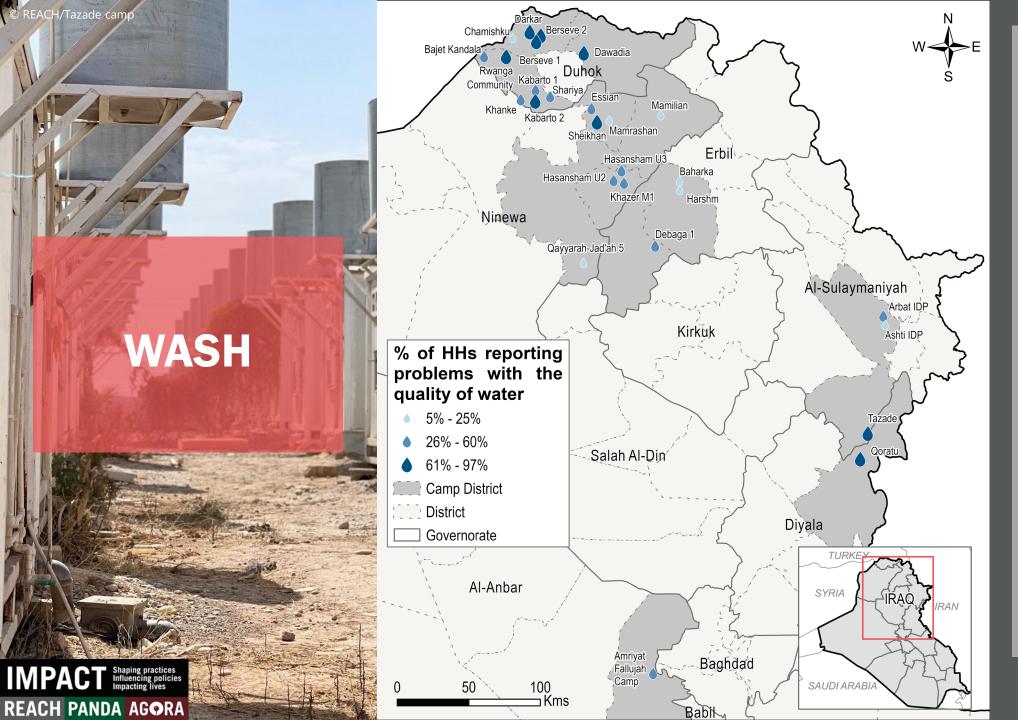
Some IDP camps were reported to have problems with the quality of water. Karbato 2 was reportedly the IDP camp with the most water access issues

• Overall, 44% of IDP HHs reported problems with the quality of water. The IDP camps with the highest proportion of HHs reporting issues with the quality of water were:



- The main reported issues with the water quality were related to its **bad taste and/or the water being not clear.**
- Four IDP **HHs in Karbato 2** reported that they had to **collect their drinking water from Karbato 1**.
- The problem with water scarcity was confirmed by the KI in Karbato 2 and the field team observations during data collection.



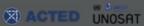


Our field team observed that IDP HHs in the same camp could report differences in the quality of the water due to the shelter location and the elevation of the camp. In some cases the steepness of the terrain was reported to be a factor, negatively affecting the water quality provided to the shelters located in the lower side.

Other factors contributing to this might be the water scarcity which has been severe in 2021.

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Water scarcity was reportedly higher for personal hygiene and domestic needs

- IDP camps with higher proportion of IDP HHs reporting water scarcity for different purposes were **Karbato 1 and 2, Rwanga Community, Ashti IDP, and Darkar.**
- Overall, the majority of IDP HHs had enough water for drinking (96%), cooking (94%), personal hygiene (75%) and other domestic purposes (69%).
- IDP camps with the highest proportion of IDP HHs reporting insufficient water for different purposes:⁴

Cookin	g	Drinkin	g	Hygiene		Other domest	ic needs
Kabarto 1	15 %	Darkar	14%	Kabarto 1	57%	Kabarto 1	73%
Ashti IDP	11%	Bajed Kandala	12%	Rwanga Community	49%	Rwanga Community	60%
Darkar	11%	Rwanga Community	11%	Kabarto 2	46%	Kabarto 2	59%
Rwanga Community	10%	Ashti IDP	10%	Ashti IDP	45%	Bajed Kandala	45%
Kabarto 2	10%	Sheikhan	10%	Arbat IDP	40%	Arbat IDP	44%
Bajed Kandala	<mark>9</mark> %	Bersive 1	<mark>8</mark> %	Bajed Kandala	39%	Darkar	44%



⁴ IDP HHs were asked different questions for each type of water use: cooking, drinking, personal hygiene, and other domestic needs (i.e.: house cleaning).

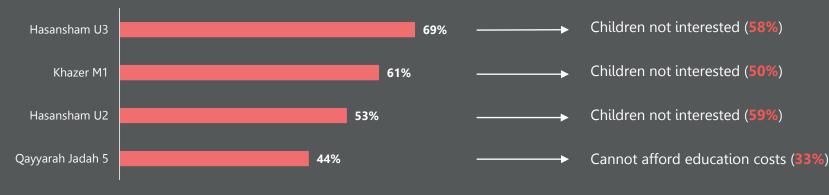


IDP children in camps reportedly still face barriers to access education, especially girls and children between 12-17

• Overall, 83% of children were reportedly enrolled in school and attending at least 4 days a week.⁶

IDP camps with the lowest reported proportion of children attending formal education:

Most commonly reported reason for children not attending school:**



IDP camps with the largest reported gap between boys and girls enrolled at school:

Camp name	Boys	Girls
Qoratu	89%	67%
Qayyarah Jadah 5	53%	35%
Tazade	83%	67%

IDP camps with the largest reported gap between children of 6-11 and 12-17 years old enrolled at school:

Camp name	∱ 6-11 years old	12-17 years old		
Hasansham U3	83%	48%		
Mamilian	83%	53%		
Hasansham U2	66%	38%		
Arbat IDP	88%	60%		



⁶ 83% of the 5,059 children of schooling age from our dataset.

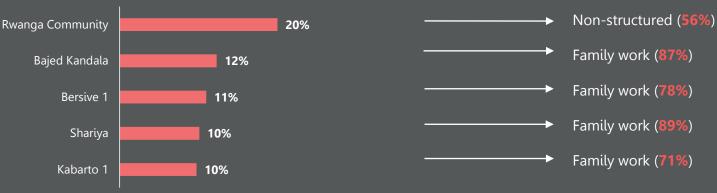
^{**} This is a subset of HHs reporting that at least one of their children did not attend formal education. Due to a fewer number of responses, subsets should be considered as indicative.



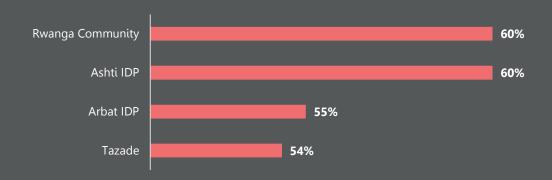
Children's education was at higher risk when HHs could not afford food, per HH's reports

IDP camps with the highest proportion of IDP HHs reporting their children had to work to afford food:

Most commonly reported type of work:**



IDP camps with the highest proportion of IDP HHs reporting that their children had to drop out of school to afford food:





^{*} Question allowed multiple choices, hence the sum of it exceeds 100%.

^{**} This is a subset of HHs reporting that their children work. Due to a fewer number of responses, subsets should be considered indicative.



IDP HHs in Hasansham U2 and U3 most often reported missing some type of civil documentation

- Possibly related to higher movement restrictions
- Overall, 28% of IDP HHs reported missing at least one civil document
- The IDP camps with the largest proportion of IDP HHs reporting missing civil documentation were:*

Camp name	Missing at least one civ doc	Adult ID	Adult Nationality card	Child ID	Child nationality card	Child birth certificate	PDS card
Hasansham U2	39%	4%	5%	14%	36%	6%	10%
Hasansham U3	38%	11%	9%	15%	33%	10%	6%
Shariya	37%	0%	5%	1%	17%	29%	2%
Kabarto 2	36%	1%	12%	4%	28%	20%	3%

Overall, the most commonly reported reasons civil documents were missing were:

- Having not tried to obtain or renew them (41%)
- The cost of obtaining or renewing is too high (22%)
- Documents are not needed under local regulations (16%)
 - In Shariya camp, of the IDP HHs reporting missing civil documentation, 41% reported that it was because of local regulations that they did not need them.



^{*} Question allowed multiple choices, hence the sum of it exceeds 100%.



IDP HHs in IDP camps in East Mosul, and AAF had more movement restrictions compared to other locations

- In terms of movement restrictions to move in and out of the camp, 12% of IDP HHs reported experiencing movement restrictions.
- Movement restrictions were proportionally much higher in camps in East Mosul and AAF:

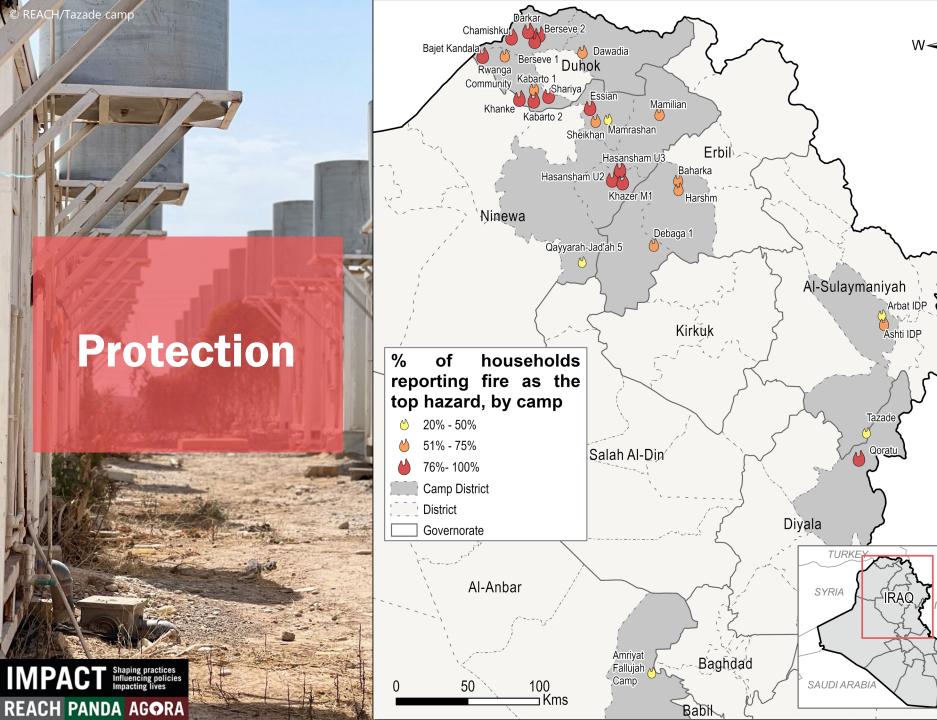


The reported reasons for movement restrictions experienced by HHs were the following:*

Camp name	Needing to obtain security clearance	Needing to provide a specific reason for movement	Needing to show ID to authorities or security actors	Time restrictions on when to leave and return	Physical road blocks	Other
AAF	33%	35%	43%	38%	26%	16%
Hasansham U2	75%	74%	68%	53%	33%	0%
Hasansham U3	84%	74%	61%	52%	32%	0%
Khazer M1	45%	42%	41%	32%	28%	0%

* Question allowed multiple choices, hence the sum of it exceeds 100%.

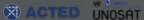




Fires within the camps are relatively common and explain IDP HHs concerns. Since the <u>approval from the</u> government to substitute the tents in Duhok with shelters made from permanent materials, these concerns could decrease in the future.

IDP HHs' reported safety concerns on the camps' infrastructure were higher in Hasansham U2 (40%), Shariya (30%) and Khazer M1 (28%). Reported safety concerns on the risk of flooding were higher in AAF (**36%**), Karbato 2 (**25%**), and Karbato 1 (24%).

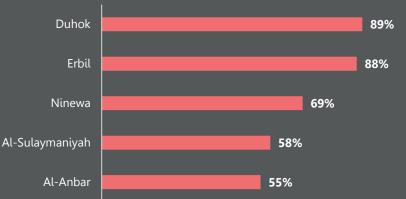






The major barrier that IDPs reported to access healthcare was healthcare costs

- IDP HHs in camps administered by Sulaymaniyah governorate reported more often than other IDP HHs that the treatment centre was too far (25%).
- The governorates where more often IDP HHs reported having issues to access healthcare were:**



Overall, the most commonly reported barriers to access healthcare were: healthcare costs (83%), the treatment centre being too far (18%), and medicines being unavailable (9%).*

Most of IDP HHs reported short distances to their nearest primary clinic since most of the camps have a clinic, with the exception of Harshm, Baharka, Tazade and Qoratu. The KIs from Qoratu and Tazade highlighted the need for medical services in the camp.



^{*} Question allowed multiple choices, hence the sum of it exceeds 100%.

^{**} This is a subset of HHs reporting they had accessed healthcare in the previous 30 days. Due to the less number of responses, subsets should be considered indicative.



Lack of services and medical staff was a commonly reported issue by 14 KIs

- Most commonly reported healthcare issues:
 - Lack of childbirth services
 - Lack of medicines
 - Lack of medical staff (specialised or not)
 - In Arbat IDP, the KI reported that there were no ambulance services

Camp Name	Lack of special treatments for chronic disease	Lack of childbirth services	Lack of medicines	Lack of medical equipment	Lack of specialised medical staff, and other medical staff	Unavailable	other
Khanke	1	1	0	0	0	0	0
Dawoudia	0	0	1	0	0	0	0
Kabarto 1	0	0	1	1	1	0	0
Kabarto 2	0	1	0	1	0	0	0
Shariya	0	1	0	0	0	0	0
Bajed Kandala	0	0	0	0	1	0	0
Rwanga Community	0	0	0	0	0	0	1
Chamishku	0	1	0	0	1	0	0
Darkar	0	0	1	0	1	0	0
Arbat IDP	0	0	0	0	0	0	1
Tazade	0	0	0	0	0	1	0
Qoratu	0	0	0	0	0	1	0
AAF	0	0	0	0	0	0	1
Bersive 2	0	0	1	0	0	0	0
Total	1	4	4	2	4	2	3







The IDP HHs reporting more often shelter or enclosure issues were located in IDP camps in East Mosul and in Duhok

- Overall, 72% of IDP HHs reported needing improvements to their shelter.
- Of the IDP camps with the highest proportion of IDP HHs reporting the need to improve their shelter, the most commonly reported improvements needed were:* **

Camp name	Needing to improve shelter	Protection from climate	Improve privacy	Improve safety	Protection from hazards
Khazer M1	92%	68%	54%	21%	9%
Hasansham U2	89%	57%	45%	27%	8%
Essian	88%	60%	55%	24%	11%
Hasansham U3	87%	57%	42%	26%	8%
Kabarto 2	86%	36%	33%	8%	44%
Kabarto 1	85%	46%	31%	5%	26%
Shariya	85%	49%	30%	1%	46%
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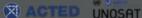
- Overall, 62% of IDP HHs reported having shelter enclosure issues.
- Of the IDP camps with the highest proportion of IDP HHs reporting shelter enclosure issues, the most commonly reported issues were:* **

Camp name	Reporting enclosure issues			
Hasansham U3	86%			
Khazer M1	85%			
Hasansham U2	84%			
Essian	82%			
AAF	81%			

Limited ventilation	Leaks with light rain		Lack of insulation
58%	61%	26%	12%
51%	52%	21%	22%
59%	55%	17%	17%
51%	63%	9%	28%
23%	45%	10%	51%

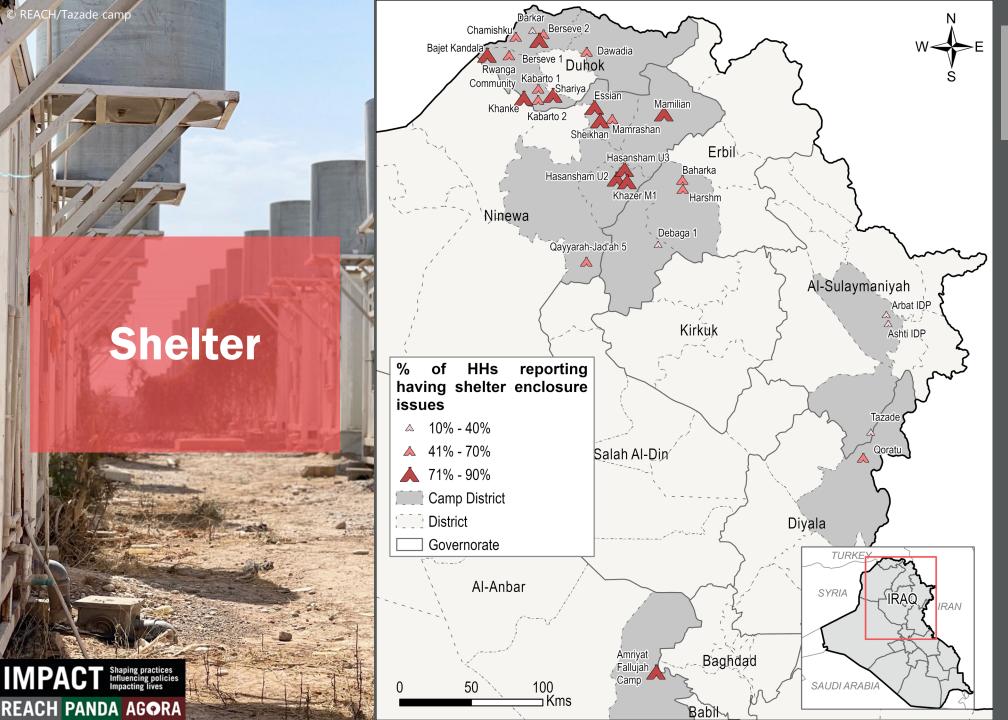
^{*} Question allowed multiple choices, hence the sum of it exceeds 100%.







^{**} These are not subsets. Question allowed multiple choice with one of the choices being "No issues" or "No improvement needed". Hence, % are representative at the camp level.



IDP camps with the highest proportion of IDP HHs reporting enclosure issues were located in East Mosul, Duhok, and Anbar.





According to IDP HHs' reports, some indicators have deteriorated from other rounds, such as FCS and WASH services in general.

IDP HHs and KIs reports indicated that, compared to other camps and sectors in this round:

- Compared to other camps, IDP HHs in East Mosul camps tended to present worse indicators in most sectors such as education, protection, livelihoods, health services, and shelter.
 - The main driving factors for the situation of IDPs in East Mosul camps seem to be related to the movement restrictions in these camps, as well as the high proportion of female HoHH who face more barriers to find any type of employment.
- 2. IDP HHs in Duhok camps tended to present worse indicators related to WASH services, shelter, healthcare services, and child protection.⁷
- 3. IDP HHs in Sulaymaniyah camps tended to have worse indicators in WASH and education.⁸
- 4. IDP HHs in Qayyarah Jeddah 5 reported worse indicators in education, healthcare services, and livelihoods.
- 5. IDP HHs in AAF tended to report worse indicators in livelihoods, protection, and shelter.



⁷ Some IDP camps are outside the mentioned governorate boundaries, in Ninewa. However they are administered by Duhok; hence, the administering governorate is mentioned.

⁸ Qoratu is outside the mentioned governorate boundaries, in Diyala. However they are administered by Sulaymaniyah; hence, the administering governorate is mentioned

