



Multi-Cluster Needs Assessment (MCNA) IX

Anbar General Coordination Meeting



Multi-Cluster Needs Assessment (MCNA) in Iraq

MCNA Objective

To serve as a comprehensive **evidence base for humanitarian actors on the type, severity, variance and development of sectoral and multi-sectoral household needs.**

To inform strategic planning within the Humanitarian Planning Cycle by serving as the **main data source for the Humanitarian Needs Overview (HNO)** and inter-sectoral People in Need (PiN) and severity calculations.

MCNA Framework

Conducted in close coordination with the Assessment Working Group (AWG), United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA), and the Inter-Cluster Coordination Group (ICCG).

In 2021, the MCNA was conducted for the ninth time in Iraq. Globally, REACH conducted Multi-Sector Needs Assessments in 17 humanitarian crises in 2021, allowing a global community of practice and informing more effective humanitarian action.



Outline

1. MCNA IX Methodology & Background
2. Sectoral Findings
3. Cross-Cutting Vulnerabilities
4. Concluding Notes & Questions



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METHODOLOGY & BACKGROUND

DATA COLLECTION METHODOLOGY

In-person surveys with randomly selected households about their (cross-) sectoral needs, vulnerabilities and intentions

- MCNA IX data is **statistically representative at district and camp level**

Two-staged stratified cluster sampling approach

- ➔ 90% level of confidence (10% margin of error) for IDP out of camp and returnee households
- ➔ 95% level of confidence (5% margin of error) for IDP in camp households

- Few exceptions resulting in **indicative data** for 4 camps and one district

AAF, Qurato, Dawoudia, and Berseve 2 camps > sampled remotely through non-probability quota sampling

Al Risafa district > surveyed in-person, but non-random household selection

For further details, please review the [Terms of Reference](#)

SCOPE & COVERAGE

- Data collected between June and August 2021

- **11,645 household surveys**

2,373 IDP in camp households

5,657 IDP out of camp households

3,615 returnee households

- **64 districts** in 17 governorates

Districts with at least 200 IDP or returnee households, according to [IOM-DTM Master List](#) (April 2021)

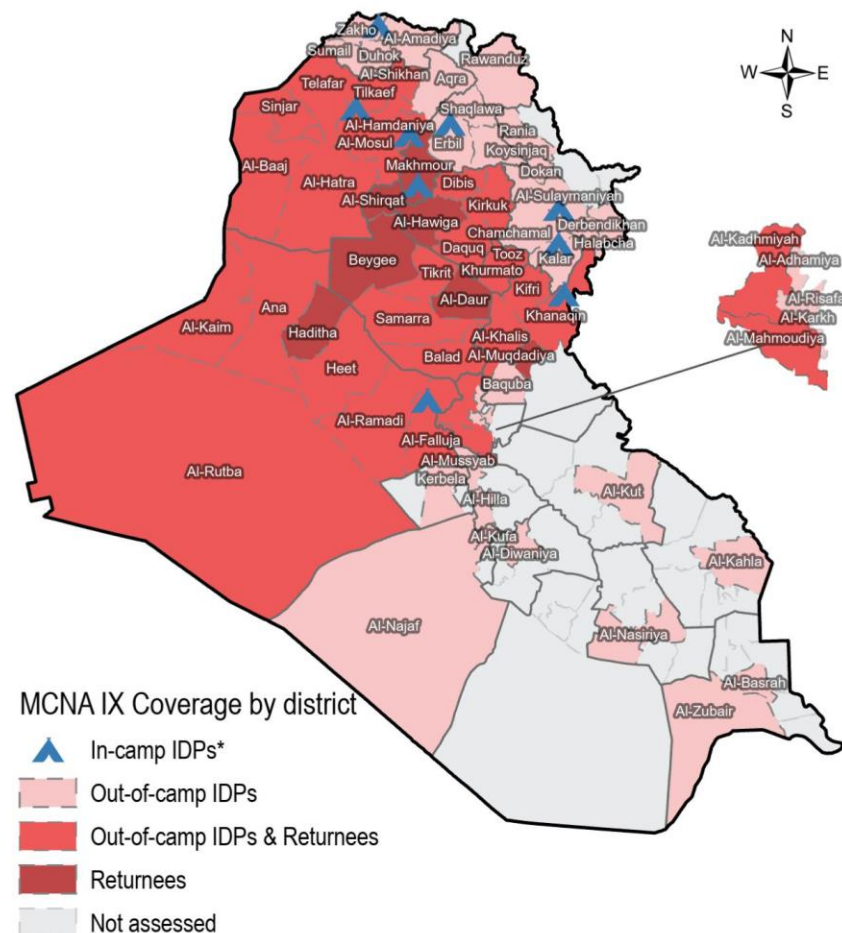
- **27 IDP camps** in 9 governorates

- **Gender** in the MCNA IX

28% of surveys answered by female respondents

33% of surveys conducted by female enumerators

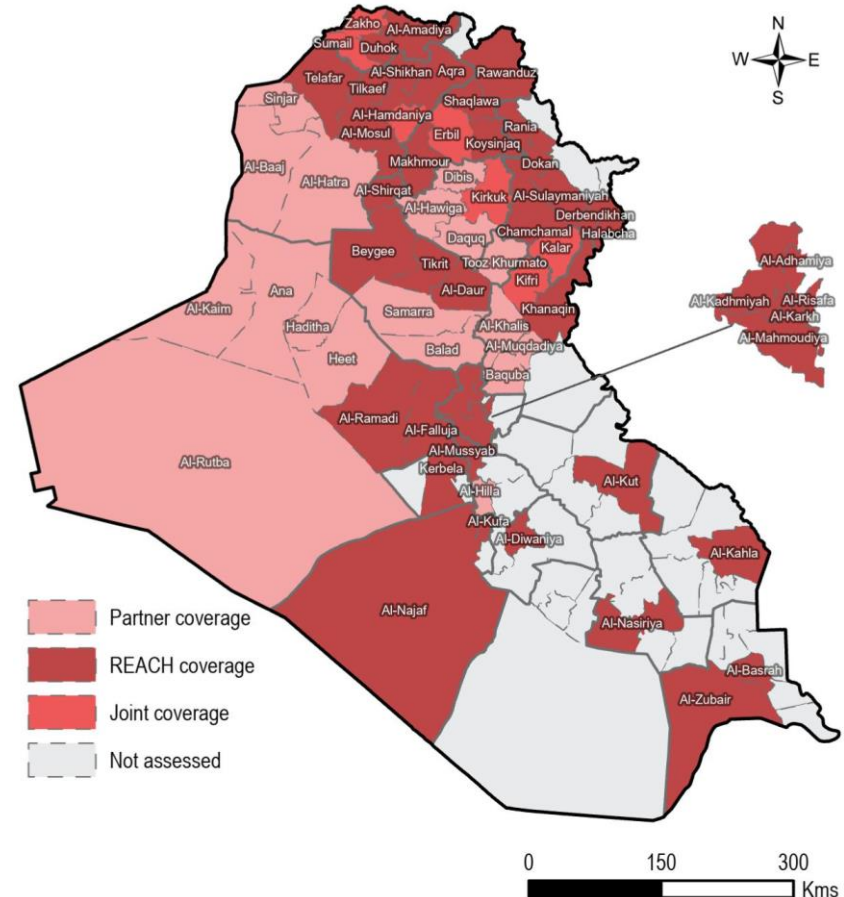
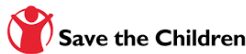
11% of households reported to be female-headed



*In most districts, more than one IDP camp was surveyed, with a total of 27 camps across Iraq.

PARTNER SUPPORT

REACH is grateful to the support of 20 data collection partners:



*MCNA IX Partners:

Action Against Hunger, Al Khiamiat for Agricultural, Development and Guidance, Ankawa Humanitarian Committee, Arbeiter-Samariter-Bund Deutschland e.V., Caritas Czech Republic, Human Imprint Organisation, Humanity & Inclusion, International Rescue Committee, International Organization for Migration, Iraq Health Access Organisation, Jesuit Refugee Service, Kurdistan Save the Children, Mercy Corps, Mission East, Norwegian Refugee Council, Pekawa Organisation, Save the Children, Terre des Hommes, World Vision, Youth Save Organisation

REACH Informing more effective humanitarian action

COVERAGE IN ANBAR GOVERNORATE

Data collection coverage by district

District	# of Surveys	Sub-districts assessed	Data collected by
Al-Falluja	297	Al-Amirya, Markaz Al- Falluja, Al-Garma <i>AAF camp was surveyed remotely</i>	REACH
Al-Kaim	214	Al-Karabla, Al-Obiadi, Al-Rummaneh	Caritas Czech Republic
Al-Ramadi	247	Al-Habbaniya, Al-Rahhaliya, Markaz Al-Ramadi	REACH
Al-Rutba	301	Markaz Al-Rutba	Al Khiamiat for Agricultural Development and Guidance
Ana	168	Markaz Ana, Rawa	IOM
Haditha*	96	Al-Haqlaniya, Barwana	Humanity & Inclusion
Heet	157	Al-Baghdady, Al-Forat, Kubaisa, Markaz Heet	IRC & Arbeiter Samariter Bund e.V. (ASB)

*Only returnee households were surveyed in Haditha

Note, findings related to a sub-set of households (e.g. barriers to education) are based on lower number of responses in these districts and should be interpreted with care.



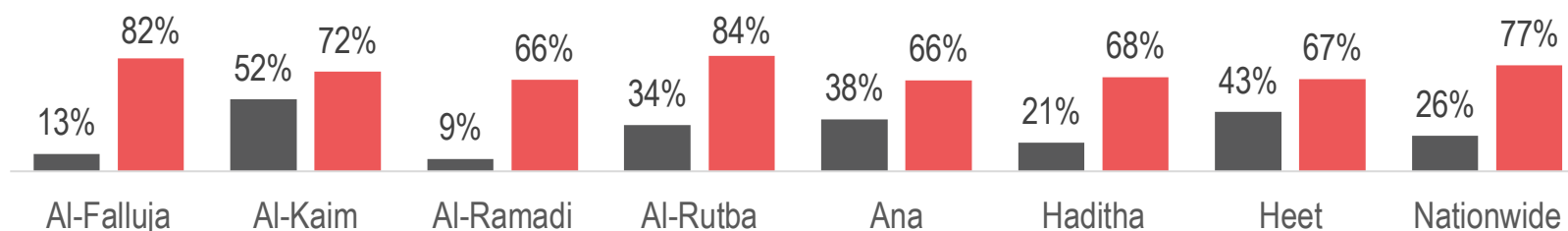
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SECTORAL FINDINGS

LIVELIHOOD – EMPLOYMENT & DEBT

■ % of households reporting at least one adult (18+) household member that is unemployed and seeking work:

■ % of households reporting to be unable to meet basic needs:*



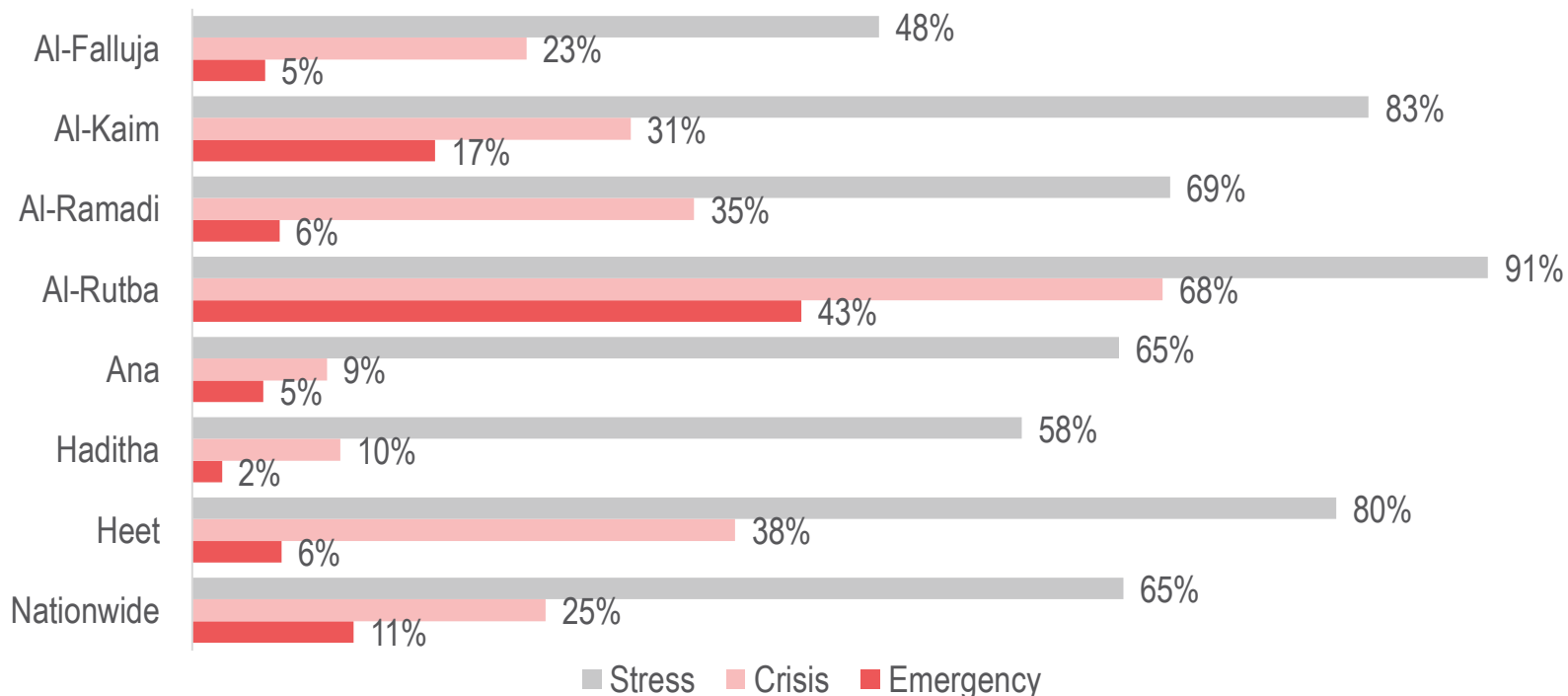
Main reported barriers to employment, among households with at least one member unemployed and seeking work

	Al-Falluja	Al-Kaim	Al-Ramadi	Al-Rutba	Ana	Haditha	Heet	Nat.
Lack of jobs/high competition	69%	64%	88%	82%	77%	73%	94%	75%
Distance to available jobs	23%	32%	11%	63%	14%	18%	11%	16%
Lack of family/personal connections	0%	1%	0%	9%	24%	9%	16%	13%
Only low-skilled jobs	23%	5%	1%	0%	0%	0%	0%	7%
Underqualified for available jobs	8%	10%	22%	8%	8%	0%	0%	11%
Lack of jobs for women	0%	14%	0%	7%	11%	0%	5%	17%

*Households taking on debt due to afford healthcare, food, education, or basic household expenditures

COPING STRATEGIES

% households that reported relying on negative coping strategies because of a lack of food or money to buy it in the 30 days prior to data collection:*

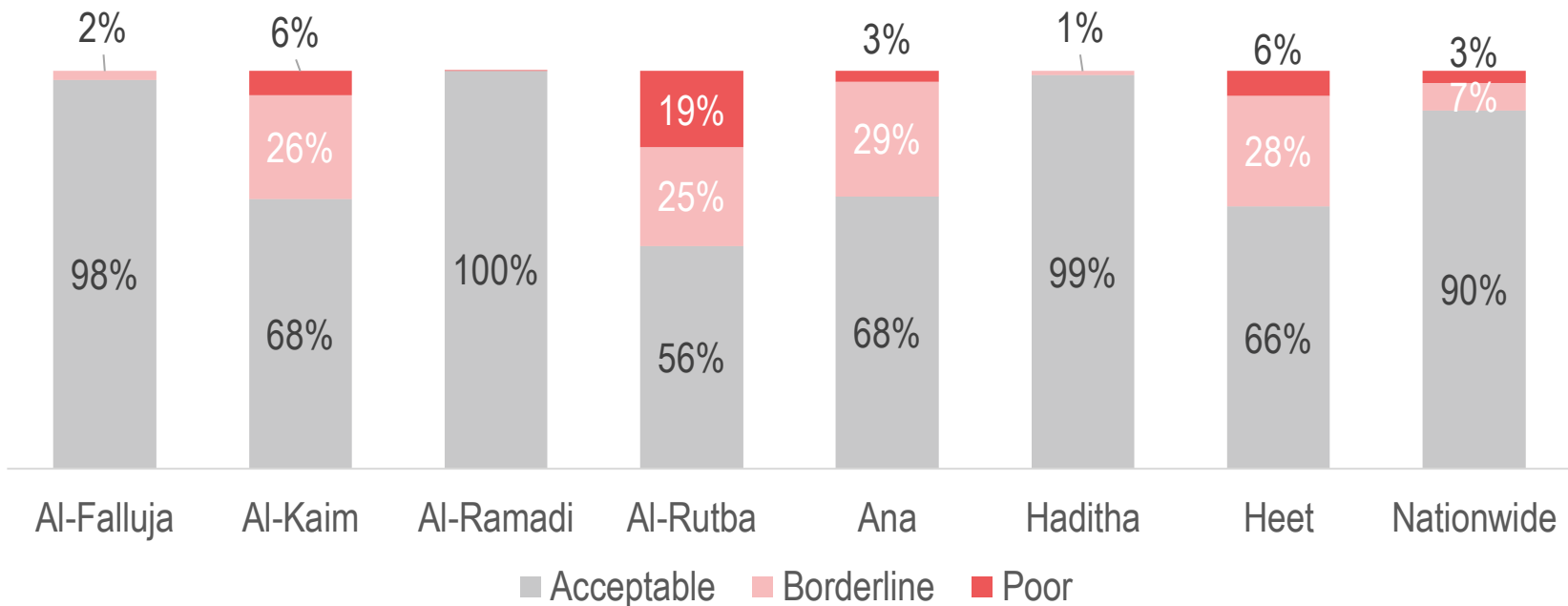


Compared to nationwide findings, households in Al-Kaim, Al-Ramadi, Al-Rutba and Heet are more likely to report relying on crisis coping strategies. Two out of five households in Rutba reported relying on emergency strategies, incl. children dropping out of school or household members engaging in risky behaviour.

*Households may report relying on coping strategies reflecting multiple severity levels, thus findings exceed 100%.

FOOD SECURITY – FOOD CONSUMPTION SCORE

% of households by Food Consumption Score (FCS)*

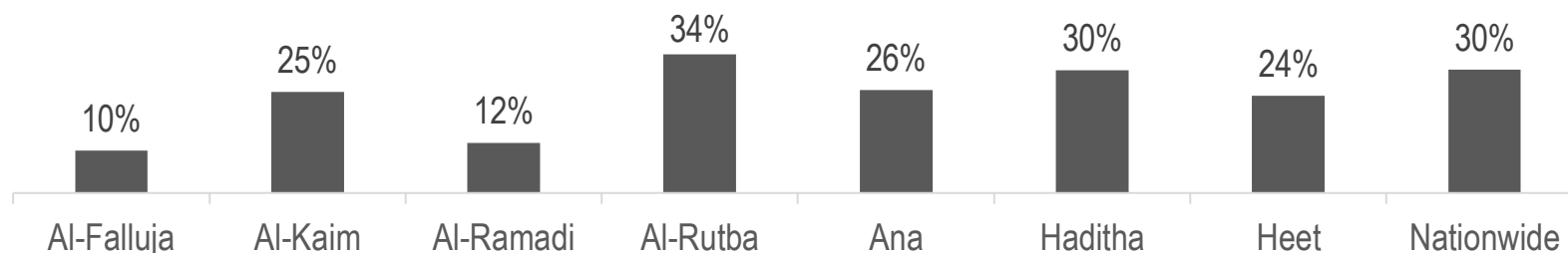


Households in Al-Rutba are least likely to be classified as having an acceptable FCS, with almost one in five households being classified as having a poor FCS. Households in Al-Kaim, Al-Rutba, Ana, and Heet report higher food insecurity compared to the national average. Barriers to an operational market place were most reported in Al-Rutba (53%) and Al-Kaim (24%).

*The Food Consumption Score measures nutritional intake by asking about the consumption of different food groups in the 7 days prior to data collection.

EDUCATION – ATTENDANCE & ACCESS

% of households with at least one school-aged child not attending school regularly (at least 4 days a week) in the 2020-2021 school year while schools were open



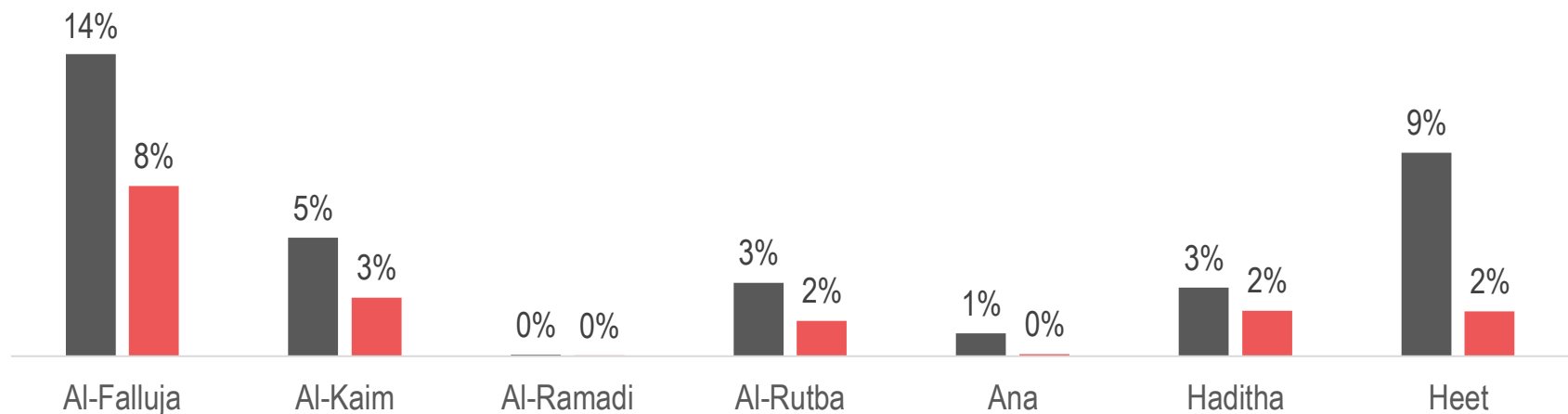
Main reported barriers to education, among households with at least one school-aged child not attending education

	Al-Falluja	Al-Kaim	Al-Ramadi	Al-Rutba	Ana	Haditha	Heet	Nat.
Cost of education	28%	30%	17%	25%	46%	24%	19%	26%
Lack of interest of children in education	2%	15%	16%	33%	2%	5%	18%	13%
Transportation/distance constraints	1%	15%	33%	4%	0%	24%	9%	11%
Health condition/disability of child	23%	1%	32%	0%	24%	19%	18%	11%
School stopped functioning or is closed	46%	0%	17%	22%	4%	5%	0%	10%
Unable to register	0%	1%	1%	18%	26%	5%	9%	10%

PROTECTION – MISSING DOCUMENTATION

■ % of households missing at least one key household or individual document *

■ % of households with at least one child missing a key individual document

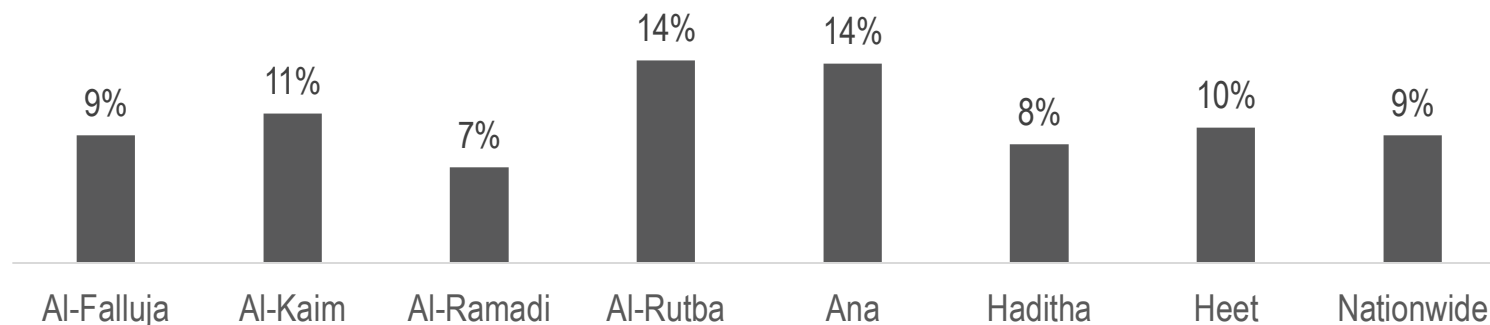


Compared to nationwide findings (18% and 15% resp.), the reported lack of at least one key document is substantially lower in Anbar districts. The most commonly reported reasons for missing at least one civil documents was households reporting that their document was lost or left behind (35%), pending application (34%), or not having attempted to obtain/renew their documents (13%). Households in Heet were most likely to report the complexity or length of legal/bureaucratic processes as barrier (65%).

* Key documents include PDS card, ID card (or unified ID card), nationality certificate (or unified ID card) and birth certificates for children

HEALTH - ACCESS

% of individuals reported having a health care need in the last 3 months that was unmet:

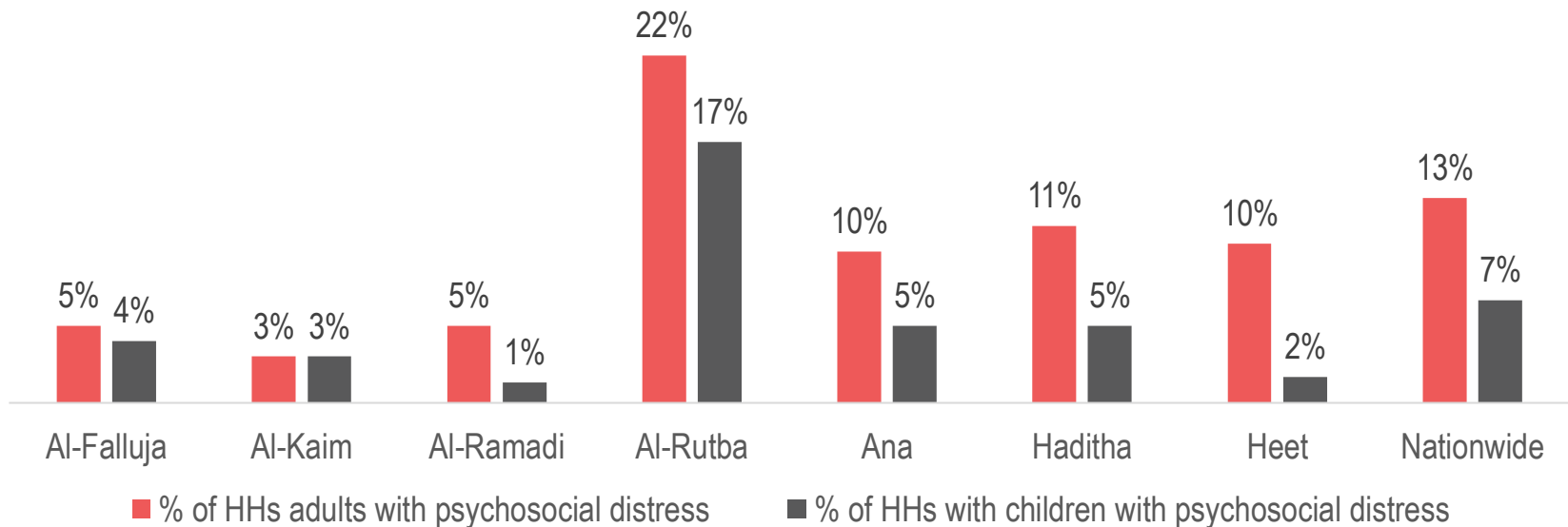


Main reported barriers, among households with at least one member facing difficulties in accessing health services in the past 3 months

	Al-Falluja	Al-Kaim	Al-Ramadi	Al-Rutba	Ana	Haditha	Heet	Nat.
Cost of services/medicine	74%	82%	59%	87%	77%	52%	58%	75%
Lack of referral provided	13%	6%	29%	18%	20%	10%	0%	12%
Lack of treatment at health facility	7%	1%	11%	8%	26%	0%	0%	10%
Public health clinic not open	0%	0%	22%	1%	2%	0%	0%	3%
Distance/transportation constraints	7%	1%	0%	4%	22%	0%	10%	14%
Lack of medication at health facility	0%	0%	22%	0%	0%	3%	0%	3%

HEALTH – PSYCHOSOCIAL DISTRESS

% of households reporting the presence of children or adults with psychosocial distress (proxy data with behavior change)

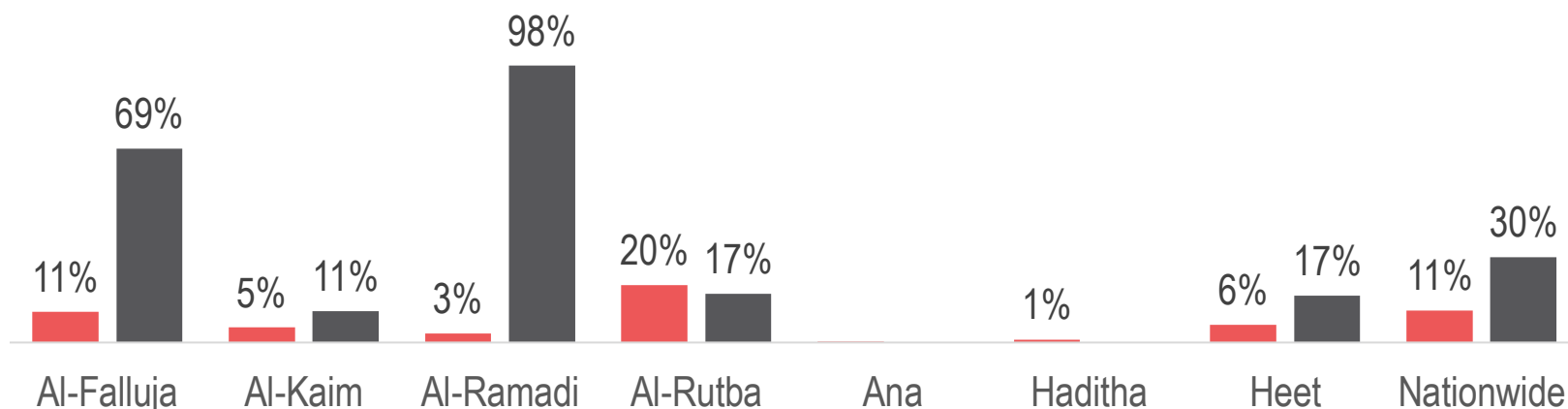


Compared to 2020, there has been a nationwide increase across population groups of households reporting at least one adult or child self-reporting psychosocial distress. Psychosocial distress is most reported in Al-Rutba, Haditha, Ana and Heet, especially among adult households members.

SHELTER

■ % of households living under critical shelter:*

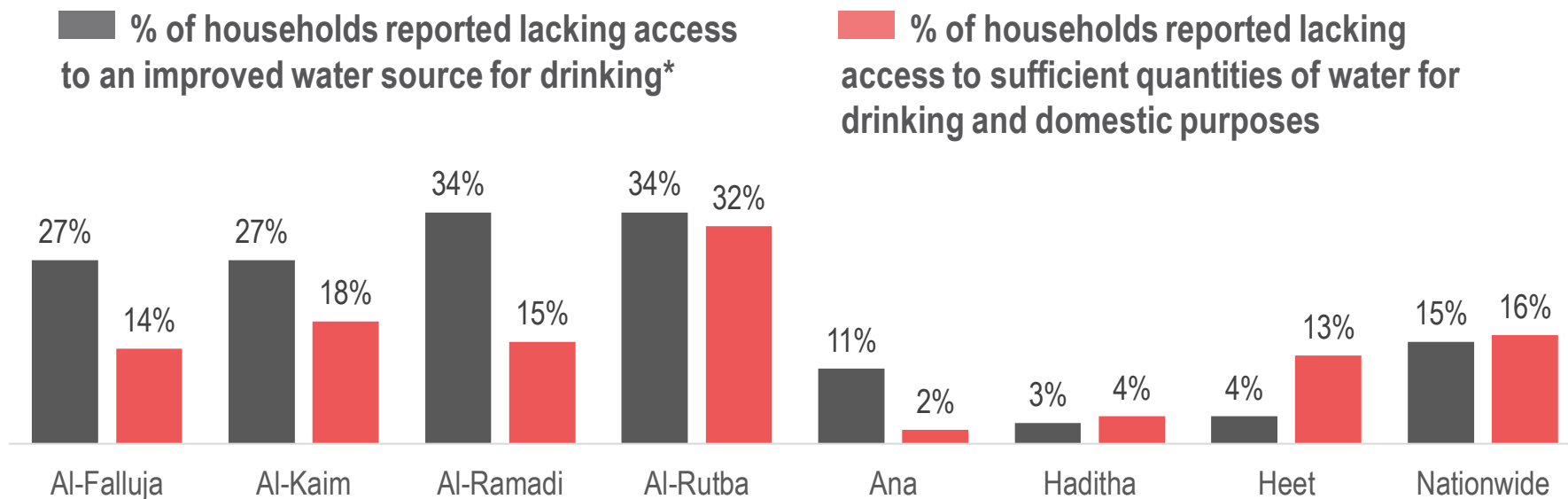
■ % of out of-camp households living in an informal site, among households classified as living in critical shelter



Households in Al-Falluja (56%), Al-Ramadi (42%), and Al-Rutba (38%) were most likely to report that they need at least two shelter improvements. The need to improve safety and security of their housing was mostly reported in Al-Falluja and Al-Rutba. In Anbar, the most commonly cited enclosure issues were leaks during rain (23%), lack of insulation (10%), and the presence of debris (8%).

* Enumerator observation of critical shelter types: makeshift shelter, religious building, public building, sub-standard shelter not for residential purposes, tent, unfinished/abandoned building, or caravan/RHU.

WASH - WATER



Compared to 2020, there has been a nationwide reported decrease in access to improved water source and access to sufficient quantities of water for drinking and domestic purposes. A substantial proportion of households in Al-Falluja (65%), Al-Kaim (49%), Al-Ramadi (67%), and Ana (17%) reported relying on bottled water as main source for water, among which approx. half reported relying on this due to the lack of alternative water sources. Access to improved functioning sanitation facilities was reported by nearly all households in Anbar.

*Piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, and bottled water were considered as improved water sources.

PARTICIPATION IN PUBLIC LIFE

% of households in Al-Anbar reported being able to play a role in local decision-making:



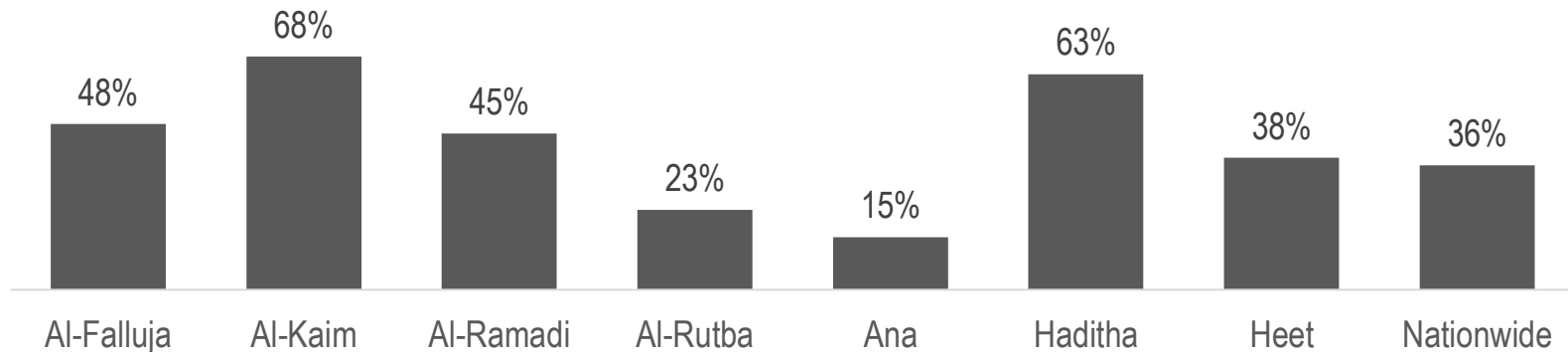
51% IDP in camp



40% IDP out of camp



46% Returnee



Nationwide, female-headed households tend to be less likely to report that they perceive that they are able to play a role in local decision-making. Similarly, female-headed households report a lower awareness of and/or access to complaint mechanisms (reported by 29% of households in Anbar, vs 37% of households nationwide). These discrepancies may equally apply to female-headed households in Anbar.

ACCOUNTABILITY TO AFFECTED POPULATIONS

Households who reported to have received aid, and the type of aid these households received:

of households reporting to have received aid
in the 30 days prior to data collection

		Cash	Education services	Food	Health services	Water
Al-Falluja	58/297	15/58	0	53/58	3/58	1/58
Al-Kaim	1/214	NA	NA	NA	NA	NA
Al-Ramadi	9/247	0/247	4/247	6/247	3/247	3/247
Al-Rutba	34/301	26/301	2/301	7/301	0/301	1/301
Ana	5/168	1/168	0/168	4/168	1/168	0
Haditha	10/96	0/96	3/96	10/96	2/96	0/96
Heet	12/157	5/157	1/157	10/157	0/157	0/157



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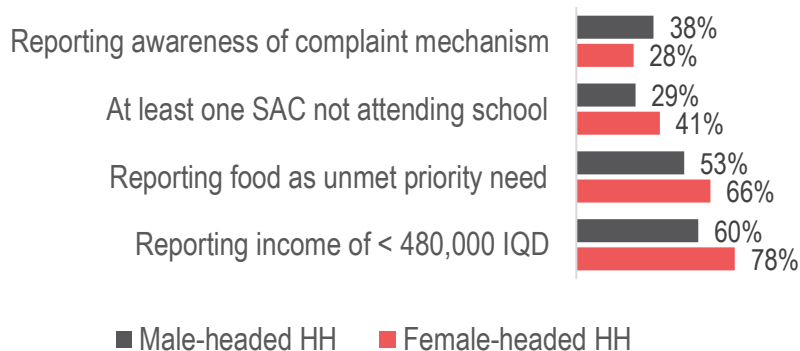
CROSS-CUTTING VULNERABILITIES

CROSS-CUTTING VULNERABILITIES - NATIONWIDE

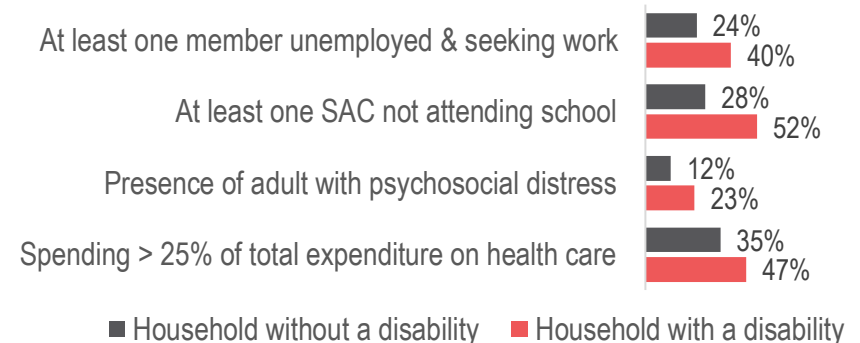
* Comparisons are indicative as they do not reflect sampling strata.

Household characteristics likely to aggravate multi-sectoral needs*

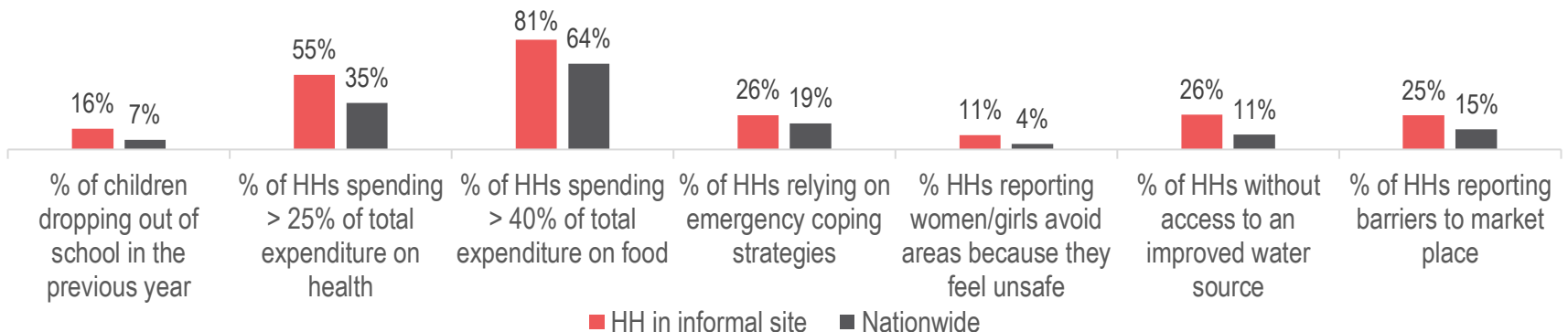
Female-headed households



Physical and/or cognitive disabilities**



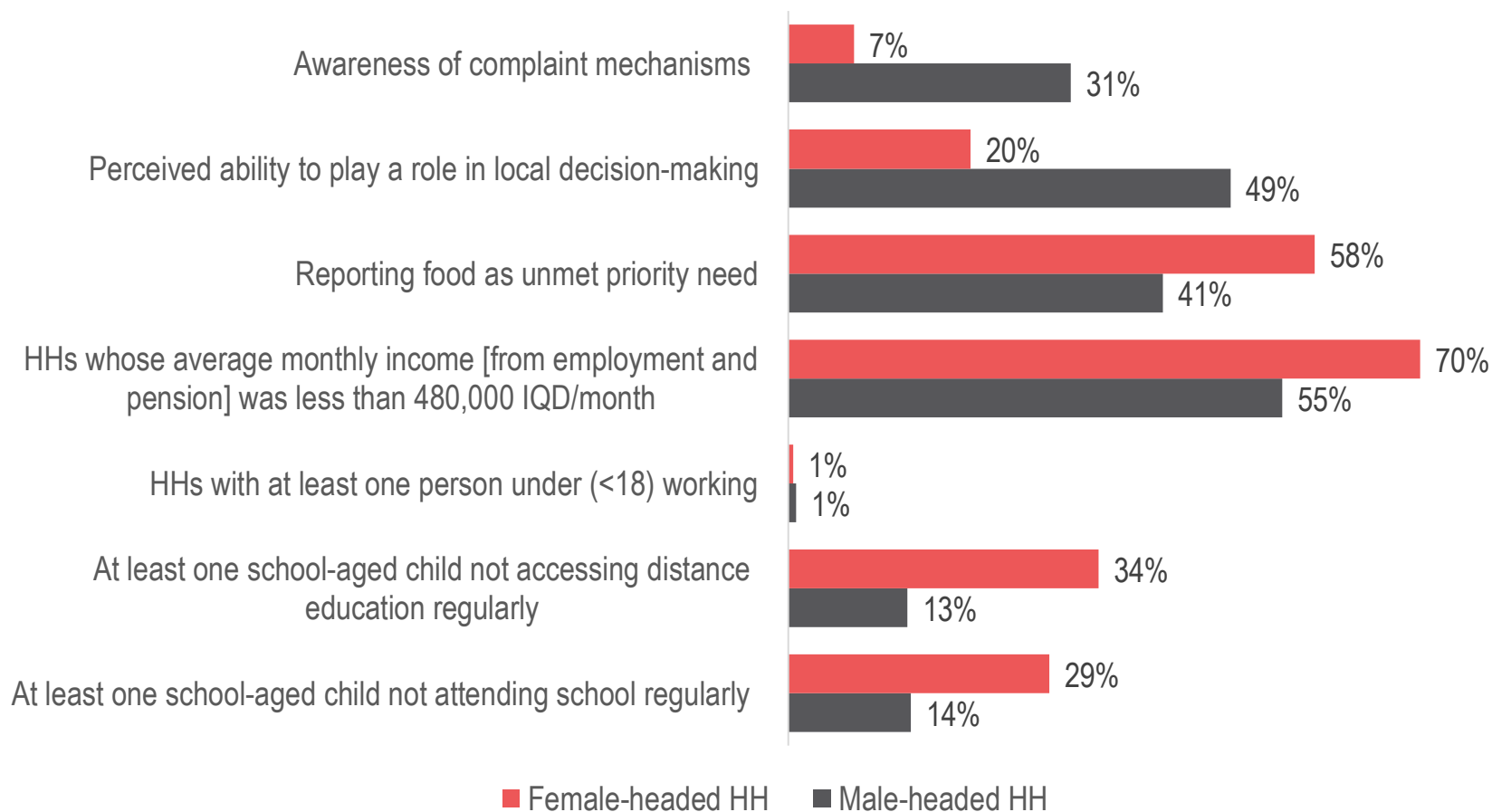
Residence in critical shelter and informal sites



** As per Washington Group guidance, this 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. SAC refers to school-aged children.

FEMALE-HEADED HOUSEHOLDS

Indicative comparison between male- and female-headed households in Anbar*



*Among the 11,645 households surveyed in the MCNA IX, 1,581 were reported to be female-headed. Comparisons are indicative only. 222 female-headed households were surveyed in Anbar.

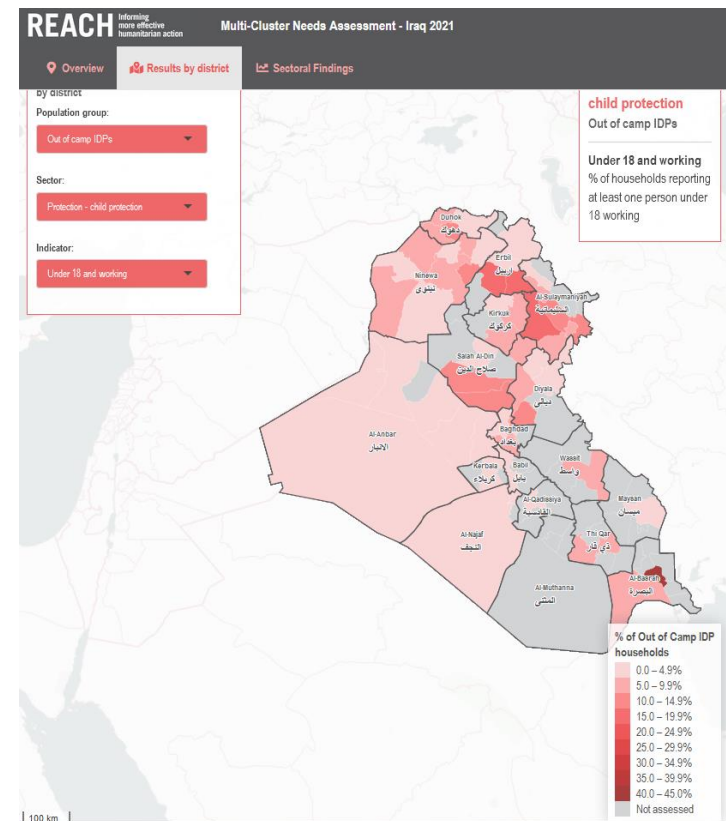


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CONCLUDING NOTES

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- Livelihood findings in Anbar indicate that being employed does not imply that households are able to meet their basic needs. Financial household instability reduces their access to a range of basic services (i.e. costs cited as key barrier to access)
- Reported reliance on negative coping strategies is high, especially in Al-Kaim, Al-Rutba, Al-Ramadi and Heet.
- Households in Al-Kaim, Al-Rutba, Ana and Heet are most likely to report lower food security.
- There is noteworthy district-level variance when looking at the main reported barriers to accessing employment, education and health, which may require targeted support.
- Households in Al-Falluja, Al-Kaim, Al-Ramadi and Al-Rutba were most likely to report reduced access to water and/or WASH infrastructure, in line with a decreased access nationwide.
- Residence in critical shelter and informal sites, being headed by a female, and the presence of a disability, tend to aggravate household vulnerability and result in increased multi-sectoral needs



Visit the [MCNA IX Dashboard](#) for additional district-level analysis!



**THANK YOU
FOR YOUR
ATTENTION!**

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