

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom 300,000 inside of camps.¹ In the context of camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.

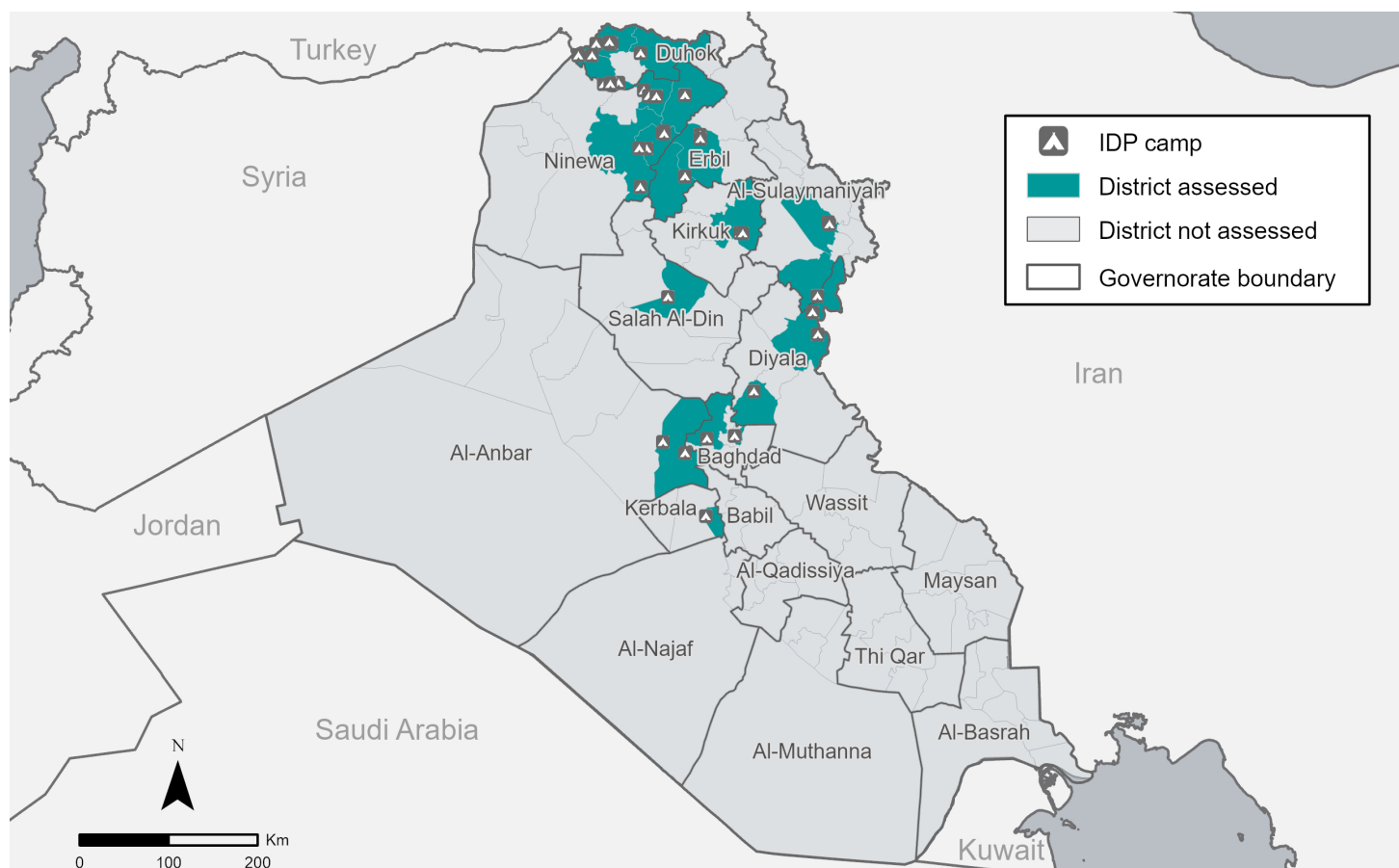
In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.² On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible camps across Iraq with at least 200 IDP families.³ Nationwide, 2,591 household level surveys were conducted with in-camp IDPs, as well as 130 key informant interviews (KIIs) with WASH experts.⁴ The overall objective of the assessment was to provide a detailed evidence-base on needs, access to and functionality of WASH services and infrastructure.

Data collection was carried out from 22 September to 31 December 2019. Household level findings are statistically representative with a 90% confidence level and 10% margin of error at the camp level for IDP families. Additionally, the key informant interviews were conducted in each camp in order to capture overarching needs across camp from an operational and implementation perspective. The household survey covered the areas of water, sanitation, waste, hygiene, flood risk, drought risk, and WASH in schools, with a particular focus on the quality of WASH facilities and practises in relation to the cluster standards. Data was cleaned and compiled across nationwide and camp level.

METHODOLOGY STATISTICS

Dates	22 September - 31 December 2019	Total Number of Surveys	2591
Camps Assessed	39	Total Camp Closures/Consolidations	9
Key Informant Interviews	130		

MAP: DATA COLLECTION COVERAGE



¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019.

² Humanitarian Needs Overview (HNO) 2020, November 2019.

³ According to data from the International Organization for Migration's Displacement Tracking Matrix.

⁴ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals including WASH Focal Points, WASH Engineers, Camp Officers & Camp Managers

IN-CAMP WASH NEEDS

Iraq Nationwide Findings

DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	103,900
Total in-camp IDP population assessed (number of households)	2,590
Average Household Size	6
% of female respondents	55%
% of female-headed households	22%

Average reported monthly income of households (IQD) **323,500**
 % of households earning an income through employment⁶ **67%**

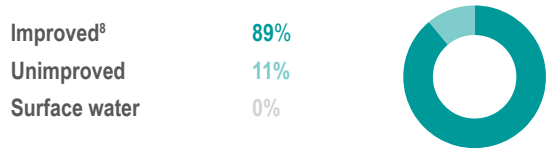
Government was reported as the main source of income with **36%** of households.

Construction was reported as the secondary source of income with **28%** of households.

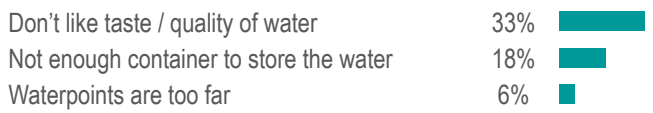
Commerce was reported as the tertiary source of income with **7%** of households.

WATER

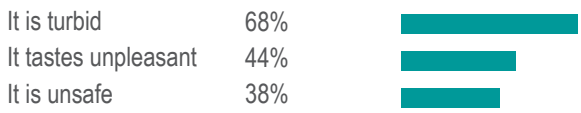
Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



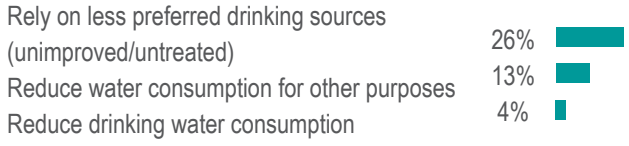
41% of households reported facing problems related to water access, most commonly reported barriers were:^{*,9}



Among the **41%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:^{*,9}



Among the **46%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:^{*,9}



1% of households reported needing more than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

88% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

KEY INFORMANTS (KIs)

Findings are indicative only.

Nationwide KIs described that **most camp residents** had access to functional handwashing facilities.

Among the 30 KIs, it was reported that water in the area is not clean enough to drink, top reasons were:

WTP Damaged	12%	WTP Capacity low	4%
Not enough staff	3%	Water too dirty	3%
Not enough authority	1%	Water Quality Acceptable	77%

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ² [Humanitarian Needs Overview \(HNO\) 2020](#), November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE [March 2020](#).

IN-CAMP WASH NEEDS

Iraq Nationwide Findings

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **99%**
 Unimproved **1%**
 Open defecation¹¹ **0%**



87% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

22% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

14% of households reported having access to a private shower.

WASTE

2% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



68% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	32%	68%
Human Faeces	6%	94%
Stagnant water	38%	62%

HYGIENE

46% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



9% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

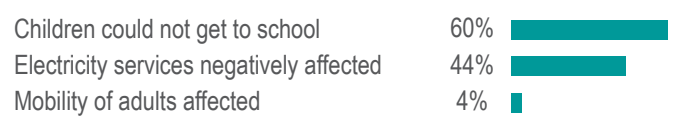
92% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

10% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **9%** reported damage to their shelter due to the flooding.¹⁷

Of the households reported their area experiencing flooding in the last 12 months, top three reasons to how they were affected.



*Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>).¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP).¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open.¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a handdug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available.¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>).¹⁵ Question was asked to both male and female respondents.¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets.¹⁷ Subsets may have a lower confidence level and a wider margin of error.¹⁸ Ibid.¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

Comparative Overview

		Water			Sanitation		Hygiene		Waste		Floods	
		% of households (HHs) (sometimes) treating water before drinking	% of HHs facing problems related to water access	% of HHs (very) satisfied with regards to access to water in the previous 30 days	% of HHs using an improved sanitation facility ¹	% of HHs reported that sanitation access met basic needs in the previous 30 days	% of households reporting that there was no access to soap at any handwashing facility in the camp at the time ²	% of HHs reported having HH members who had suffered from diarrhoea, cholera and/or skin/eye infection in the 2 weeks prior	% of HHs reported using informal waste disposal methods ³	% of HHs having access to safe waste water disposal methods ⁴	% of HHs reported their area experienced flooding in the previous 12 months	% of these HHs reported damage to their shelter due to the flooding
Anbar	Amriyat Al-Fallujah	26%	21%	100%	100%	93%	100%	10%	3%	100%	17%	16%
	Habaniya Tourist City	0%	0%	97%	100%	100%	100%	3%	2%	100%	0%	0%
Al-Sulaymaniyah	Arbat IDP	22%	0%	91%	100%	100%	89%	4%	22%	100%	31%	28%
	Ashti IDP	14%	0%	88%	100%	98%	81%	3%	9%	100%	15%	8%
	Tazade	78%	0%	100%	100%	100%	100%	0%	0%	100%	0%	0%
Baghdad	Al-Ahel	25%	13%	100%	100%	99%	100%	0%	2%	100%	26%	26%
	Zayona	27%	6%	100%	100%	99%	100%	12%	2%	100%	0%	0%
Diyala	Alwand 1	57%	0%	98%	100%	100%	100%	0%	0%	100%	0%	0%
	Alwand 2	59%	0%	98%	100%	97%	100%	0%	2%	100%	0%	0%
	Qoratu	64%	0%	100%	100%	100%	100%	2%	0%	100%	0%	0%
Duhok	Bajed Kandala	29%	16%	87%	100%	97%	58%	29%	10%	100%	13%	7%
	Bersive 1	64%	6%	73%	100%	100%	77%	97%	13%	100%	9%	9%
	Bersive 2	79%	7%	94%	100%	99%	91%	26%	4%	100%	4%	3%
	Chamishku	20%	0%	94%	100%	97%	96%	0%	13%	100%	10%	4%
	Darkar	48%	0%	64%	100%	100%	94%	0%	10%	100%	0%	0%
	Dawadia	67%	1%	91%	100%	99%	97%	0%	3%	100%	3%	1%
	Kabarto 1	41%	0%	76%	100%	97%	93%	4%	17%	100%	13%	9%
	Kabarto 2	68%	0%	53%	100%	98%	92%	0%	18%	100%	22%	11%
	Khanke	33%	18%	89%	100%	100%	89%	59%	22%	100%	16%	14%
	Rwanga Community	68%	0%	90%	100%	100%	90%	11%	13%	100%	4%	3%

¹ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform (JMP, <https://washdata.org/monitoring/sanitation>).

² Basic handwashing facilities are private, on premises, with soap and water (JMP, <https://washdata.org/monitoring/hygiene>).

³ Informal waste disposal methods include burning, burying and throwing into the streets.

⁴ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a handdig hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available.

Comparative Overview

		Water			Sanitation		Hygiene		Waste		Floods	
		% of households (HHs) (sometimes) treating water before drinking	% of HHs facing problems related to water access	% of HHs (very) satisfied with regards to access to water in the previous 30 days	% of HHs using an improved sanitation facility ¹	% of HHs reported that sanitation access met basic needs in the previous 30 days	% of households reporting that there was no access to soap at any handwashing facility in the camp at the time ²	% of HHs reported having HH members who had suffered from diarrhoea, cholera and/or skin/eye infection in the 2 weeks prior	% of HHs reported using informal waste disposal methods ³	% of HHs having access to safe waste water disposal methods ⁴	% of HHs reported their area experienced flooding in the previous 12 months	% of these HHs reported damage to their shelter due to the flooding
Duhok	Shariya	30%	46%	89%	99%	92%	31%	89%	8%	100%	24%	21%
	Baharka	12%	9%	91%	100%	99%	100%	0%	6%	100%	0%	0%
Erbil	Debaga 1	22%	8%	96%	94%	99%	99%	13%	4%	100%	0%	0%
	Harshm	12%	15%	97%	95%	79%	100%	44%	5%	100%	0%	0%
Kerbala	Al-Kawthar	0%	0%	100%	100%	100%	100%	0%	2%	100%	0%	0%
Kirkuk	Laylan 2	19%	16%	97%	100%	100%	100%	0%	16%	100%	14%	10%
	Laylan IDP	13%	15%	100%	100%	100%	100%	0%	17%	100%	12%	12%
	Yahyawa	72%	0%	96%	99%	100%	100%	100%	10%	100%	71%	65%
Ninewa	As Salamyiah	67%	71%	84%	95%	100%	78%	3%	11%	100%	3%	3%
	Essian	25%	3%	90%	100%	100%	89%	0%	11%	100%	10%	7%
	Hamam al Alil 2	64%	53%	82%	100%	91%	83%	0%	17%	100%	13%	13%
	Hasansham U2	8%	11%	83%	100%	100%	89%	0%	6%	100%	11%	11%
	Hasansham U3	10%	19%	92%	100%	100%	97%	14%	8%	100%	13%	13%
	Khazer M1	9%	22%	91%	100%	92%	96%	4%	7%	100%	7%	7%
	Mamilian	10%	9%	98%	100%	97%	100%	0%	2%	100%	7%	7%
	Mamrashan	18%	12%	97%	97%	100%	100%	0%	0%	100%	1%	1%
	Qayyarah-Jad'ah	62%	68%	84%	99%	100%	79%	1%	15%	100%	13%	12%
	Sheikhan	78%	0%	97%	100%	100%	99%	0%	6%	100%	16%	6%
Salah al-Din	Karamah	56%	62%	70%	97%	96%	77%	0%	20%	100%	8%	5%

¹ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform (JMP, <https://washdata.org/monitoring/sanitation>).

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IN-CAMP WASH NEEDS

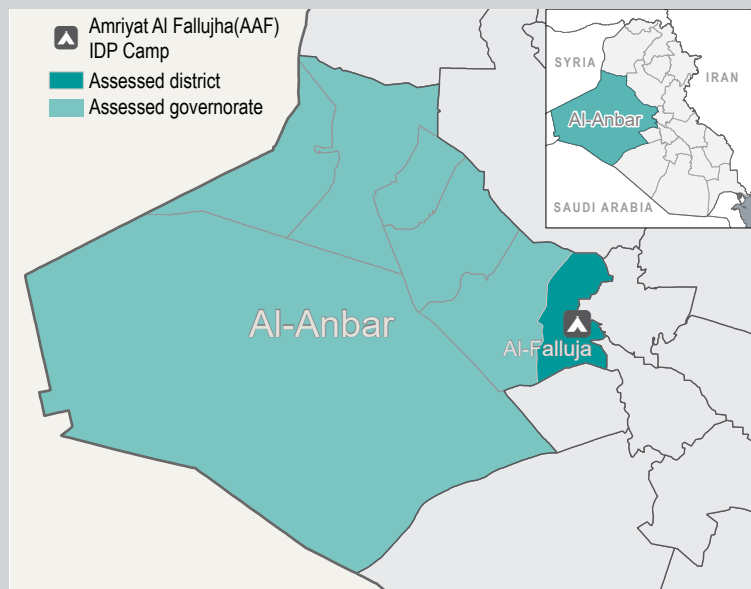
Al-Anbar Governorate Amriyat Al-Fallujah Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Amriyat Al-Fallujah, 58 household surveys were conducted, in addition to 22 KIIs.

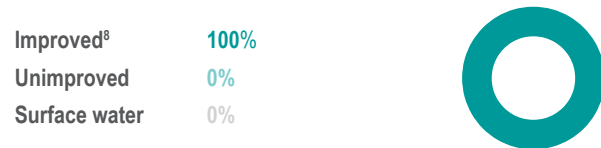


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	3,628
Total in-camp IDP population assessed (number of households)	58
Average household size	5
% of female respondents	17%
% of female-headed households	17%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **26%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid	60%
It tastes unpleasant	53%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **265,900**
 % of households earning an income through employment⁶ **69%**

Commerce was reported as the main source of income with **37%** of households.

Construction was reported as the secondary source of income with **23%** of households.

Agriculture was reported as the tertiary source of income with **17%** of households.

5% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Waterpoints are too far	2%
Waterpoints are difficult to reach	2%
Not enough container to store the water	2%

Among the **26%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	26%
Rely on surface water for drinking water	2%
Fetch water at a source further than the usual one	2%

100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.



IN-CAMP WASH NEEDS

Al-Anbar Governorate Amriyat Al-Fallujah Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

21% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

10% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



62% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	19%	81%
Human Faeces	4%	96%
Stagnant water	11%	89%

HYGIENE

90% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **93%**
Soap is not present at handwashing facility **7%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

3% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

17% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **16%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Mobility of adults affected **67%**
Children could not get to school **33%**
Electricity services negatively affected **17%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 22 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **100%**
Not enough authority **0%** Water Quality Acceptable **0%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

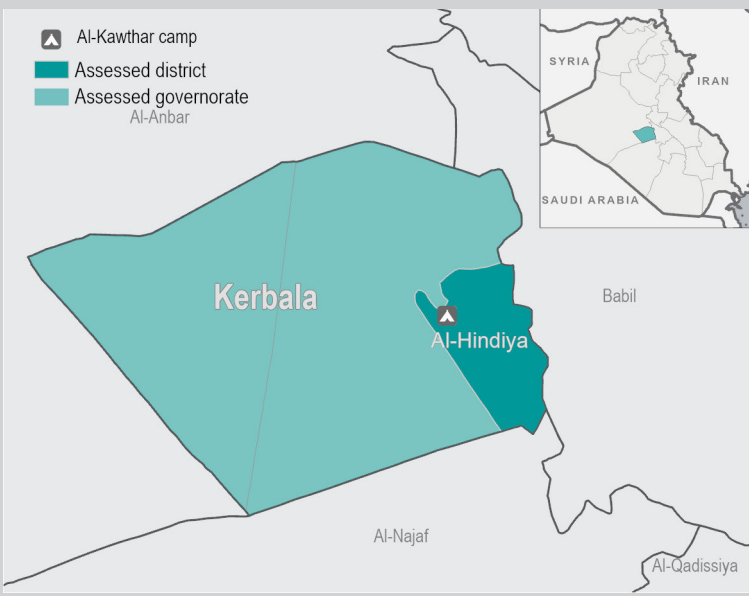
Kerbala Governorate Al-Kawthar Camp

CONTEXT AND METHODOLOGY

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On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al-Kawthar, 44 household surveys were conducted, in addition to 1 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	124
Total in-camp IDP population assessed (number of households)	44
Average household size	5
% of female respondents	9%
% of female-headed households	5%

Average reported monthly income of households (IQD) ¹⁰	552,000
% of households earning an income through employment ⁶	95%

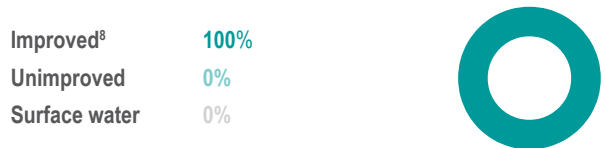
Construction was reported as the main source of income with **42%** of households.

Hotels/Restaurants was reported as the secondary source of income with **27%** of households.

Transportation was reported as the tertiary source of income with **12%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **0%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



0% of households reported facing problems related to water access, most commonly reported barriers were:⁹

NA	NA%
NA	NA%
NA	NA%

Among the **16%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	7%
Rely on less preferred sources (unimproved/untreated) for other purposes	2%
	2%

Reduce water consumption for other
100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Kerbala Governorate Al-Kawthar Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



98% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	36%	64%
Human Faeces	0%	100%
Stagnant water	5%	95%

HYGIENE

98% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

97% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

95% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

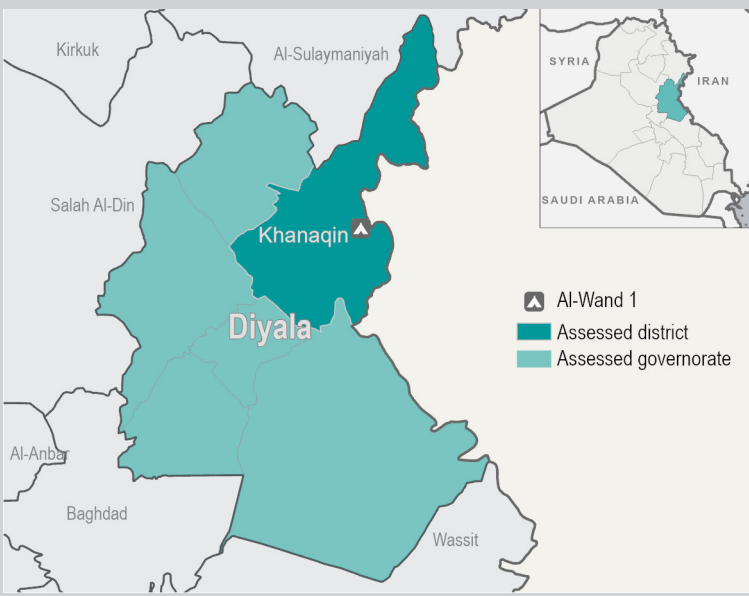
Diyala Governorate Alwand 1 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Alwand 1, 65 household surveys were conducted, in addition to 4 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	649
Total in-camp IDP population assessed (number of households)	65
Average household size	5
% of female respondents	52%
% of female-headed households	28%

Average reported monthly income of households (IQD) ¹⁰	370,700
% of households earning an income through employment ⁶	68%

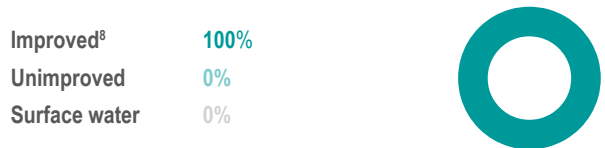
Construction was reported as the main source of income with **39%** of households.

Government was reported as the secondary source of income with **28%** of households.

NGO/UN was reported as the tertiary source of income with **8%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **57%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe	95%
It tastes unpleasant	62%
It is turbid	59%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

52% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	51%
Some groups have no access to the waterpoints	2%

Among the **42%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	38%
Rely on less preferred sources (unimproved/untreated) for other purposes	31%
Rely on surface water for drinking water	11%

98% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Diyala Governorate Alwand 1 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



97% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	17%	83%
Human Faeces	0%	100%
Stagnant water	23%	77%

HYGIENE

98% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

0% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

98% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 4 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **100%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **0%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

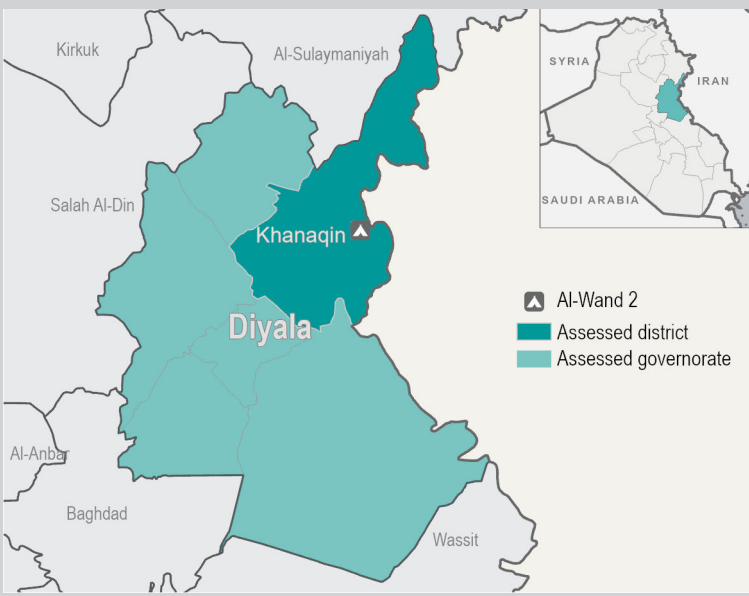
Diyala Governorate Alwand 2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Alwand 2, 44 household surveys were conducted, in addition to 4 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	227
Total in-camp IDP population assessed (number of households)	44
Average household size	5
% of female respondents	55%
% of female-headed households	25%

Average reported monthly income of households (IQD) ¹⁰	340,300
% of households earning an income through employment ⁶	84%

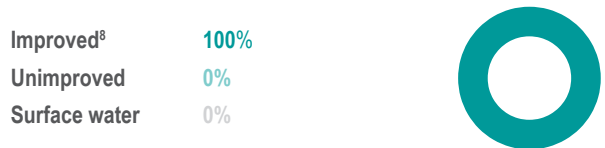
Construction was reported as the main source of income with **48%** of households.

Government was reported as the secondary source of income with **26%** of households.

NGO/UN was reported as the tertiary source of income with **13%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **59%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid	96%	
It tastes unpleasant	88%	
It smells unpleasant	76%	

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

61% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	59%	
Not enough container to store the water	2%	

Among the **30%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	30%	
Rely on less preferred sources (unimproved/untreated) for other purposes	23%	
Reduce water consumption for other	2%	

98% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Diyala Governorate Alwand 2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



93% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	23%	77%
Human Faeces	0%	100%
Stagnant water	43%	57%

HYGIENE

98% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **98%**

Soap is not present at handwashing facility **2%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 4 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **100%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **0%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

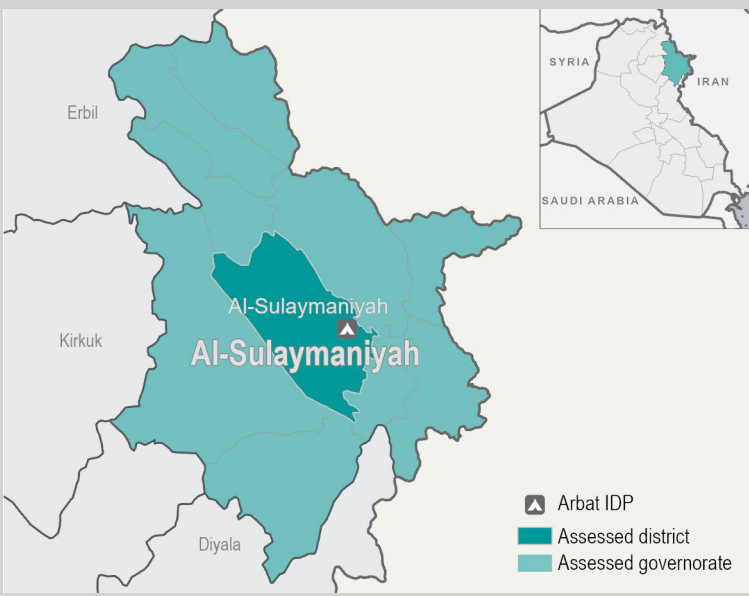
Al-Sulaymaniyah Governorate Arbat IDP Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Arbat IDP, 54 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,375
Total in-camp IDP population assessed (number of households)	54
Average household size	6
% of female respondents	46%
% of female-headed households	13%

Average reported monthly income of households (IQD) ¹⁰	255,300
% of households earning an income through employment ⁶	93%

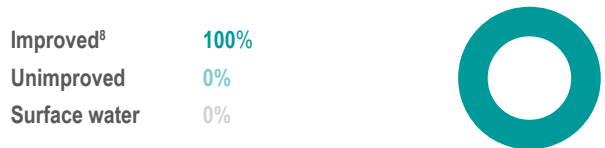
Construction was reported as the main source of income with **60%** of households.

Cleaner/Cook was reported as the secondary source of income with **25%** of households.

Government was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **22%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



2% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Not enough container to store the water	2%
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Among the **0%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

NA	NA%
NA	NA%
NA	NA%

91% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Al-Sulaymaniyah Governorate Arbat IDP Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



89% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

4% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



91% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	11%	89%
Human Faeces	0%	100%
Stagnant water	4%	96%

HYGIENE

83% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

22% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

31% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **28%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Loss/damage to households' items **70%**

Mobility of adults affected **50%**

Electricity services negatively affected **50%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate As Salamyiah Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In As Salamyiah, 73 household surveys were conducted, in addition to 2 KIIs.

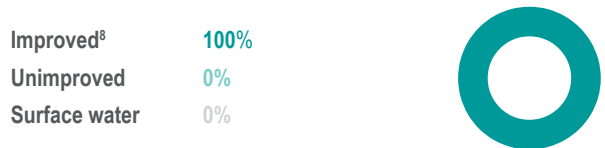


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	5,214
Total in-camp IDP population assessed (number of households)	73
Average household size	6
% of female respondents	51%
% of female-headed households	51%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **67%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

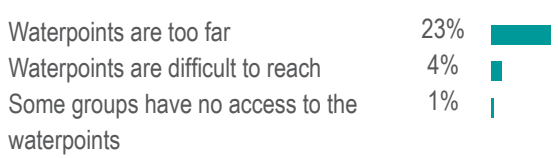
Average reported monthly income of households (IQD) ¹⁰	294,600
% of households earning an income through employment ⁶	10%

Construction was reported as the main source of income with **31%** of households.

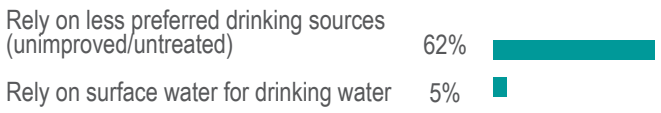
Agriculture was reported as the secondary source of income with **15%** of households.

Government was reported as the tertiary source of income with **15%** of households.

29% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **66%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



84% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

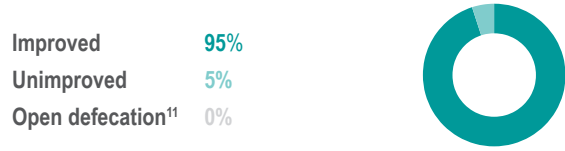
* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate As Salamyiah Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰



78% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

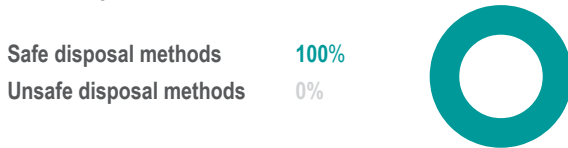
71% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

3% of households reported having access to a private shower.

WASTE

1% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³



64% of households reported there were insufficient waste containers in the area.

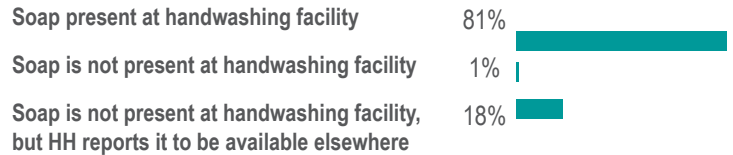
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	32%	68%
Human Faeces	4%	96%
Stagnant water	33%	67%

HYGIENE

56% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



11% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

96% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

71% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

3% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **3%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 1 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	100%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	0%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

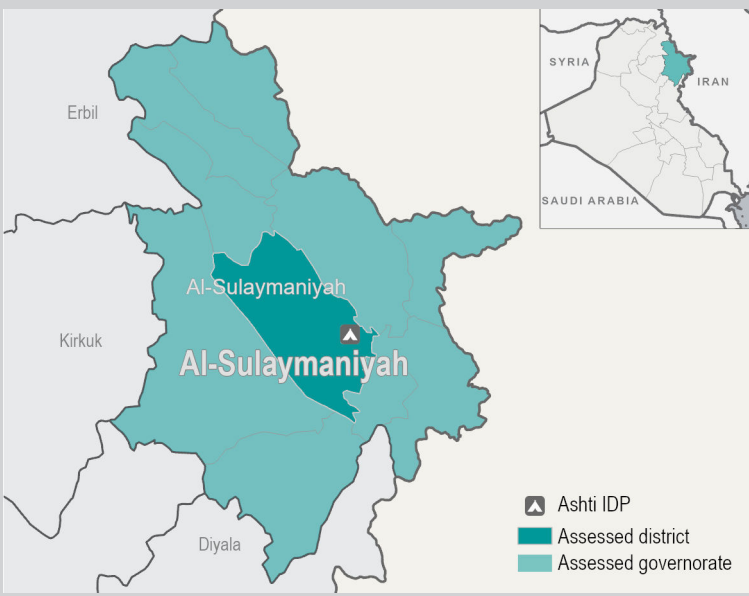
Al-Sulaymaniyah Governorate Ashti IDP Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Ashti IDP, 78 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,375
Total in-camp IDP population assessed (number of households)	78
Average household size	6
% of female respondents	40%
% of female-headed households	19%

Average reported monthly income of households (IQD) ¹⁰	282,100
% of households earning an income through employment ⁶	81%

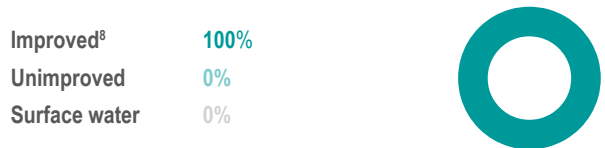
Construction was reported as the main source of income with **50%** of households.

Government was reported as the secondary source of income with **15%** of households.

Cleaner/Cook was reported as the tertiary source of income with **15%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **14%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



0% of households reported facing problems related to water access, most commonly reported barriers were:⁹

NA	NA%
NA	NA%
NA	NA%

Among the **8%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Spend money (or credit) on water	3%
Reduce water consumption for other purposes	3%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

88% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Al-Sulaymaniyah Governorate Ashti IDP Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



81% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

3% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



88% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	6%	94%
Human Faeces	3%	97%
Stagnant water	6%	94%

HYGIENE

88% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **99%**
Soap is not present at handwashing facility **1%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

9% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

99% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

15% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **8%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Loss/damage to households' items **75%**
Children could not get to school **25%**
Affected livelihoods due to damage to agricultural land **25%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 3 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Erbil Governorate Baharka Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Baharka, 68 household surveys were conducted, in addition to 3 KIIs.

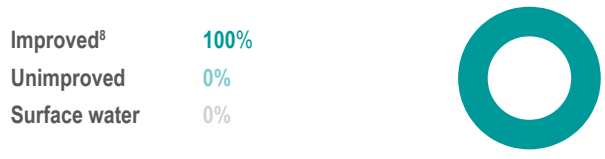


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	932
Total in-camp IDP population assessed (number of households)	68
Average household size	6
% of female respondents	34%
% of female-headed households	25%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **12%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD) ¹⁰	344,900
% of households earning an income through employment ⁶	81%

Construction was reported as the main source of income with **50%** of households.

Government was reported as the secondary source of income with **14%** of households.

NGO/UN was reported as the tertiary source of income with **8%** of households.

7% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Not enough container to store the water	6%
Waterpoints are too far	1%

Among the **24%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	13%
Reduce water consumption for other purposes	9%
Reduce drinking water consumption	7%

91% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Erbil Governorate Baharka Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

9% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



62% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	26%	74%
Human Faeces	3%	97%
Stagnant water	9%	91%

HYGIENE

72% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

6% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

97% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

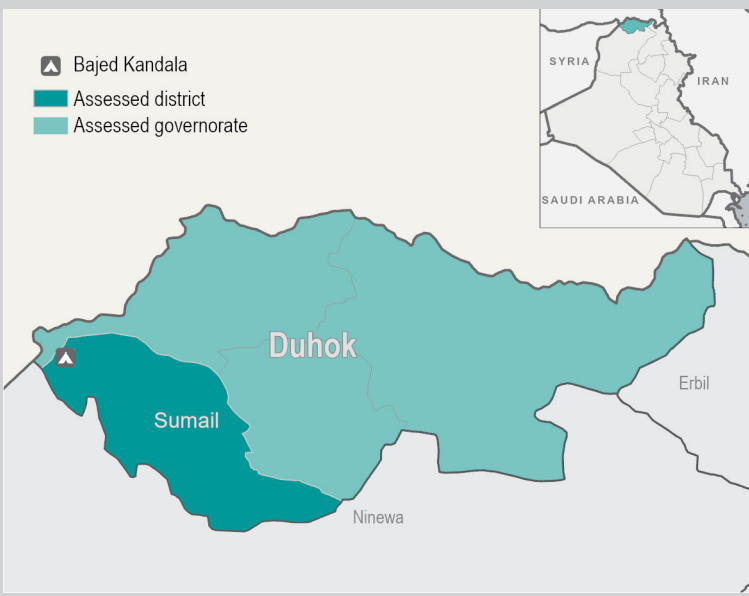
Duhok Governorate Bajed Kandala Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Bajed Kandala, 69 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,052
Total in-camp IDP population assessed (number of households)	69
Average household size	7
% of female respondents	78%
% of female-headed households	6%

Average reported monthly income of households (IQD) ¹⁰	408,800
% of households earning an income through employment ⁶	65%

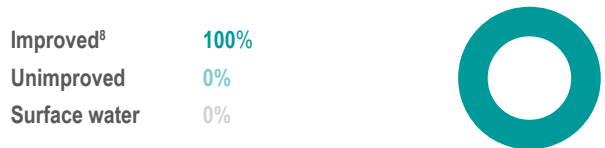
Government was reported as the main source of income with **84%** of households.

NGO/UN was reported as the secondary source of income with **11%** of households.

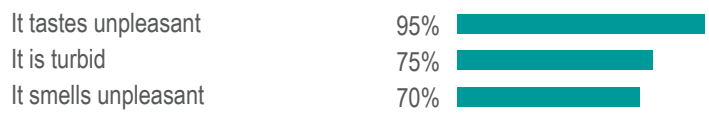
Construction was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

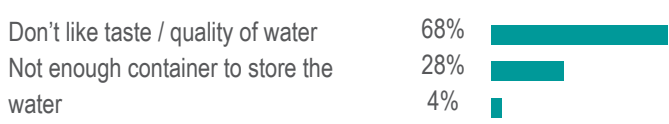


Among the **29%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

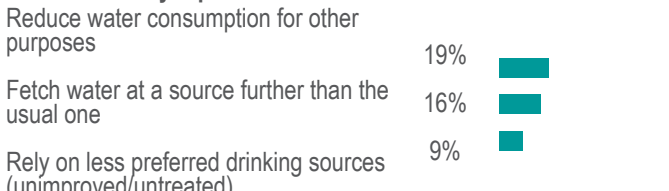


97% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

70% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **35%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



87% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Bajed Kandala Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



58% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

16% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

29% of households reported having access to a private shower.

WASTE

10% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



39% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	64%	36%
Human Faeces	19%	81%
Stagnant water	68%	32%

HYGIENE

10% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **90%**
 Soap is not present at handwashing facility **3%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **7%**

10% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

13% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **7%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Electricity services negatively affected **80%**
 Children could not get to school **60%**
 Mobility of adults affected **60%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

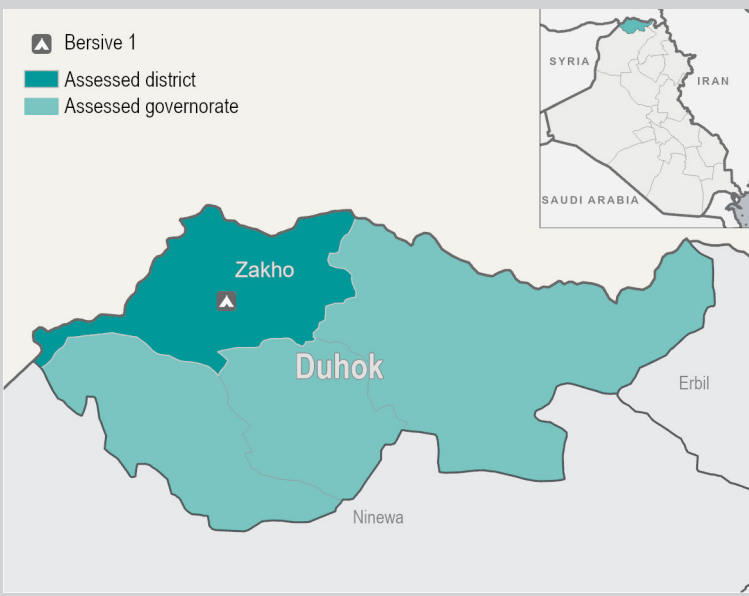
Duhok Governorate Bersive 1 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Bersive 1, 70 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	1,461
Total in-camp IDP population assessed (number of households)	70
Average household size	7
% of female respondents	71%
% of female-headed households	16%

Average reported monthly income of households (IQD) ¹⁰	276,000
% of households earning an income through employment ⁶	63%

Government was reported as the main source of income with **86%** of households.

Commerce was reported as the secondary source of income with **5%** of households.

Education was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **64%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	82%
It is turbid	56%
It is unsafe	40%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

90% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	89%
Not enough container to store the water	56%
Water is too expensive	1%

Among the **63%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	46%
Rely on less preferred drinking sources (unimproved/untreated)	37%
Fetch water at a source further than the usual one	9%

73% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Bersive 1 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



77% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

6% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

97% of households reported having access to a private shower.

WASTE

13% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



41% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	73%	27%
Human Faeces	27%	73%
Stagnant water	74%	26%

HYGIENE

0% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **91%**
 Soap is not present at handwashing facility **0%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **9%**

13% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

9% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **9%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Loss/damage to households' items **100%**
 Children could not get to school **60%**
 Mobility of adults affected **60%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **few camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

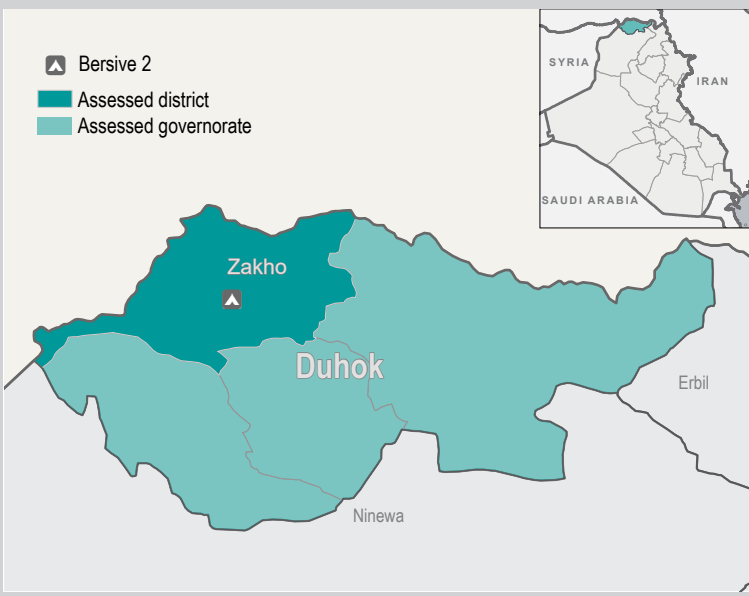
Duhok Governorate Bersive 2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Bersive 2, 70 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	1,737
Total in-camp IDP population assessed (number of households)	70
Average household size	6
% of female respondents	67%
% of female-headed households	9%

Average reported monthly income of households (IQD) ¹⁰	291,500
% of households earning an income through employment ⁶	67%

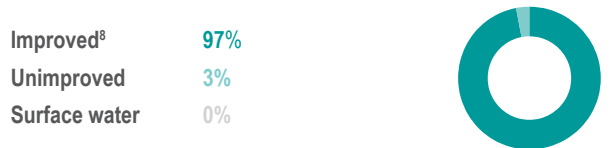
Government was reported as the main source of income with **77%** of households.

Education was reported as the secondary source of income with **15%** of households.

Transportation was reported as the tertiary source of income with **8%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **79%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe	62%
It tastes unpleasant	58%
It is turbid	33%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

100% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	100%
Not enough container to store the water	30%
Water points are not functioning	1%

Among the **47%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	21%
Reduce water consumption for other purposes	19%
Rely on less preferred sources (unimproved/untreated) for other	10%

94% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Bersive 2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



91% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

7% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

26% of households reported having access to a private shower.

WASTE

7% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



56% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	57%	43%
Human Faeces	9%	91%
Stagnant water	66%	34%

HYGIENE

3% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **86%**
 Soap is not present at handwashing facility **3%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **11%**

4% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

94% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

4% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **3%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Mobility of adults affected **67%**
 Electricity services negatively affected **67%**
 Loss/damage to households' items **67%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Duhok Governorate Chamishku Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Chamishku, 69 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	5,041
Total in-camp IDP population assessed (number of households)	69
Average household size	7
% of female respondents	72%
% of female-headed households	10%

Average reported monthly income of households (IQD)¹⁰ **356,500**
 % of households earning an income through employment⁶ **70%**

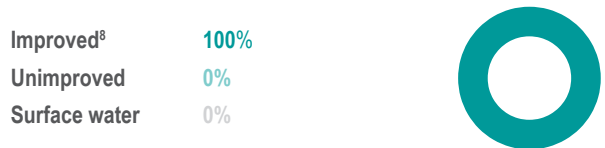
Government was reported as the main source of income with **68%** of households.

Transportation was reported as the secondary source of income with **11%** of households.

Commerce was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **20%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	79%
It is unsafe	79%
It is turbid	71%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

57% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	46%
Not enough container to store the water	30%
Water is too expensive	6%

Among the **25%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	16%
Rely on less preferred drinking sources (unimproved/untreated)	9%
Reduce drinking water consumption	6%

94% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Chamishku Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



96% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

9% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



36% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	75%	25%
Human Faeces	10%	90%
Stagnant water	78%	22%

HYGIENE

12% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **94%**
 Soap is not present at handwashing facility **0%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **6%**

13% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

10% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **4%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school **67%**
 Electricity services negatively affected **67%**
 Loss/damage to households' items **33%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Duhok Governorate Darkar Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Darkar, 67 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	724
Total in-camp IDP population assessed (number of households)	67
Average household size	6
% of female respondents	67%
% of female-headed households	7%

Average reported monthly income of households (IQD) ¹⁰	344,400
% of households earning an income through employment ⁶	66%

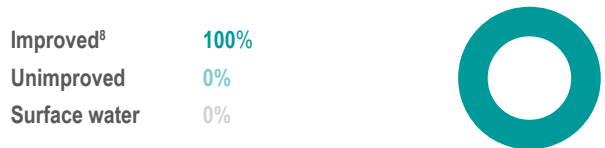
Government was reported as the main source of income with **73%** of households.

Construction was reported as the secondary source of income with **7%** of households.

Education was reported as the tertiary source of income with **7%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **48%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	56%	
It is unsafe	50%	
It is turbid	44%	

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

99% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	91%	
Not enough container to store the water	63%	
Insufficient number of water points	4%	

Among the **73%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	50%	
Rely on less preferred drinking sources (unimproved/untreated)	42%	
Spend money (or credit) on water	11%	

64% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Darkar Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



94% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

1% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



48% of households reported there were insufficient waste containers in the area.

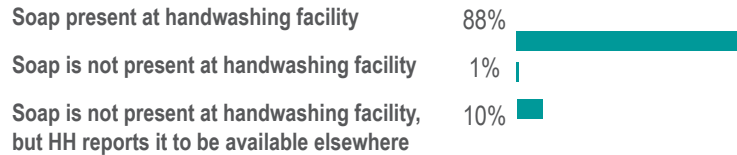
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	66%	34%
Human Faeces	3%	97%
Stagnant water	61%	39%

HYGIENE

90% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



10% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

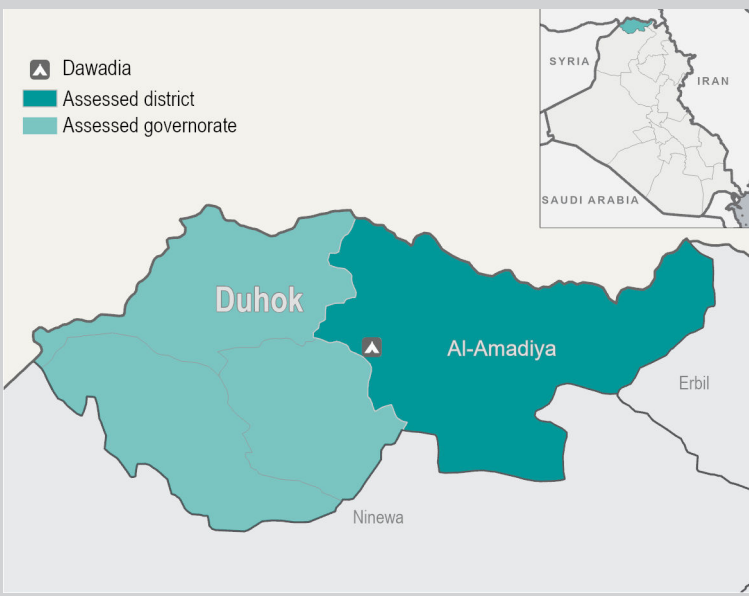
Duhok Governorate Dawadia Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Dawadia, 67 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	634
Total in-camp IDP population assessed (number of households)	67
Average household size	6
% of female respondents	70%
% of female-headed households	4%

Average reported monthly income of households (IQD) ¹⁰	374,200
% of households earning an income through employment ⁶	73%

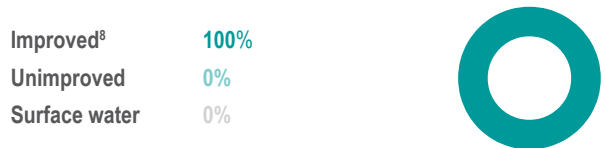
Government was reported as the main source of income with **74%** of households.

Commerce was reported as the secondary source of income with **5%** of households.

Construction was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **67%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	69%
It is turbid	56%
It is unsafe	51%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

90% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	85%
Not enough container to store the water	30%
Water points are not functioning	3%

Among the **45%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	21%
Reduce water consumption for other purposes	16%
Spend money (or credit) on water	7%

91% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Dawadia Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



97% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

1% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

4% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



78% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	15%	85%
Human Faeces	0%	100%
Stagnant water	61%	39%

HYGIENE

73% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **88%**
Soap is not present at handwashing facility **3%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **9%**

3% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

3% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **1%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Erbil Governorate Debaga 1 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Debaga 1, 72 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	1,852
Total in-camp IDP population assessed (number of households)	72
Average household size	6
% of female respondents	47%
% of female-headed households	22%

Average reported monthly income of households (IQD) ¹⁰	281,400
% of households earning an income through employment ⁶	68%

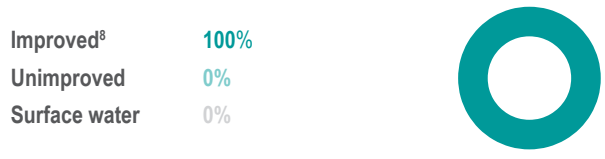
Construction was reported as the main source of income with **45%** of households.

Government was reported as the secondary source of income with **33%** of households.

Cleaner/Cook was reported as the tertiary source of income with **7%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **22%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe	56%
It tastes unpleasant	31%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

7% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	6%
Not enough container to store the water	1%

Among the **38%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	17%
Reduce water consumption for other purposes	14%
Reduce drinking water consumption	13%

96% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Erbil Governorate Debaga 1 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **94%**
Unimproved **6%**
Open defecation¹¹ **0%**



99% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

8% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

13% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



92% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	13%	88%
Human Faeces	0%	100%
Stagnant water	7%	93%

HYGIENE

72% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

4% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

99% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

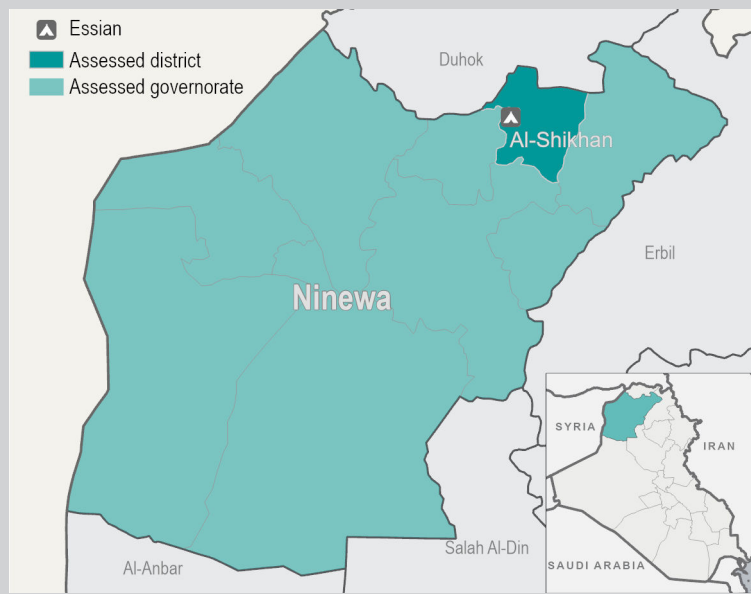
Ninewa Governorate Essian Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Essian, 71 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **2,758**

Total in-camp IDP population assessed (number of households) **71**

Average household size **6**

% of female respondents **69%**

% of female-headed households **13%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **100%**
Unimproved **0%**
Surface water **0%**



Among the **25%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant **72%**
It is turbid **67%**
It is unsafe **56%**

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **330,600**

% of households earning an income through employment⁶ **61%**

Government was reported as the main source of income with **93%** of households.

Education was reported as the secondary source of income with **7%** of households.

NGO/UN was reported as the tertiary source of income with **NA%** of households.

44% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water **39%**
Not enough container to store the water **20%**
Insufficient number of water points **1%**

Among the **24%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes **17%**
Rely on less preferred drinking sources (unimproved/untreated) **11%**
Spend money (or credit) on water **4%**

90% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Essian Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



89% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

3% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

1% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



65% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	45%	55%
Human Faeces	13%	87%
Stagnant water	65%	35%

HYGIENE

23% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **89%**
Soap is not present at handwashing facility **1%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **10%**

11% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

92% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

10% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **7%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Loss/damage to households' items **71%**
Children could not get to school **57%**
Electricity services negatively affected **57%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

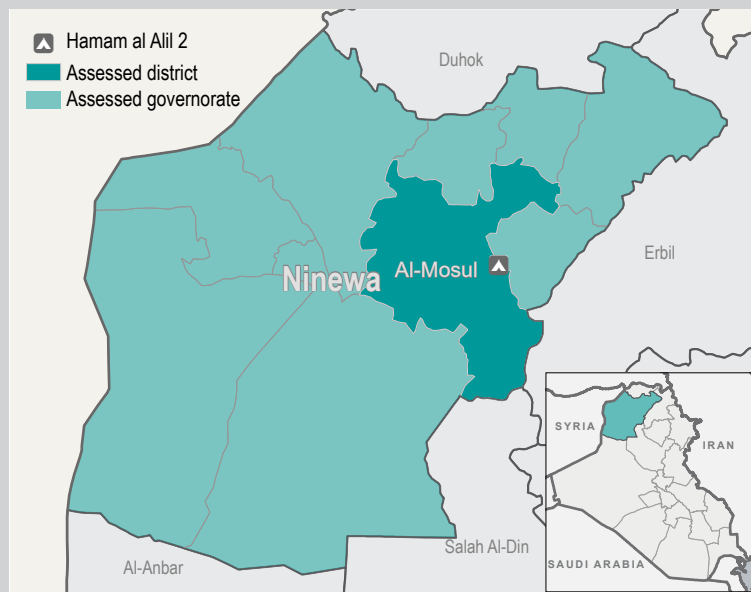
Ninewa Governorate Hamam al Alil 2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Hamam al Alil 2, 72 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	4,425
Total in-camp IDP population assessed (number of households)	72
Average household size	6
% of female respondents	38%
% of female-headed households	33%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved ⁸	100%
Unimproved	0%
Surface water	0%



Among the **64%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid	91%	<div style="width: 91%; height: 10px; background-color: #008080;"></div>
It is unsafe	9%	<div style="width: 9%; height: 10px; background-color: #008080;"></div>
It tastes unpleasant	6%	<div style="width: 6%; height: 10px; background-color: #008080;"></div>

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **290,500**
 % of households earning an income through employment⁶ **24%**

Construction was reported as the main source of income with **25%** of households.

Cleaner/Cook was reported as the secondary source of income with **19%** of households.

Government was reported as the tertiary source of income with **13%** of households.

25% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Waterpoints are too far	18%	<div style="width: 18%; height: 10px; background-color: #008080;"></div>
Waterpoints are difficult to reach	6%	<div style="width: 6%; height: 10px; background-color: #008080;"></div>

Among the **60%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	53%	<div style="width: 53%; height: 10px; background-color: #008080;"></div>
Rely on surface water for drinking water	13%	<div style="width: 13%; height: 10px; background-color: #008080;"></div>
Rely on less preferred sources (unimproved/untreated) for other purposes	3%	<div style="width: 3%; height: 10px; background-color: #008080;"></div>

82% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.



IN-CAMP WASH NEEDS

Ninewa Governorate Hamam al Alil 2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved	100%
Unimproved	3%
Open defecation ¹¹	0%

83% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

53% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

1% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods	100%
Unsafe disposal methods	0%



67% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	42%	58%
Human Faeces	4%	96%
Stagnant water	47%	53%

HYGIENE

44% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility	79%
Soap is not present at handwashing facility	3%
Soap is not present at handwashing facility, but HH reports it to be available elsewhere	18%

17% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

94% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

75% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

13% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **13%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school	89%
Mobility of adults affected	78%
Electricity services negatively affected	78%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

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IN-CAMP WASH NEEDS

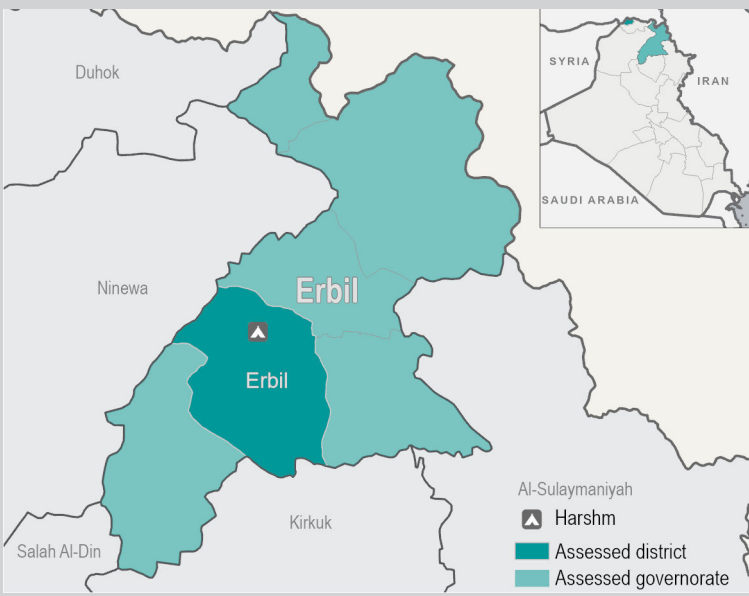
Erbil Governorate Harshm Camp

CONTEXT AND METHODOLOGY

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In Harshm, 59 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	299
Total in-camp IDP population assessed (number of households)	59
Average household size	6
% of female respondents	36%
% of female-headed households	19%

Average reported monthly income of households (IQD) ¹⁰	324,800
% of households earning an income through employment ⁶	86%

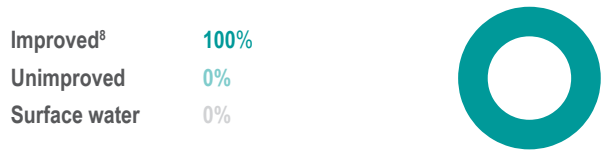
Construction was reported as the main source of income with **42%** of households.

Government was reported as the secondary source of income with **21%** of households.

NGO/UN was reported as the tertiary source of income with **9%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **12%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe	86%
It is turbid	14%
It tastes unpleasant	14%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

5% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Not enough container to store the water	5%
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Among the **27%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	17%
Reduce water consumption for other purposes	10%
Reduce drinking water consumption	7%

97% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

¹ Households could select multiple answer options for this question. Therefore, results may exceed 100%. ² International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ³ Humanitarian Needs Overview (HNO) 2020, November 2019. ⁴ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁵ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁶ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁷ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁸ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁹ Improved does not mean the water is potable. ¹⁰ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹¹ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Erbil Governorate Harshm Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **95%**
Unimproved **5%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

15% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

44% of households reported having access to a private shower.

WASTE

2% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



69% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	24%	76%
Human Faeces	0%	100%
Stagnant water	20%	80%

HYGIENE

78% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **98%**
Soap is not present at handwashing facility **2%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

5% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

97% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **half of camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate Hasansham U2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Hasansham u2, 63 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **953**

Total in-camp IDP population assessed (number of households) **63**

Average household size **6**

% of female respondents **62%**

% of female-headed households **44%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **98%**

Unimproved **2%**

Surface water **0%**



Among the **8%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe **100%**

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **150,300**

% of households earning an income through employment⁶ **38%**

Construction was reported as the main source of income with **33%** of households.

Cleaner/Cook was reported as the secondary source of income with **25%** of households.

Commerce was reported as the tertiary source of income with **17%** of households.

46% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	24%	<div style="width: 24%;"></div>
Insufficient number of water points	19%	<div style="width: 19%;"></div>
Waterpoints are too far	13%	<div style="width: 13%;"></div>

Among the **57%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	29%	<div style="width: 29%;"></div>
Rely on less preferred drinking sources (unimproved/untreated)	25%	<div style="width: 25%;"></div>
Send children to fetch water	14%	<div style="width: 14%;"></div>

83% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ² [Humanitarian Needs Overview \(HNO\) 2020](#), November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.



WASH Cluster
Water Sanitation Hygiene

REACH Informing
more effective
humanitarian action

IN-CAMP WASH NEEDS

Ninewa Governorate Hasansham U2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



89% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

11% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



57% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	8%	92%
Human Faeces	0%	100%
Stagnant water	30%	70%

HYGIENE

54% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

6% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

11% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **11%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school **100%**

Loss/damage to households' items **100%**

People getting sick **86%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **most camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate Hasansham U3 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Hasansham u3, 72 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **1,251**

Total in-camp IDP population assessed (number of households) **72**

Average household size **5**

% of female respondents **57%**

% of female-headed households **38%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **100%**
Unimproved **0%**
Surface water **0%**



Among the **10%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe **86%**
It tastes unpleasant **29%**

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **174,600**

% of households earning an income through employment⁶ **38%**

Government was reported as the main source of income with **21%** of households.

Cleaner/Cook was reported as the secondary source of income with **21%** of households.

Commerce was reported as the tertiary source of income with **16%** of households.

44% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water **22%**
Insufficient number of water points **13%**
Waterpoints are too far **7%**

Among the **54%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated) **35%**
Reduce water consumption for other purposes **19%**
Reduce drinking water consumption **11%**

92% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Hasansham U3 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



97% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

19% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

14% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



67% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	11%	89%
Human Faeces	1%	99%
Stagnant water	40%	60%

HYGIENE

60% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **99%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **1%**

8% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

13% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **13%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school **50%**

Electricity services negatively affected **50%**

People getting sick **50%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

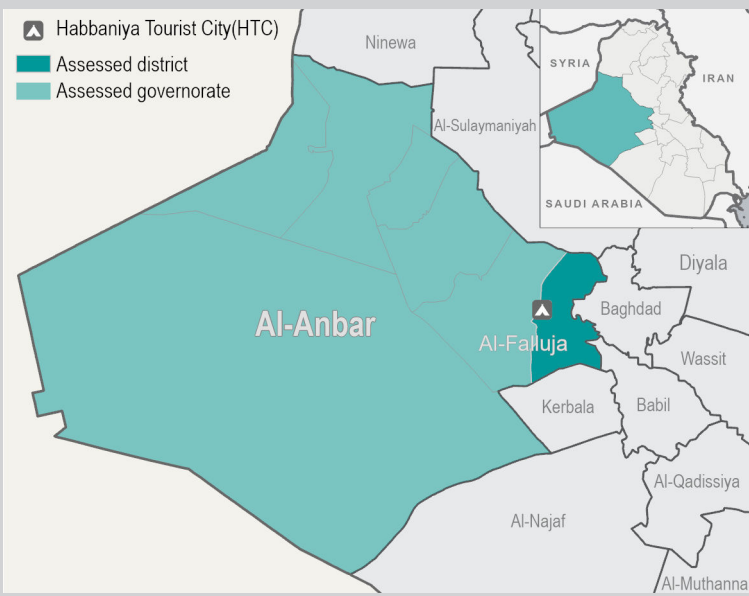
Al-Anbar Governorate Habaniya Tourist City Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Habaniya Tourist City, 59 household surveys were conducted, in addition to 1 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	1,200
Total in-camp IDP population assessed (number of households)	59
Average household size	5
% of female respondents	15%
% of female-headed households	15%

Average reported monthly income of households (IQD) ¹⁰	307,700
% of households earning an income through employment ⁶	85%

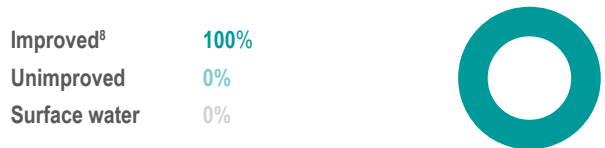
Construction was reported as the main source of income with **48%** of households.

Manufacturing was reported as the secondary source of income with **19%** of households.

Transportation was reported as the tertiary source of income with **10%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **0%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



3% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Waterpoints are too far	2%
Insufficient number of water points	2%

Among the **15%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	5%
Rely on surface water for drinking water	3%
Rely on less preferred sources (unimproved/untreated) for other purposes	3%

97% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Al-Anbar Governorate Habaniya Tourist City Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

3% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



63% of households reported there were insufficient waste containers in the area.

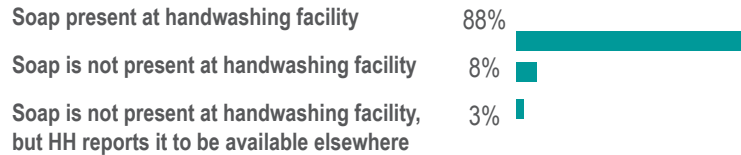
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	8%	92%
Human Faeces	0%	100%
Stagnant water	0%	100%

HYGIENE

98% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

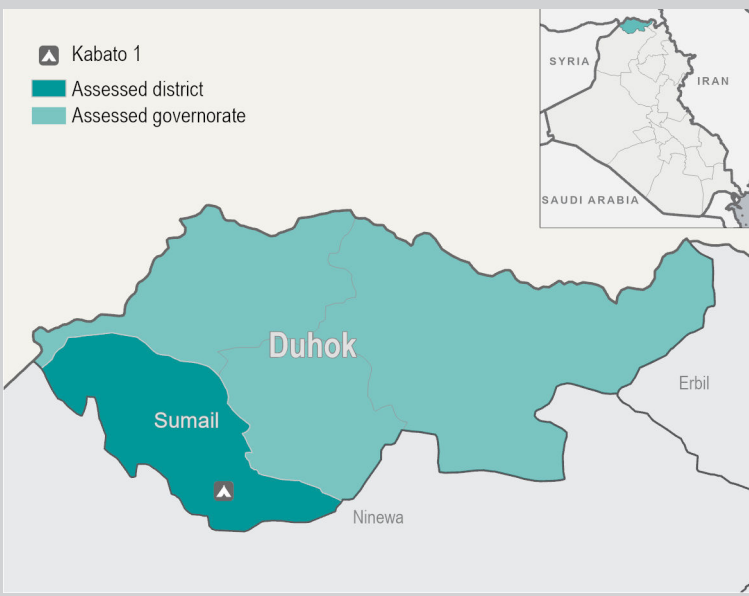
Duhok Governorate Kabarto 1 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kabarto 1, 70 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,562
Total in-camp IDP population assessed (number of households)	70
Average household size	7
% of female respondents	74%
% of female-headed households	6%

Average reported monthly income of households (IQD)¹⁰ **340,800**
 % of households earning an income through employment⁶ **79%**

Government was reported as the main source of income with **68%** of households.

Construction was reported as the secondary source of income with **12%** of households.

Education was reported as the tertiary source of income with **4%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **41%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	76%
It is turbid	69%
It is unsafe	66%

71% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	66%
Not enough container to store the water	31%
Water is too expensive	17%

Among the **43%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	23%
Spend money (or credit) on water	17%
Reduce drinking water consumption	16%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

76% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Kabarto 1 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



93% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

4% of households reported having access to a private shower.

WASTE

3% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



20% of households reported there were insufficient waste containers in the area.

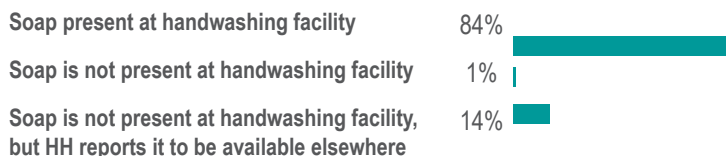
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	77%	23%
Human Faeces	9%	91%
Stagnant water	69%	31%

HYGIENE

14% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



17% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

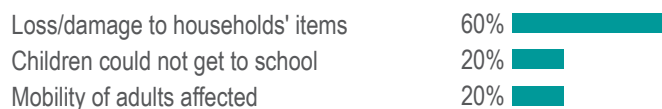
93% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

13% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **9%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:



KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

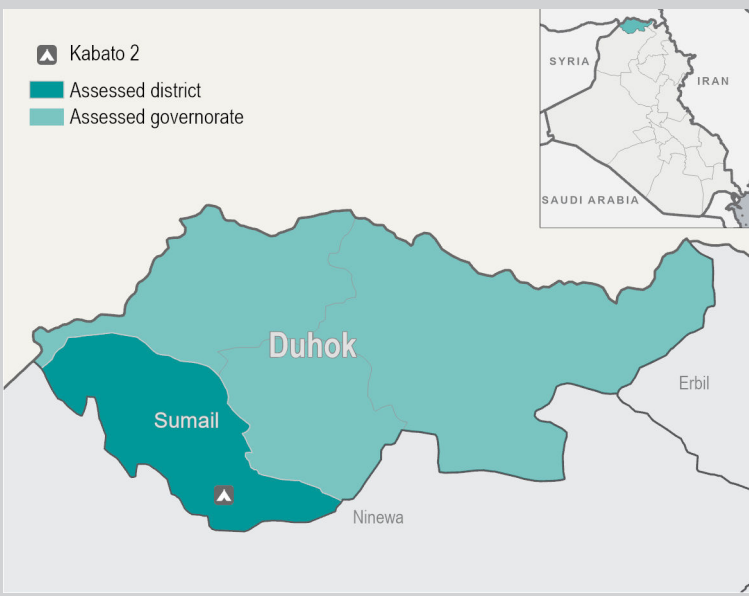
Duhok Governorate Kabarto 2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kabarto 2, 72 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,598
Total in-camp IDP population assessed (number of households)	72
Average household size	6
% of female respondents	69%
% of female-headed households	11%

Average reported monthly income of households (IQD)¹⁰ **374,500**
 % of households earning an income through employment⁶ **82%**

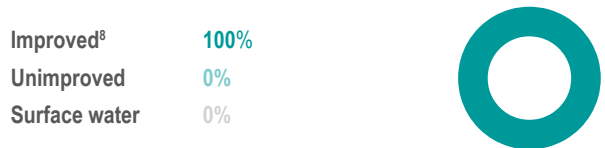
Government was reported as the main source of income with **61%** of households.

Construction was reported as the secondary source of income with **18%** of households.

Commerce was reported as the tertiary source of income with **9%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

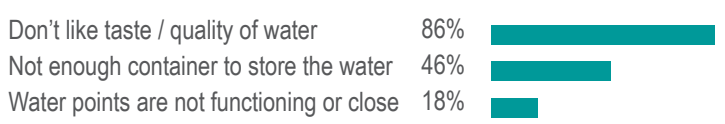


Among the **68%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

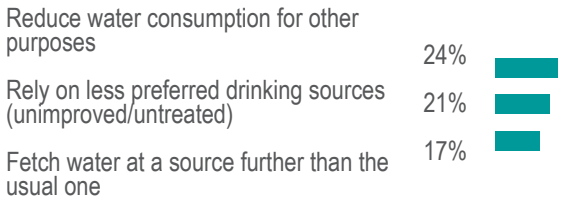


100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

94% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **46%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



53% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Kabarto 2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



92% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

7% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



25% of households reported there were insufficient waste containers in the area.

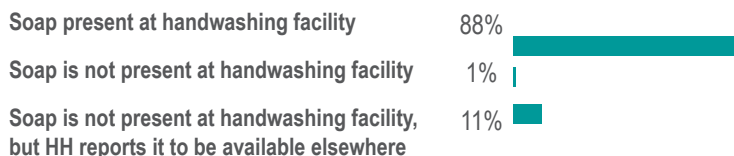
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	85%	15%
Human Faeces	8%	92%
Stagnant water	81%	19%

HYGIENE

8% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



18% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

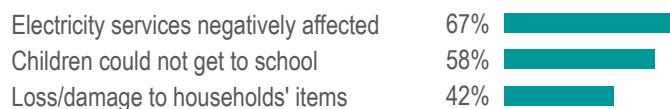
90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

22% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **11%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:



KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Salah-Al-Din Governorate Karamah Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Karamah, 61 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **419**

Total in-camp IDP population assessed (number of households) **61**

Average household size **7**

% of female respondents **80%**

% of female-headed households **80%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **100%**
Unimproved **0%**
Surface water **0%**



Among the **56%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid **100%**

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **190,400**

% of households earning an income through employment⁶ **18%**

Commerce was reported as the main source of income with **57%** of households.

NGO/UN was reported as the secondary source of income with **29%** of households.

Government was reported as the tertiary source of income with **14%** of households.

33% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Waterpoints are too far **26%**
Not enough container to store the water **7%**
Don't like taste / quality of water **3%**

Among the **56%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated) **42%**
Spend money (or credit) on water **7%**
Rely on surface water for drinking water **3%**

70% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.



WASH Cluster
Water Sanitation Hygiene

REACH Informing
more effective
humanitarian action

IN-CAMP WASH NEEDS

Salah-Al-Din Governorate Karamah Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **97%**
Unimproved **0%**
Open defecation¹¹ **0%**



77% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

62% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

2% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



54% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	31%	69%
Human Faeces	3%	97%
Stagnant water	23%	77%

HYGIENE

51% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **56%**
Soap is not present at handwashing facility **21%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **23%**

20% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

70% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

56% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

8% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **5%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school **100%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Duhok Governorate Khanke Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Khanke, 73 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,836
Total in-camp IDP population assessed (number of households)	73
Average household size	7
% of female respondents	62%
% of female-headed households	4%

Average reported monthly income of households (IQD) ¹⁰	483,900
% of households earning an income through employment ⁶	67%

Government was reported as the main source of income with **47%** of households.

Construction was reported as the secondary source of income with **27%** of households.

NGO/UN was reported as the tertiary source of income with **13%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

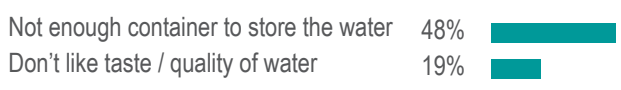


Among the **33%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

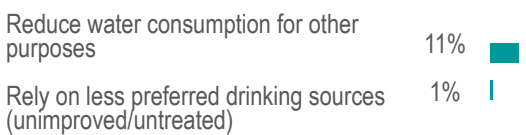


100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

55% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **12%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



89% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Khanke Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



89% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

18% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

59% of households reported having access to a private shower.

WASTE

4% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



30% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	58%	42%
Human Faeces	1%	99%
Stagnant water	79%	21%

HYGIENE

25% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **99%**
 Soap is not present at handwashing facility **0%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **1%**

22% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

99% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

99% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

16% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **14%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

People getting sick **100%**
 Loss/damage to households' items **50%**
 Children could not get to school **33%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate Khazer M1 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Khazer m1, 69 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **1,348**

Total in-camp IDP population assessed (number of households) **69**

Average household size **6**

% of female respondents **52%**

% of female-headed households **35%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **99%**

Unimproved **1%**

Surface water **0%**



Among the **9%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe **100%**

96% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ² [Humanitarian Needs Overview \(HNO\) 2020](#), November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

Average reported monthly income of households (IQD)¹⁰ **159,000**

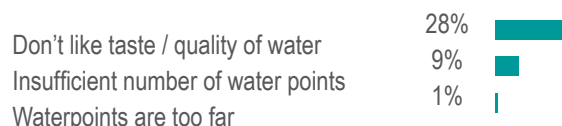
% of households earning an income through employment⁶ **38%**

Government was reported as the main source of income with **25%** of households.

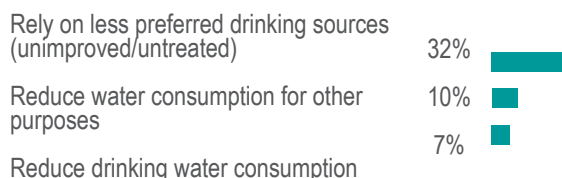
Cleaner/Cook was reported as the secondary source of income with **25%** of households.

Construction was reported as the tertiary source of income with **19%** of households.

32% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **43%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



91% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.



WASH Cluster
Water Sanitation Hygiene

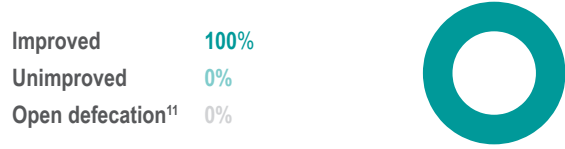
REACH Informing
more effective
humanitarian action

IN-CAMP WASH NEEDS

Ninewa Governorate Khazer M1 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰



96% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

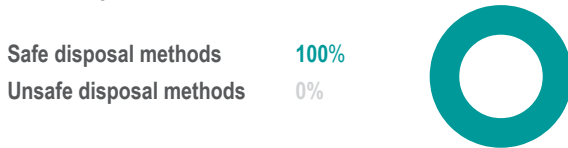
22% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

4% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³



65% of households reported there were insufficient waste containers in the area.

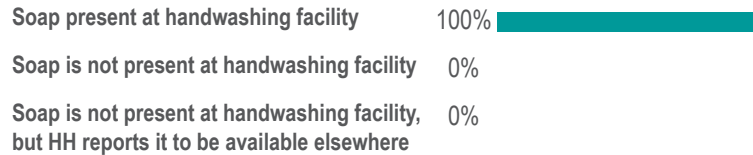
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	15%	85%
Human Faeces	0%	100%
Stagnant water	19%	81%

HYGIENE

45% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



7% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

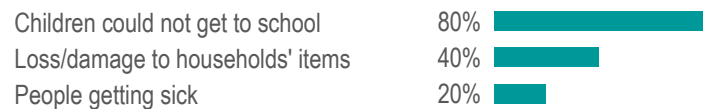
96% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

7% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **7%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

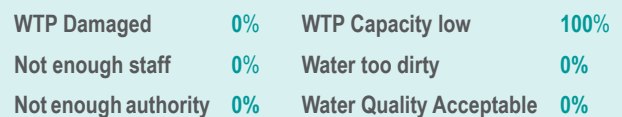


KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **most camp residents** had access to functional handwashing facilities.

Among 1 KIs reporting the water in the area was not clean enough to drink, top reasons were:



*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Kirkuk Governorate Laylan 2 Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Laylan 2, 63 household surveys were conducted, in addition to 2 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	504
Total in-camp IDP population assessed (number of households)	63
Average household size	7
% of female respondents	35%
% of female-headed households	13%

Average reported monthly income of households (IQD) ¹⁰	284,600
% of households earning an income through employment ⁶	75%

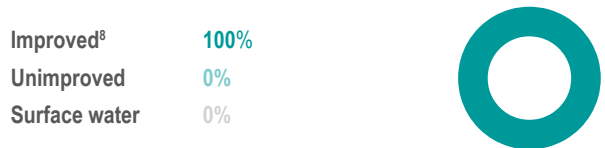
Construction was reported as the main source of income with **50%** of households.

Government was reported as the secondary source of income with **27%** of households.

NGO/UN was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **19%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid	50%
It tastes unpleasant	50%

21% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	10%
Not enough container to store the water	8%

Among the **29%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	11%
Reduce water consumption for other purposes	9%
Reduce drinking water consumption	4%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

97% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Kirkuk Governorate Laylan 2 Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

16% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



97% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	24%	76%
Human Faeces	14%	86%
Stagnant water	43%	57%

HYGIENE

100% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

16% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

94% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

14% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **10%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 2 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Kirkuk Governorate Laylan IDP Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Laylan IDP, 60 household surveys were conducted, in addition to 4 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	1,109
Total in-camp IDP population assessed (number of households)	60
Average household size	7
% of female respondents	40%
% of female-headed households	17%

Average reported monthly income of households (IQD) ¹⁰	266,900
% of households earning an income through employment ⁶	80%

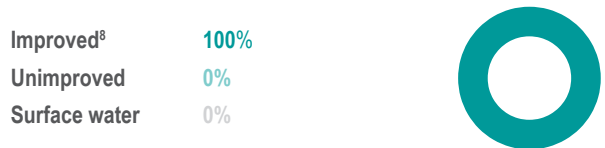
Construction was reported as the main source of income with **53%** of households.

NGO/UN was reported as the secondary source of income with **19%** of households.

Government was reported as the tertiary source of income with **6%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **13%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid	75%
It tastes unpleasant	25%

2% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	2%
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Among the **25%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	22%
Reduce water consumption for other purposes	3%
Reduce drinking water consumption	2%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Kirkuk Governorate Laylan IDP Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

15% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



100% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	23%	77%
Human Faeces	13%	87%
Stagnant water	42%	58%

HYGIENE

90% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

17% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

12% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **12%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 4 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

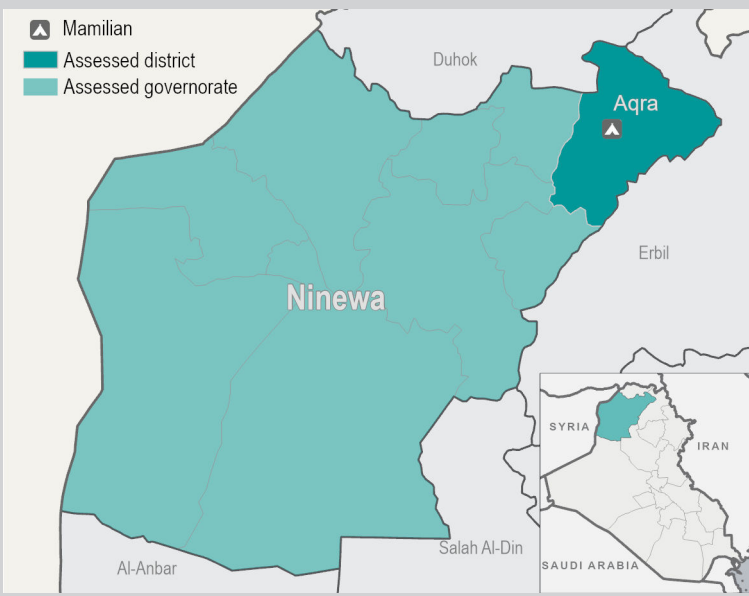
Ninewa Governorate Mamilian Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Mamilian, 58 household surveys were conducted, in addition to 3 KIIs.

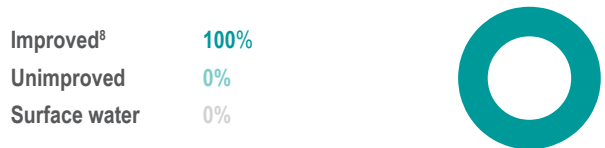


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	203
Total in-camp IDP population assessed (number of households)	58
Average household size	6
% of female respondents	36%
% of female-headed households	16%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **10%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe	50%
It tastes unpleasant	17%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD) ¹⁰	307,400
% of households earning an income through employment ⁶	69%

Construction was reported as the main source of income with **47%** of households.

Government was reported as the secondary source of income with **28%** of households.

Agriculture was reported as the tertiary source of income with **9%** of households.

3% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Not enough container to store the water	2%
Don't like taste / quality of water	2%

Among the **33%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	21%
Reduce drinking water consumption	9%
Reduce water consumption for other purposes	9%

98% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Mamilian Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

9% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



88% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	7%	93%
Human Faeces	0%	100%
Stagnant water	16%	84%

HYGIENE

64% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**
 Soap is not present at handwashing facility **0%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

97% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

7% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **7%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **half of camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

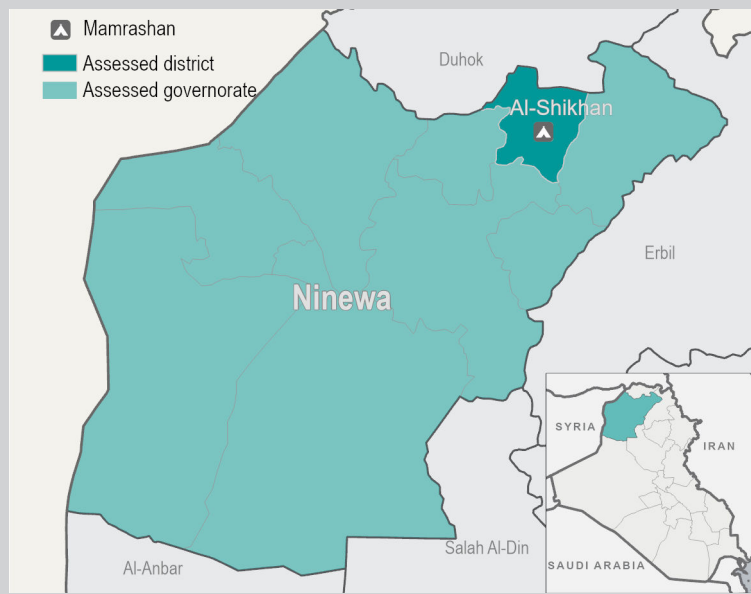
Ninewa Governorate Mamrashan Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Mamrashan, 67 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **1,735**

Total in-camp IDP population assessed (number of households) **67**

Average household size **6**

% of female respondents **25%**

% of female-headed households **7%**

Average reported monthly income of households (IQD)¹⁰ **390,400**

% of households earning an income through employment⁶ **79%**

Construction was reported as the main source of income with **48%** of households.

Government was reported as the secondary source of income with **29%** of households.

Agriculture was reported as the tertiary source of income with **10%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **99%**
 Unimproved **1%**
 Surface water **0%**



Among the **18%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is unsafe **75%**
 It tastes unpleasant **25%**

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

1% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Not enough container to store the water **1%**

Among the **31%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated) **20%**
 Reduce water consumption for other purposes **9%**
 Reduce drinking water consumption **8%**

97% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Mamrashan Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **97%**
 Unimproved **3%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

12% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



72% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	14%	86%
Human Faeces	0%	100%
Stagnant water	9%	91%

HYGIENE

99% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere in **0%**

0% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

1% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **1%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **most camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate Qayyarah-Jad'ah Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

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In Qayyarah-Jad'ah, 141 household surveys were conducted, in addition to 6 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families)⁵ **16,369**

Total in-camp IDP population assessed (number of households) **141**

Average household size **6**

% of female respondents **58%**

% of female-headed households **58%**

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved⁸ **100%**
Unimproved **0%**
Surface water **0%**



Among the **62%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It is turbid **94%**
It tastes unpleasant **8%**

99% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **342,600**

% of households earning an income through employment⁶ **23%**

Construction was reported as the main source of income with **43%** of households.

Commerce was reported as the secondary source of income with **22%** of households.

Government was reported as the tertiary source of income with **22%** of households.

38% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Waterpoints are too far **28%**
Waterpoints are difficult to reach **7%**
Fetching water is a dangerous activity **1%**

Among the **62%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated) **57%**
Rely on surface water for drinking water **5%**
Rely on less preferred sources (unimproved/untreated) for other purposes **2%**

84% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Qayyarah-Jad'ah Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **99%**
Unimproved **1%**
Open defecation¹¹ **0%**



79% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

68% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

1% of households reported having access to a private shower.

WASTE

1% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



60% of households reported there were insufficient waste containers in the area.

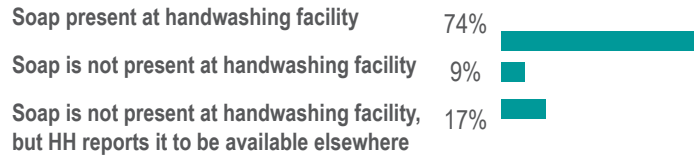
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	24%	76%
Human Faeces	6%	94%
Stagnant water	26%	74%

HYGIENE

46% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



15% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

89% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

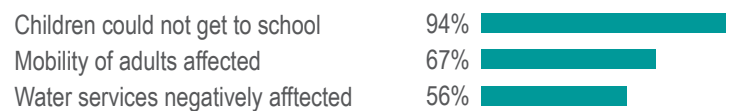
70% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

13% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **12%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:



KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **half of camp residents** had access to functional handwashing facilities.

Among 1 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	50%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	50%	Water Quality Acceptable	0%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

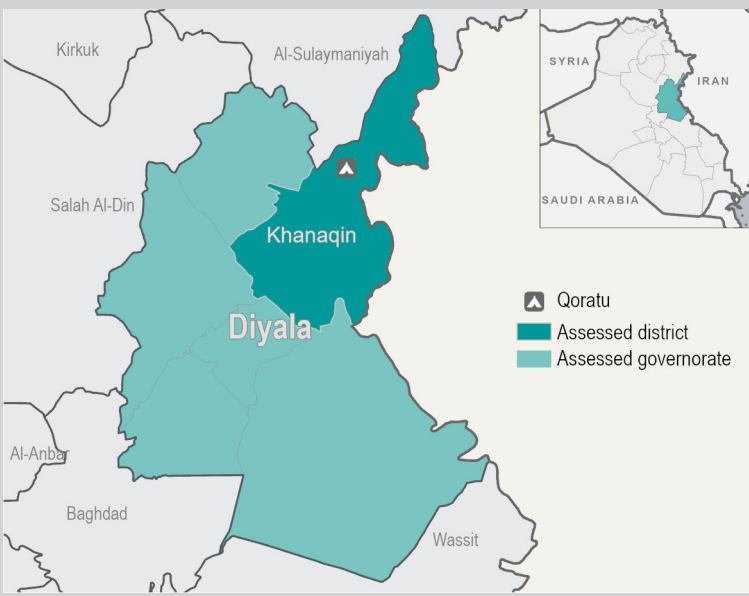
Diyala Governorate Qoratu Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Qoratu, 50 household surveys were conducted, in addition to 4 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	247
Total in-camp IDP population assessed (number of households)	50
Average household size	5
% of female respondents	22%
% of female-headed households	16%

Average reported monthly income of households (IQD) ¹⁰	354,400
% of households earning an income through employment ⁶	76%

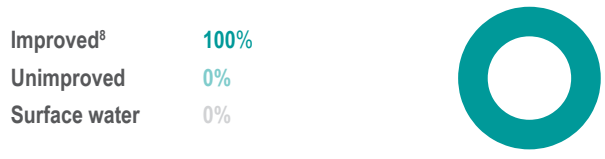
Construction was reported as the main source of income with **41%** of households.

Government was reported as the secondary source of income with **19%** of households.

Transportation was reported as the tertiary source of income with **15%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

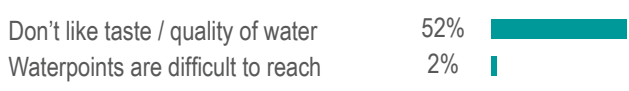


Among the **64%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

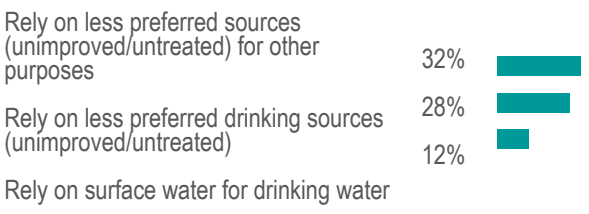


100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

52% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **48%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Diyala Governorate Qoratu Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

2% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



96% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	0%	100%
Human Faeces	0%	100%
Stagnant water	36%	64%

HYGIENE

92% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **96%**
 Soap is not present at handwashing facility **0%**
 Soap is not present at handwashing facility, but HH reports it to be available elsewhere **4%**

0% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

98% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
 NA **NA%**
 NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
 Not enough staff **0%** Water too dirty **0%**
 Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

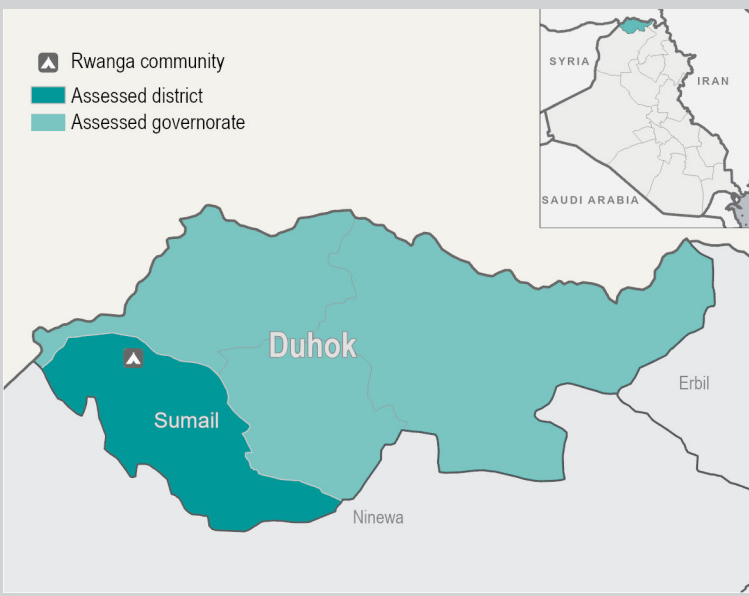
Duhok Governorate Rwanga Community Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Rwanga Community, 72 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	2,619
Total in-camp IDP population assessed (number of households)	72
Average household size	7
% of female respondents	68%
% of female-headed households	4%

Average reported monthly income of households (IQD)¹⁰ **392,000**
 % of households earning an income through employment⁶ **72%**

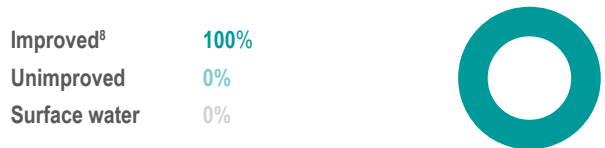
Government was reported as the main source of income with **65%** of households.

Education was reported as the secondary source of income with **10%** of households.

Agriculture was reported as the tertiary source of income with **5%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **68%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	67%
It is unsafe	65%
It is turbid	51%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

97% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	96%
Not enough container to store the water	38%
Water is too expensive	8%

Among the **46%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	22%
Rely on less preferred drinking sources (unimproved/untreated)	19%
Spend money (or credit) on water	19%

90% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Rwanga Community Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



90% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

11% of households reported having access to a private shower.

WASTE

11% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



57% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	33%	67%
Human Faeces	0%	100%
Stagnant water	64%	36%

HYGIENE

25% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **90%**
Soap is not present at handwashing facility **0%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **10%**

13% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

4% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **3%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **100%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Duhok Governorate Shariya Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Shariya, 71 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	3,099
Total in-camp IDP population assessed (number of households)	71
Average household size	7
% of female respondents	72%
% of female-headed households	14%

Average reported monthly income of households (IQD) ¹⁰	296,400
% of households earning an income through employment ⁶	72%

Government was reported as the main source of income with **73%** of households.

Construction was reported as the secondary source of income with **7%** of households.

Cleaner/Cook was reported as the tertiary source of income with **7%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **30%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	81%
It is unsafe	67%
It is turbid	57%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

79% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	63%
Not enough container to store the water	46%
Waterpoints are too far	11%

Among the **52%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Rely on less preferred drinking sources (unimproved/untreated)	34%
Reduce water consumption for other purposes	31%
Spend money (or credit) on water	11%

89% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Duhok Governorate Shariya Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **99%**
Unimproved **1%**
Open defecation¹¹ **0%**



31% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

46% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

89% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



44% of households reported there were insufficient waste containers in the area.

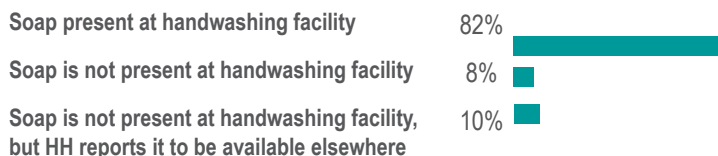
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	68%	32%
Human Faeces	21%	79%
Stagnant water	76%	24%

HYGIENE

10% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



8% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

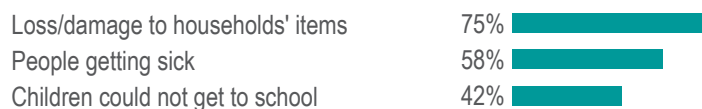
90% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

24% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **21%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:



KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 0 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Ninewa Governorate Sheikhan Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Sheikhan, 68 household surveys were conducted, in addition to 3 KIIs.



DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	844
Total in-camp IDP population assessed (number of households)	68
Average household size	6
% of female respondents	78%
% of female-headed households	10%

Average reported monthly income of households (IQD) ¹⁰	315,600
% of households earning an income through employment ⁶	71%

Government was reported as the main source of income with **92%** of households.

Medical was reported as the secondary source of income with **8%** of households.

Commerce was reported as the tertiary source of income with **NA%** of households.

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷

Improved ⁸	100%
Unimproved	0%
Surface water	0%



Among the **78%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹

It tastes unpleasant	83%
It is turbid	42%
It is unsafe	28%

100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

99% of households reported facing problems related to water access, most commonly reported barriers were:⁹

Don't like taste / quality of water	99%
Not enough container to store the water	19%
Water is too expensive	1%

Among the **41%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹

Reduce water consumption for other purposes	26%
Rely on less preferred drinking sources (unimproved/untreated)	22%
Fetch water at a source further than the usual one	6%

97% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Ninewa Governorate Sheikhan Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
 Unimproved **0%**
 Open defecation¹¹ **0%**



99% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

4% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
 Unsafe disposal methods **0%**



50% of households reported there were insufficient waste containers in the area.

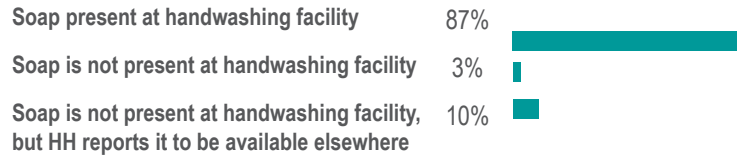
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	54%	46%
Human Faeces	9%	91%
Stagnant water	66%	34%

HYGIENE

6% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):



6% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

97% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

91% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

16% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **6%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:



KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **zero camp residents** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Baghdad Governorate Al-Ahel Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al-Ahel, 53 household surveys were conducted, in addition to 1 KIIs.



DEMOGRAPHICS & LIVELIHOODS

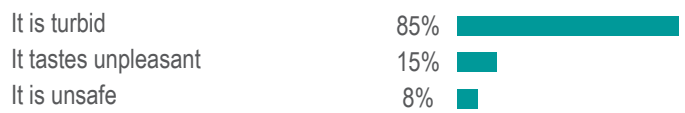
Total estimated in-camp IDP population (number of families) ⁵	26,712
Total in-camp IDP population assessed (number of households)	53
Average household size	5
% of female respondents	8%
% of female-headed households	8%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **25%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD) ¹⁰	293,400
% of households earning an income through employment ⁶	77%

Commerce was reported as the main source of income with **29%** of households.

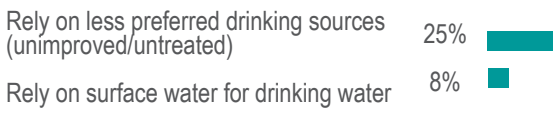
Construction was reported as the secondary source of income with **29%** of households.

Agriculture was reported as the tertiary source of income with **25%** of households.

2% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **26%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Baghdad Governorate Al-Ahel Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

13% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



83% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	11%	89%
Human Faeces	2%	98%
Stagnant water	0%	100%

HYGIENE

98% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

92% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

26% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **26%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Mobility of adults affected **85%**

Electricity services negatively affected **69%**

Water services negatively affected **69%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among **0** KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	0%	WTP Capacity low	0%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	100%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

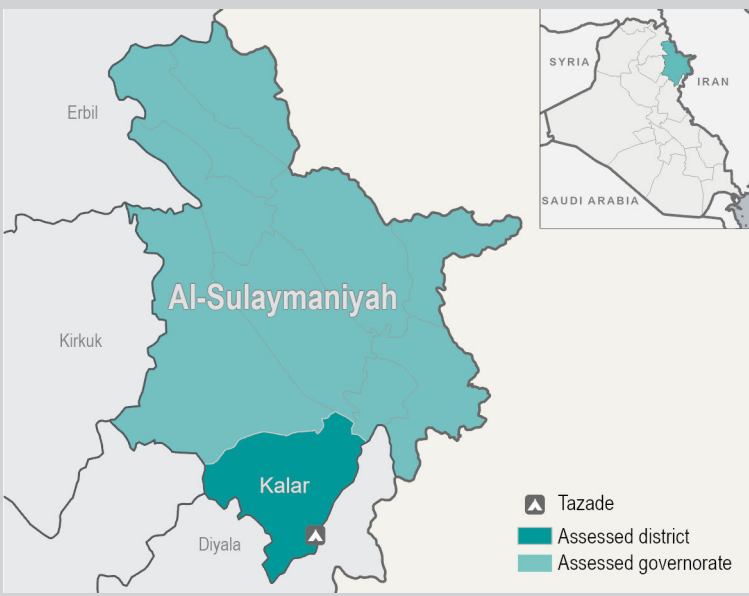
Al-Sulaymaniyah Governorate Tazade Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Tazade, 59 household surveys were conducted, in addition to 1 KIIs.

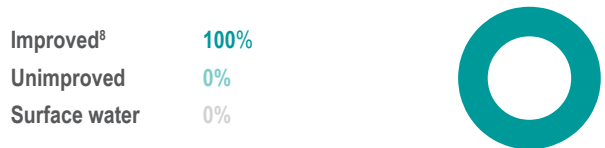


DEMOGRAPHICS & LIVELIHOODS

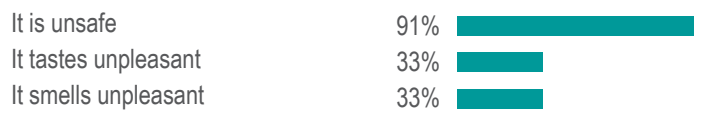
Total estimated in-camp IDP population (number of families) ⁵	175
Total in-camp IDP population assessed (number of households)	59
Average household size	5
% of female respondents	32%
% of female-headed households	19%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **78%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

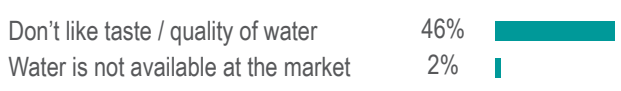
Average reported monthly income of households (IQD)¹⁰ **408,700**
 % of households earning an income through employment⁶ **76%**

Construction was reported as the main source of income with **36%** of households.

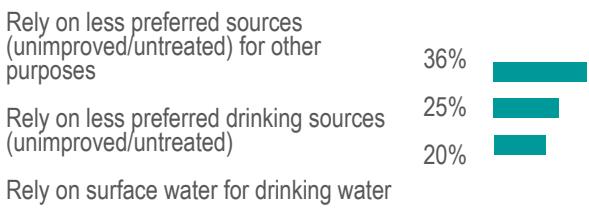
Government was reported as the secondary source of income with **27%** of households.

Education was reported as the tertiary source of income with **14%** of households.

47% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **42%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Al-Sulaymaniyah Governorate Tazade Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

0% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



95% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	0%	100%
Human Faeces	0%	100%
Stagnant water	3%	97%

HYGIENE

100% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **100%**

Soap is not present at handwashing facility **0%**

Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

0% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 1 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged	50%	WTP Capacity low	50%
Not enough staff	0%	Water too dirty	0%
Not enough authority	0%	Water Quality Acceptable	0%

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Kirkuk Governorate Yahyawa Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Yahyawa, 68 household surveys were conducted, in addition to 3 KIIs.

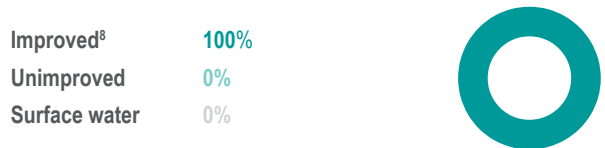


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	497
Total in-camp IDP population assessed (number of households)	68
Average household size	6
% of female respondents	34%
% of female-headed households	13%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **72%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

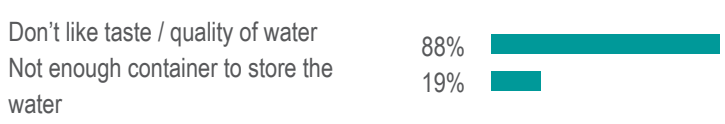
Average reported monthly income of households (IQD)¹⁰ **370,900**
 % of households earning an income through employment⁶ **68%**

Construction was reported as the main source of income with **44%** of households.

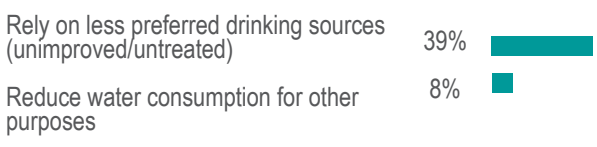
Government was reported as the secondary source of income with **25%** of households.

NGO/UN was reported as the tertiary source of income with **17%** of households.

91% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **49%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



96% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ² Humanitarian Needs Overview (HNO) 2020, November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ International Organisation for Migration (IOM) Displacement Tracking Matrix (DTM), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Kirkuk Governorate Yahyawa Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **99%**
Unimproved **1%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

100% of households reported having access to a private shower.

WASTE

6% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



78% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	66%	34%
Human Faeces	10%	90%
Stagnant water	59%	41%

HYGIENE

97% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **99%**
Soap is not present at handwashing facility **0%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **1%**

10% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

100% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

100% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

71% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **65%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

Children could not get to school **74%**
Mobility of adults affected **60%**
Loss/damage to households' items **20%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 3 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **0%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines with slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool; it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.

IN-CAMP WASH NEEDS

Baghdad Governorate Zayona Camp

CONTEXT AND METHODOLOGY

Roughly two years after the end of major military operations in Iraq against the so-called Islamic State of Iraq and the Levant (ISIL), Iraq is shifting from a state of emergency to a phase of recovery. As of November 2019, 4.5 million returns have been reported, while 1.44 million Internally Displaced Persons (IDPs) remain displaced of whom an estimated 300,000 live inside of camps.¹ Against a backdrop of ongoing camp closures, IDPs are increasingly moving to non-camp locations or returning to their area of origin.² In 2020, 1.2 million returnees and 285,000 IDPs are estimated to remain in need of Water Sanitation and Hygiene (WASH) assistance.

On behalf of the Iraq WASH Cluster, REACH conducted an assessment to provide an evidence-based overview of the needs, gaps and priorities in 39 accessible IDP camps across Iraq with at least 200 IDP families according to the Camp Coordination and Camp Management (CCCM) Cluster's data. Nationwide 2,591 household level surveys were conducted in-camp, as well as 130 key informant interviews (KIIs) with WASH Project Managers, Camp Managers and Camp Officers.³ Data collection was carried out from 22 September to 31 December 2019. At camp level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Zayona, 51 household surveys were conducted, in addition to 1 KIIs.

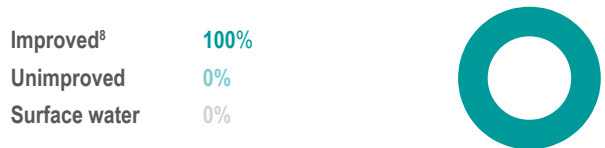


DEMOGRAPHICS & LIVELIHOODS

Total estimated in-camp IDP population (number of families) ⁵	113
Total in-camp IDP population assessed (number of households)	51
Average household size	4
% of female respondents	16%
% of female-headed households	16%

WATER

Proportion of households reporting the use of an improved primary drinking water source in the 30 days prior to data collection:⁷



Among the **27%** of households that reported (always or sometimes) treating the water before drinking it, the most commonly reported reasons were:⁹



100% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Average reported monthly income of households (IQD)¹⁰ **426,600**
 % of households earning an income through employment⁶ **88%**

Commerce was reported as the main source of income with **37%** of households.

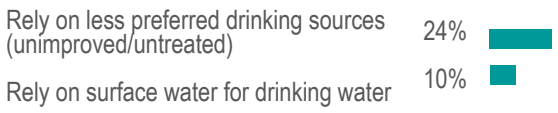
Hotels/Restaurants was reported as the secondary source of income with **20%** of households.

Construction was reported as the tertiary source of income with **13%** of households.

2% of households reported facing problems related to water access, most commonly reported barriers were:⁹



Among the **33%** of households that reported engaging in coping mechanisms for lack of access to water, the most commonly reported reasons were:⁹



100% of households reported being (very) satisfied with regards to access to water in the 30 days prior to data collection.

* Households could select multiple answer options for this question. Therefore, results may exceed 100%.¹ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ² [Humanitarian Needs Overview \(HNO\) 2020](#), November 2019. ³ Key informants on sub-district level were professionals with the Directorate of Water, members of local government and municipal services management identified by the WASH Cluster and other WASH professionals. ⁴ [International Organisation for Migration \(IOM\) Displacement Tracking Matrix \(DTM\)](#), October 2019. ⁵ Number of families is based on the average family size according to IOM-DTM, which is 6 family members. ⁶ Both formal and informal employment is included here: income from own cash crop farming; income from own livestock farming; income from rent/business/sales of good or services; unskilled daily labour / no contract; formal employment with contract. ⁷ Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, as defined by JMP (<https://washdata.org/monitoring/drinking-water>). Improved water sources include piped water into compound, piped water connected to public tap, borehole, protected well, protected rainwater tank, protected spring, bottled water, purchased water, water trucking. Unimproved water sources include illegal connection to piped network, unprotected rainwater tank, unprotected well, unprotected spring. Surface water means from a river, dam, lake, pond, stream, canal. ⁸ Improved does not mean the water is potable. ⁹ Subsets may have a lower confidence level and a wider margin of error, coping mechanisms were reported over the last 7 days. ¹⁰ 1000IQD/0.847USD XE March 2020.

IN-CAMP WASH NEEDS

Baghdad Governorate Zayona Camp

SANITATION

Proportion of households reporting using an improved sanitation facility:¹⁰

Improved **100%**
Unimproved **0%**
Open defecation¹¹ **0%**



100% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

6% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities over the last 7 days.¹²

12% of households reported having access to a private shower.

WASTE

0% of households reported using informal waste disposal methods (burning, burying, throw into the streets).

Proportion of households reporting having access to safe waste water disposal methods.¹³

Safe disposal methods **100%**
Unsafe disposal methods **0%**



86% of households reported there were insufficient waste containers in the area.

Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	2%	98%
Human Faeces	2%	98%
Stagnant water	0%	100%

HYGIENE

100% of households reported having private handwashing facilities.¹⁴

Soap presence in camp (observed by enumerators):

Soap present at handwashing facility **96%**
Soap is not present at handwashing facility **4%**
Soap is not present at handwashing facility, but HH reports it to be available elsewhere **0%**

2% of households reported having household members who had suffered from diarrhoea, cholera and/or skin/eye infection in the two weeks prior to data collection.

98% of households reported female members in their household had access to menstrual hygiene materials.¹⁵

96% of households reported having access to sufficient hygiene materials.¹⁶

FLOODS

0% of households reported their area experienced flooding in the 12 months prior to data collection.

Among households reporting to experience flooding, **0%** reported damage to their shelter due to the flooding.¹⁷

Of the households that reported their area has experienced flooding in the 12 months prior to data collection:

NA **NA%**
NA **NA%**
NA **NA%**

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs described that **every camp resident** had access to functional handwashing facilities.

Among 1 KIs reporting the water in the area was not clean enough to drink, top reasons were:

WTP Damaged **0%** WTP Capacity low **0%**
Not enough staff **0%** Water too dirty **0%**
Not enough authority **0%** Water Quality Acceptable **0%**

*Households could select multiple answer options for this question. Therefore, results may exceed 100%. ¹⁰ Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilet, ventilated improved pit (VIP) latrines or pit latrines without a slab and platform. Unimproved facilities include: pit latrines without a slab or platform, hanging latrines or bucket latrines (According to the JMP, <https://washdata.org/monitoring/sanitation>). ¹¹ Open defecation: Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste (JMP). ¹² Coping strategies were: relying on a less preferred sanitation facilities (latrines/toilets); going to a sanitation facility (latrine/toilet) in a dangerous place; defecating in the open. ¹³ Safe ways of waste water disposal are: covered and lined septic tank/cesspool: it is connected to a communal lined drainage and to the sewage. Unsafe waste water disposal methods include: a hand dug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available. ¹⁴ Handwashing ladder: 'basic' (availability of private handwashing facility on premises with soap and water), 'limited' (availability of handwashing facility on premises without soap, water or shared with other households) and 'no facility' (no handwashing facility on premises), according to the JMP (<https://washdata.org/monitoring/hygiene>). ¹⁵ Question was asked to both male and female respondents. ¹⁶ Hygiene items include sleeping mats, blankets, jerry can (10L), jerry can (20L), laundry detergent, bath soap, sodium dichloroisocyanurate (NaDCC) disinfection tablets. ¹⁷ Subsets may have a lower confidence level and a wider margin of error. ¹⁸ Ibid. ¹⁹ This is based on the number of WTPs per sub-district, as reported by the KIs.