OUT-OF-CAMP WASH NEEDS

Iraq
December 2019

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 1.09 outside 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 57 accessible districts across Iraq with at least 200 returnee or IDP families.[3] Nationwide 9,069 household level surveys were conducted with out-of-camp IDPs, returnees and host community, as well as 211 key informant interviews (KIIs).[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.

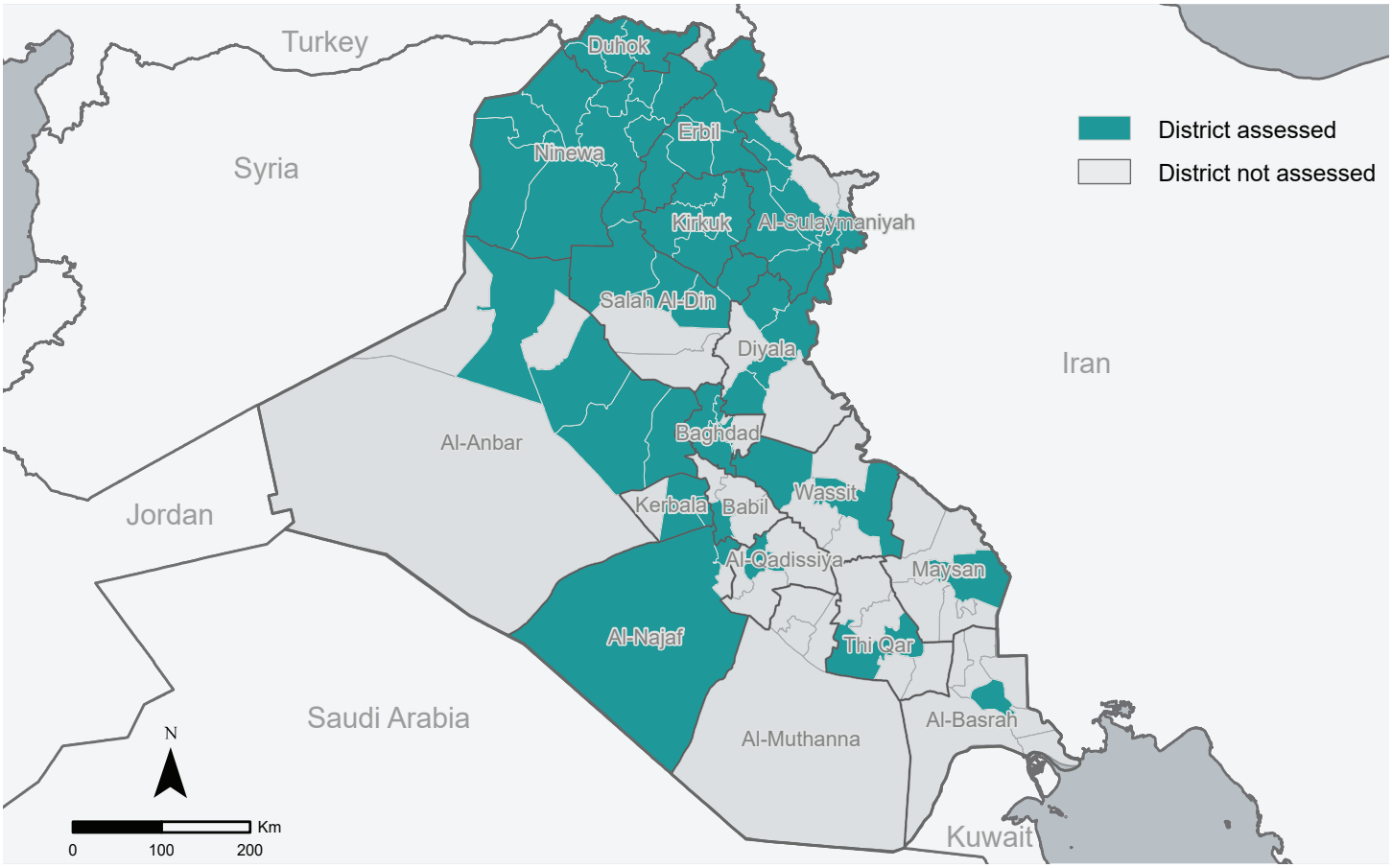
Data collection was carried out from 22 September to 31 December 2019. Household level findings are statistically representative with a 90% confidence level and 10% margin of error at the district level for the three population groups: host community, IDP and returnee. Additionally, the key informant interviews were conducted in each sub district in order to capture overarching needs across (sub-)districts, 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 district level, then disaggregated per population group.

METHODOLOGY STATISTICS

Dates	22 September - 31 December 2019
Districts Assessed	57
Key Informant Interviews	211

Returnee Household Interviews	2,818
IDP Household Interviews	5,557
Host Household Interviews	694
Total Household Interviews	9,069

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.

OUT-OF-CAMP WASH NEEDS

Iraq
December 2019

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 HHs reported having basic access to appropriate handwashing facilities[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	Al Falluja	38%	3%	98%	100%	100%	62%	0%	4%	99%	0%	0%
	Al Ramadi	34%	3%	100%	99%	100%	68%	1%	15%	100%	0%	0%
	Ana	48%	42%	70%	95%	80%	55%	35%	23%	84%	0%	0%
	Heet	21%	14%	99%	100%	99%	66%	1%	7%	99%	0%	0%
Babylon	Al Hilla	27%	4%	100%	100%	100%	82%	0%	1%	100%	0%	0%
Baghdad	Al Adhamiya	20%	3%	100%	99%	100%	79%	2%	0%	100%	0%	0%
	Al Kadhmiyah	18%	9%	100%	95%	99%	71%	3%	3%	99%	2%	2%
	Al Karkh	26%	2%	99%	100%	100%	81%	2%	1%	100%	0%	0%
	Al Mahmoudiya	23%	7%	100%	100%	99%	72%	5%	7%	99%	0%	0%
	Al Risafa	24%	0%	99%	100%	100%	89%	2%	0%	100%	0%	0%
Diyala	Baquba	77%	62%	89%	65%	98%	41%	24%	13%	77%	0%	0%
	Khanaqin	78%	43%	97%	100%	100%	80%	10%	10%	81%	1%	1%
	Kifri	69%	55%	99%	100%	100%	80%	0%	0%	91%	3%	0%
Duhok	Al Amadiya	45%	58%	91%	97%	79%	74%	21%	6%	96%	12%	10%
	Duhok	31%	42%	78%	99%	85%	72%	35%	10%	98%	23%	18%
	Sumail	40%	65%	77%	100%	82%	64%	21%	10%	97%	24%	21%
	Zakho	35%	69%	86%	97%	80%	61%	30%	16%	94%	26%	25%
Erbil	Erbil	29%	10%	93%	99%	99%	78%	7%	0%	79%	3%	1%
	Koysinjaq	26%	6%	95%	100%	100%	80%	10%	7%	85%	0%	0%
	Makhmour	61%	37%	77%	100%	100%	78%	11%	44%	76%	0%	0%

[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 handdug hole in the ground; it drains into the field at the back of the shelter and remains stagnant; there is no mechanism available.

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Erbil	Rawanduz	12%	0%	93%	100%	98%	84%	0%	1%	85%	0%	0%
	Shaqlawa	31%	5%	98%	99%	99%	78%	9%	0%	87%	0%	0%
Kerbala	Al Hindiya	22%	3%	95%	100%	97%	94%	2%	43%	59%	0%	0%
	Kerbela	19%	1%	99%	100%	100%	97%	1%	1%	54%	0%	0%
Kirkuk	Hawiga	62%	61%	80%	98%	93%	74%	51%	63%	69%	48%	9%
	Daquq	74%	93%	86%	93%	94%	83%	34%	62%	78%	46%	18%
	Dibis	35%	43%	99%	89%	100%	91%	22%	6%	71%	38%	10%
	Kirkuk	65%	90%	91%	92%	100%	93%	11%	33%	76%	29%	6%
Maysan	Al Kahla	37%	0%	100%	100%	100%	75%	0%	0%	100%	0%	0%
Najaf	Al Kufa	6%	6%	98%	99%	99%	97%	15%	68%	100%	1%	0%
	Al Najaf	0%	1%	100%	100%	100%	99%	90%	97%	100%	0%	0%
Ninewa	Al Baaj	22%	100%	21%	71%	84%	60%	19%	14%	80%	39%	25%
	Al Hamdaniya	49%	48%	59%	97%	86%	48%	23%	16%	71%	24%	9%
	Al Hatra	38%	88%	42%	97%	82%	75%	19%	49%	79%	31%	26%
	Al Mosul	67%	35%	78%	100%	91%	84%	7%	22%	95%	27%	10%
	Al Shikhan	25%	29%	88%	91%	90%	61%	16%	15%	83%	15%	14%
	Aqra	12%	5%	96%	99%	100%	68%	3%	18%	76%	1%	1%
	Sinjar	43%	86%	22%	74%	20%	17%	26%	19%	32%	52%	34%
	Telafar	59%	52%	61%	99%	89%	76%	8%	51%	86%	36%	27%
	Tilkaef	58%	43%	93%	100%	93%	78%	7%	26%	95%	20%	13%

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Qadissiya	Al Diwaniya	51%	1%	100%	100%	100%	91%	7%	1%	100%	0%	0%
Salah Al-Din	Al Daur	72%	20%	93%	99%	95%	59%	16%	8%	83%	8%	3%
Salah Al-Din	Al Shirqat	60%	33%	72%	88%	73%	60%	15%	24%	26%	5%	4%
Salah Al-Din	Beygee	65%	30%	69%	82%	72%	32%	6%	34%	10%	8%	7%
Salah Al-Din	Tikrit	83%	10%	63%	66%	62%	38%	9%	10%	13%	0%	0%
Salah Al-Din	Tooz Khurmato	39%	51%	78%	98%	83%	47%	31%	47%	73%	7%	2%
Sulaymaniyah	Al Sulaymaniyah	10%	4%	90%	98%	92%	78%	2%	4%	86%	0%	0%
Sulaymaniyah	Chamchamal	24%	3%	67%	92%	73%	67%	3%	3%	90%	1%	1%
Sulaymaniyah	Derbendikhan	24%	4%	80%	94%	85%	75%	6%	0%	89%	4%	4%
Sulaymaniyah	Dokan	6%	3%	91%	95%	86%	77%	5%	0%	95%	3%	3%
Sulaymaniyah	Halabcha	18%	1%	86%	97%	86%	68%	3%	0%	99%	5%	3%
Sulaymaniyah	Kalar	40%	17%	93%	90%	100%	73%	2%	3%	99%	5%	3%
Sulaymaniyah	Rania	18%	3%	74%	98%	76%	75%	13%	0%	98%	3%	2%
Thi Qar	Al Nasiriya	13%	0%	100%	100%	100%	99%	3%	0%	99%	0%	0%
Wassit	Al Kut	14%	4%	100%	100%	100%	98%	2%	0%	88%	0%	0%
Wassit	Al Suwaira	6%	1%	100%	100%	100%	99%	0%	1%	94%	0%	0%

[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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December 2019

OUT-OF-CAMP WASH NEEDS

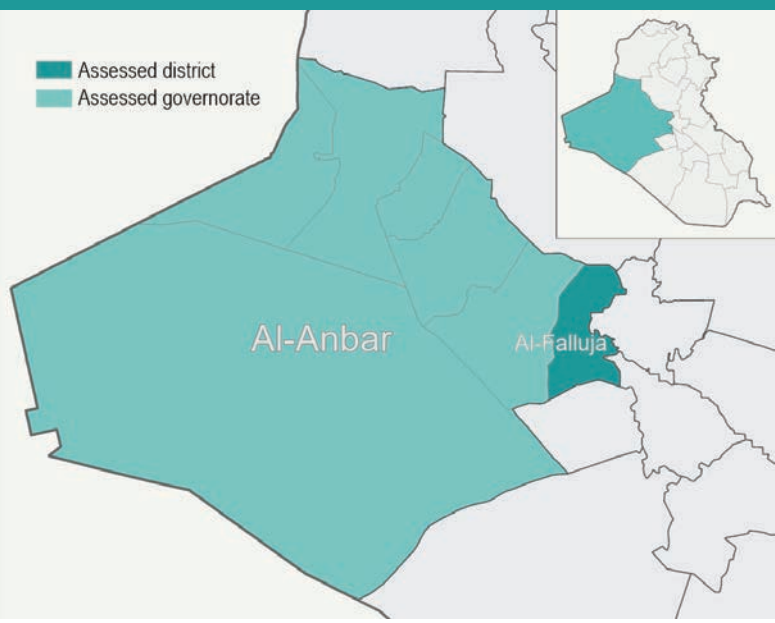
Anbar GOVERNORATE
Al Falluja DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Falluja district 224 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 125 returnee, 99 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	8,574
Total returnee population in district[4,5]	549,378
Average household size	5
% of female respondents	0
% of female-headed households	0

LIVELIHOODS

Average reported monthly income of households (IQD)	553,303
% of households earning an income through employment[6]	99%

55% of households reported their main source of income is through farming.

2% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are difficult to reach	19%
Waterpoints are too far	14%
Fetching water is a dangerous activity	4%

Among the 38% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	42%
It is unsafe	26%
It smells unpleasant	17%

Of the 22% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	35%
Rely on surface water for drinking water	11%
Rely on less preferred sources for other purposes	9%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Anbar GOVERNORATE
Al Falluja DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

23% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% 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	99%
Unsafe disposal methods	1%
Other	0%

85% 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	0%	100%
Stagnant water	9%	91%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	62%
Limited	37%
No facility	1%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **4%** of the Water Treatment Plants (WTPs) in Al Falluja district were non-functional or not functioning at full capacity.[19]

2 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- The intake water to the WTP is too dirty/salinated

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Anbar GOVERNORATE Al Ramadi DISTRICT

CONTEXT AND METHODOLOGY

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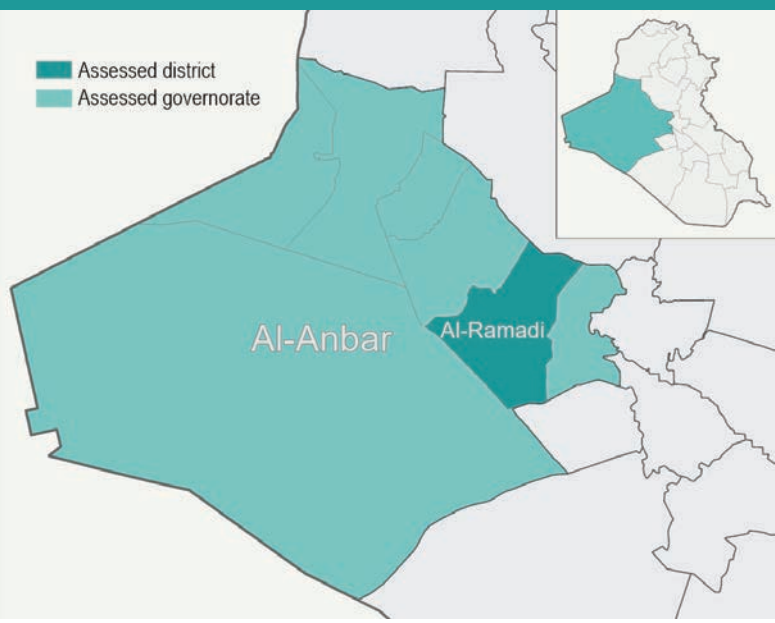
In Al Ramadi district 163 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 109 returnee, 54 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	4,836
Total returnee population in district[4,5]	493,596
Average household size	5
% of female respondents	3
% of female-headed households	3

LIVELIHOODS

Average reported monthly income of households (IQD)	510,994
% of households earning an income through employment[6]	100%

45% of households reported their main source of income is through farming.

10% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,9

Don't like taste / quality of water	47%
Waterpoints are too far	43%
Not enough container to store the water	40%

Among the 34% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,9

It tastes unpleasant	57%
It is turbid	56%
It is unsafe	55%

Of the 25% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,9

Rely on less preferred drinking sources	57%
Rely on less preferred sources for other purposes	41%
Reduce water consumption for other purposes	40%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Anbar GOVERNORATE
Al Ramadi DISTRICT

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Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	0%
Open defecation[11]	1%

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.

17% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

15% 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%
Other	0%

66% 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	20%	80%
Human Faeces	0%	100%
Stagnant water	4%	96%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	68%
Limited	31%
No facility	1%

1% 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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

Children could not get to school	27%
Electricity services negatively affected	27%
Mobility of adults affected	26%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **3%** of the Water Treatment Plants (WTPs) in Al Ramadi district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP is lacking consumables (chlorine, aluminium sulfate)

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

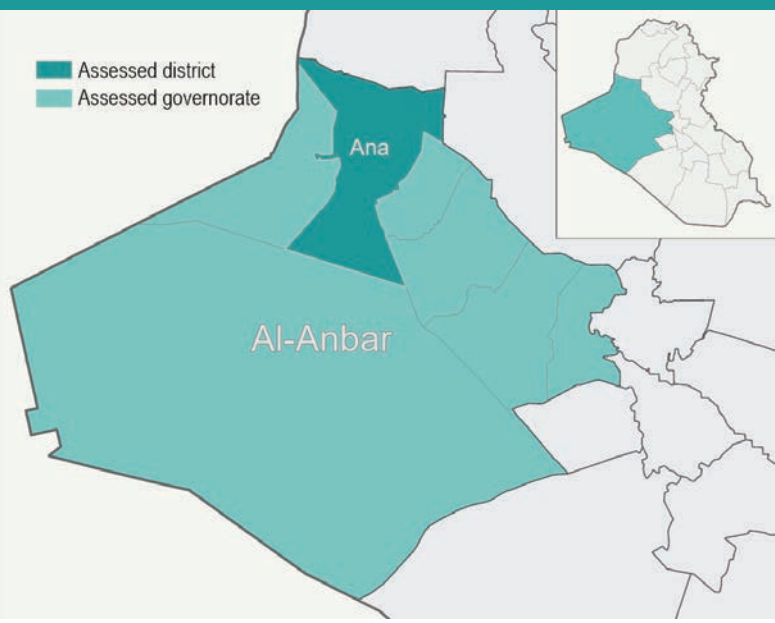
Anbar GOVERNORATE
Ana DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Ana district 106 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 106 returnee, 0 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	552
Total returnee population in district[4,5]	29,808
Average household size	7
% of female respondents	8
% of female-headed households	5

LIVELIHOODS

Average reported monthly income of households (IQD)	287,784
% of households earning an income through employment[6]	86%

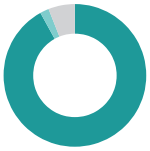
0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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]	92%
Unimproved	2%
Surface water	6%



Of the 42% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	38%
Not enough container to store the water	34%
Don't like taste / quality of water	29%

Among the 48% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	40%
It tastes unpleasant	31%
It is unsafe	27%

Of the 35% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Spend money (or credit) on water	27%
Reduce drinking water consumption	27%
Reduce water consumption for other purposes	27%

92% 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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Anbar GOVERNORATE
Ana DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	95%
Unimproved	4%
Open defecation[11]	1%

80% 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.[12]

98% of households reported having access to a private shower.

WASTE

23% 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	84%
Unsafe disposal methods	15%
Other	1%

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	58%	42%
Human Faeces	0%	100%
Stagnant water	3%	97%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	55%
Limited	30%
No facility	15%

35% 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.

74% of households reported female members in their household had access to mentrual hygiene materials.[15]

71% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **10%** of the Water Treatment Plants (WTPs) in Ana district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP lacks power (electricity, fuel) to operate at full capacity
- The intake water to the WTP is too dirty/salinated
- The WTP is too old/poorly maintained to function properly

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

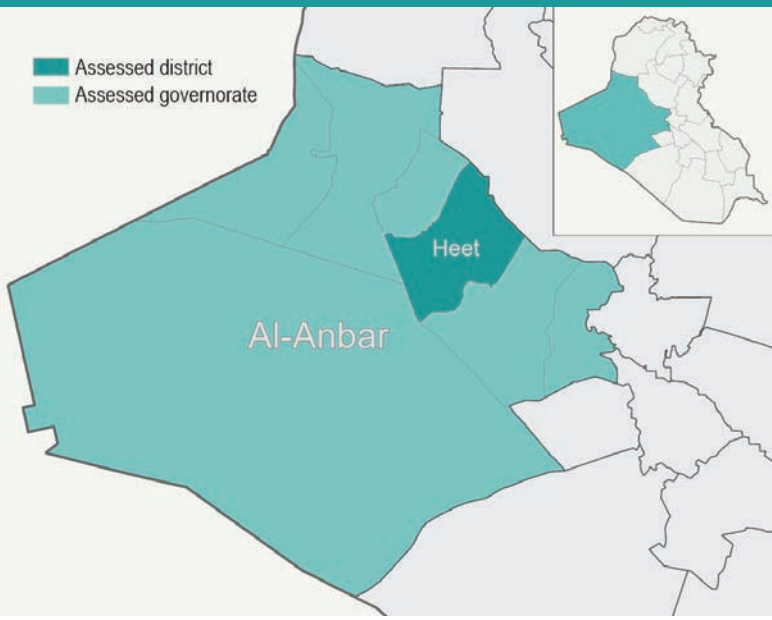
Anbar GOVERNORATE Heet DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Heet district 228 household surveys were conducted, in addition to 4 KIIs. Household interviews were conducted with 106 returnee, 122 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	852
Total returnee population in district[4,5]	185,682
Average household size	5
% of female respondents	2
% of female-headed households	2

LIVELIHOODS

Average reported monthly income of households (IQD)	588,634
% of households earning an income through employment[6]	90%

23% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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]	99%
Unimproved	1%
Surface water	0%

Of the 14% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	23%
Waterpoints are too far	20%
Waterpoints are difficult to reach	13%

Among the 21% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	42%
It tastes unpleasant	14%
It smells unpleasant	9%

Of the 24% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred sources for other purposes	35%
Rely on surface water for drinking water	27%
Rely on less preferred drinking sources	20%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Anbar GOVERNORATE Heet DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

23% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	99%
Unsafe disposal methods	1%
Other	0%

84% 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%	87%
Human Faeces	0%	100%
Stagnant water	9%	91%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	66%
Limited	32%
No facility	2%

1% 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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **30%** of the Water Treatment Plants (WTPs) in Heet district were non-functional or not functioning at full capacity.[19]

4 out of 4 KIs reported water in the area is not clean enough to drink, top reasons were:

- The WTP is too old/poorly maintained to function properly.
- WTP is damaged due to the conflict and can't (fully) operate
- WTP lacks power (electricity, fuel) to operate at full capacity
- The pipe network from the WTP to the area has been damaged

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

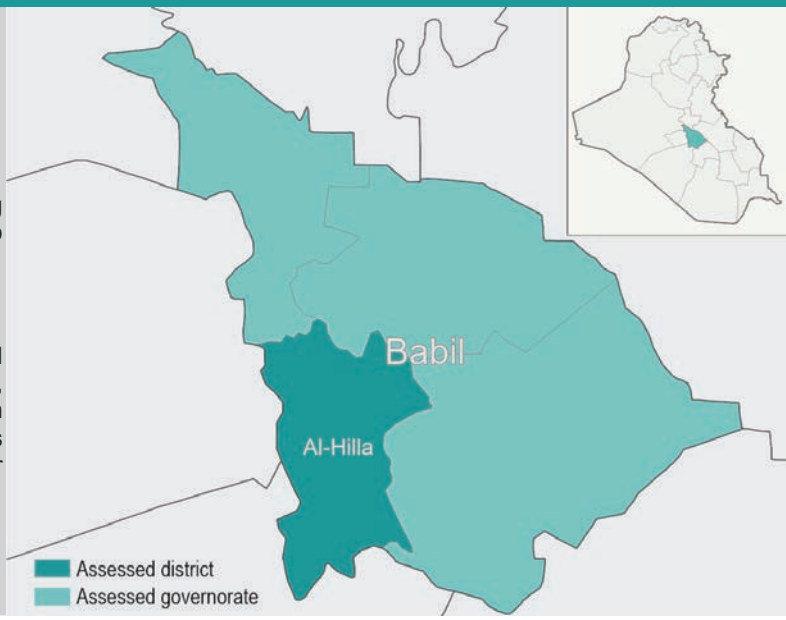
Babylon GOVERNORATE Al Hilla DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Hilla district 133 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 63 out-of-camp IDP, and 70 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,710
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	0
% of female-headed households	0

LIVELIHOODS

Average reported monthly income of households (IQD)	536,514
% of households earning an income through employment[6]	92%

12% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 4% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are difficult to reach	17%
Waterpoints are too far	15%
Don't like taste / quality of water	7%

Among the 27% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It tastes unpleasant	51%
It is unsafe	21%
It is turbid	14%

Of the 17% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	25%
Rely on less preferred sources for other purposes	13%
Reduce water consumption for other purposes	12%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Babylon GOVERNORATE Al Hilla DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

10% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% 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%
Other	0%

82% of households reported there were insufficient waste containers in the area.

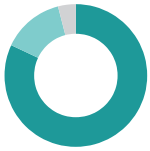
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	12%	88%
Human Faeces	0%	100%
Stagnant water	7%	93%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	82%
Limited	14%
No facility	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.

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

92% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Hilla district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

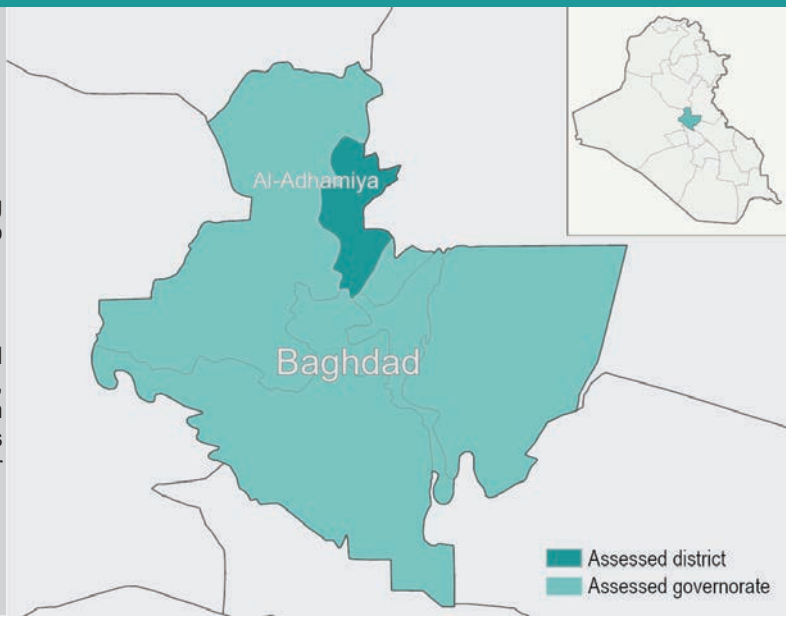
Baghdad GOVERNORATE Al Adhamiya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Adhamiya district 119 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 119 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	4,824
Total returnee population in district[4,5]	-
Average household size	4
% of female respondents	2
% of female-headed households	2

LIVELIHOODS

Average reported monthly income of households (IQD)	486,429
% of households earning an income through employment[6]	97%

30% of households reported their main source of income is through farming.

2% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,9

Waterpoints are difficult to reach	20%
Water is not available at the market	7%
Waterpoints are too far	5%

Among the 20% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,9

It tastes unpleasant	49%
It smells unpleasant	18%
It is unsafe	9%

Of the 21% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,9

Rely on less preferred drinking sources	34%
Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Adhamiya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	0%
Open defecation[11]	1%

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.

8% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

97% 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%
Other	0%

82% of households reported there were insufficient waste containers in the area.

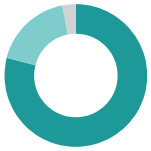
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	13%	87%
Human Faeces	0%	100%
Stagnant water	0%	100%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	79%
Limited	18%
No facility	3%



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 mentrual hygiene materials.[15]

92% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Adhamiya district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

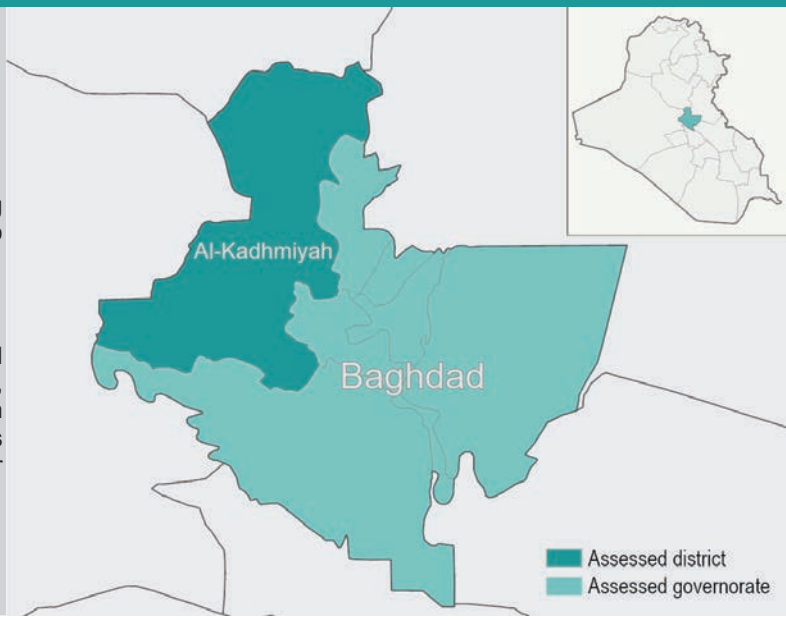
Baghdad GOVERNORATE Al Kadhmiyah DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Kadhmiyah district 258 household surveys were conducted, in addition to 5 KIIs. Household interviews were conducted with 72 returnee, 125 out-of-camp IDP, and 61 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	13,140
Total returnee population in district[4,5]	29,016
Average household size	5
% of female respondents	2
% of female-headed households	2

LIVELIHOODS

Average reported monthly income of households (IQD)	635,003
% of households earning an income through employment[6]	99%

33% of households reported their main source of income is through farming.

5% of households reported their main source of income is through keeping livestock.

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%

Of the 9% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are difficult to reach	23%
Waterpoints are too far	16%
Fetching water is a dangerous activity	9%

Among the 18% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	32%
It tastes unpleasant	27%
It smells unpleasant	19%

Of the 14% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	18%
Rely on surface water for drinking water	16%
Rely on less preferred drinking sources	15%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Kadhmiyah DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	95%
Unimproved	5%
Open defecation[11]	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.

10% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

98% 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	99%
Unsafe disposal methods	1%
Other	0%

74% of households reported there were insufficient waste containers in the area.

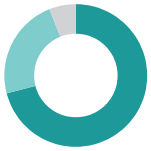
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	12%	88%
Human Faeces	0%	100%
Stagnant water	7%	93%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	71%
Limited	23%
No facility	6%



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.

95% of households reported female members in their household had access to mentrual hygiene materials.[15]

93% of households reported having access to sufficient hygiene materials.[16]

FLOODS

2% of households reported their area experienced flooding in the 12 months prior to data collection.

2% reported damage to their shelter due to the flooding.[17]

Among the **2%** that reported their daily activities were affected

Mobility of adults affected	25%
Water services negatively afftected	25%
Children could not get to school	19%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **3%** of the Water Treatment Plants (WTPs) in Al Kadhmiyah district were non-functional or not functioning at full capacity.[19]

0 out of 5 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

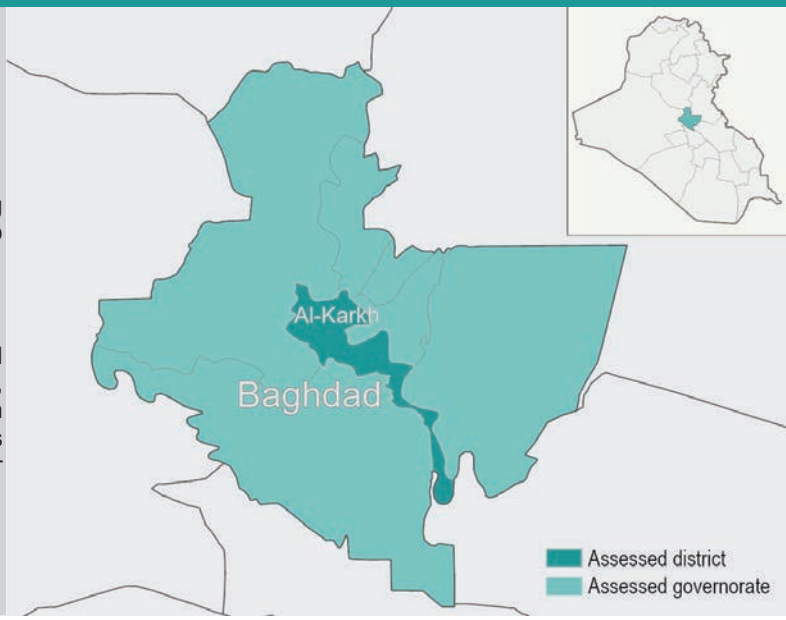
Baghdad GOVERNORATE Al Karkh DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Karkh district 239 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 171 out-of-camp IDP, and 68 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	13,368
Total returnee population in district[4,5]	-
Average household size	4
% of female respondents	0
% of female-headed households	0

LIVELIHOODS

Average reported monthly income of households (IQD)	806,764
% of households earning an income through employment[6]	99%

12% of households reported their main source of income is through farming.

4% of households reported their main source of income is through keeping livestock.

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%

Of the 2% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are too far	7%
Waterpoints are difficult to reach	7%
Not enough container to store the water	5%

Among the 26% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	33%
It tastes unpleasant	31%
It smells unpleasant	25%

Of the 16% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	24%
Rely on less preferred sources for other purposes	21%
Rely on surface water for drinking water	14%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Karkh DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

8% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% 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%
Other	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	13%	87%
Human Faeces	0%	100%
Stagnant water	1%	99%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	81%
Limited	16%
No facility	2%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Karkh district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

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December 2019

OUT-OF-CAMP WASH NEEDS

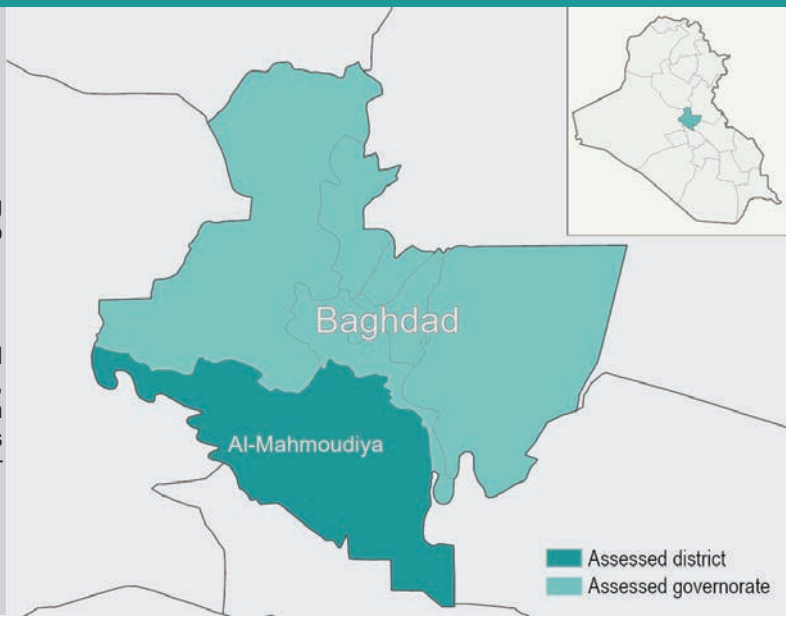
Baghdad GOVERNORATE Al Mahmoudiya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Mahmoudiya district 214 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 112 returnee, 102 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	6,096
Total returnee population in district[4,5]	51,648
Average household size	NA
% of female respondents	1
% of female-headed households	1

LIVELIHOODS

Average reported monthly income of households (IQD)	453,752
% of households earning an income through employment[6]	98%

63% of households reported their main source of income is through farming.

16% of households reported their main source of income is through keeping livestock.

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%

Of the 7% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are too far	32%
Waterpoints are difficult to reach	15%
Fetching water is a dangerous activity	3%

Among the 23% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It tastes unpleasant	47%
It is unsafe	25%
It is turbid	9%

Of the 19% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	29%
Rely on surface water for drinking water	7%
Fetch water at a source further than the usual one	4%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Mahmoudiya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

4% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

95% 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	99%
Unsafe disposal methods	1%
Other	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	17%	83%
Human Faeces	0%	100%
Stagnant water	2%	98%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	72%
Limited	25%
No facility	3%

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.

98% of households reported female members in their household had access to mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **29%** of the Water Treatment Plants (WTPs) in Al Mahmoudiya district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Risafa DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Risafa district 106 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 0 returnee, 106 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	3,060
Total returnee population in district[4,5]	-
Average household size	3
% of female respondents	1
% of female-headed households	1

LIVELIHOODS

Average reported monthly income of households (IQD)	562,330
% of households earning an income through employment[6]	98%

13% of households reported their main source of income is through farming.

5% of households reported their main source of income is through keeping livestock.

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%

Of the 0% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are too far	3%
Waterpoints are difficult to reach	3%
Fetching water is a dangerous activity	3%

Among the 24% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It tastes unpleasant	40%
It is unsafe	23%
It is turbid	15%

Of the 10% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	16%
Rely on less preferred drinking sources	14%
Fetch water at a source further than the usual one	3%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Baghdad GOVERNORATE Al Risafa DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

5% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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%
Other	0%

95% of households reported there were insufficient waste containers in the area.

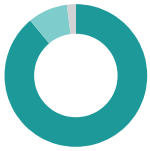
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	13%	87%
Human Faeces	0%	100%
Stagnant water	1%	99%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	89%
Limited	9%
No facility	2%



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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **67%** of the Water Treatment Plants (WTPs) in Al Risafa district were non-functional or not functioning at full capacity.[19]

2 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- The WTP is too old/poorly maintained to function properly.
- Capacity of WTP is not sufficient to serve the whole area

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

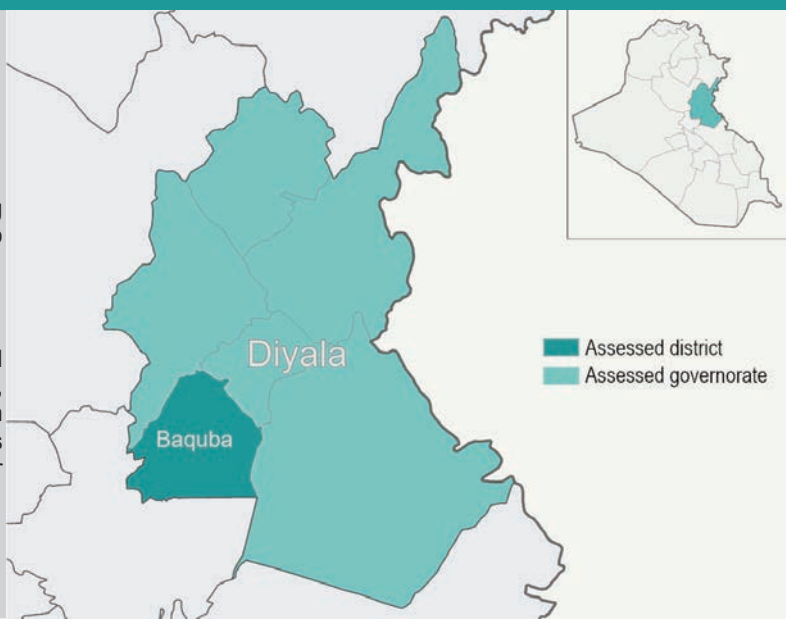
Diyala GOVERNORATE Baquba DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Baquba district 126 household surveys were conducted, in addition to 4 KIIs. Household interviews were conducted with 0 returnee, 121 out-of-camp IDP, and 5 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	22,452
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	14
% of female-headed households	14

LIVELIHOODS

Average reported monthly income of households (IQD)	375,796
% of households earning an income through employment[6]	94%

6% of households reported their main source of income is through farming.

6% of households reported their main source of income is through keeping livestock.

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%

Of the 62% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	22%
Fetching water is a dangerous activity	13%
Waterpoints are difficult to reach	8%

Among the 77% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It smells unpleasant	45%
It is turbid	23%
It is unsafe	22%

Of the 100% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	44%
Rely on less preferred sources for other purposes	38%
Rely on surface water for drinking water	30%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Diyala GOVERNORATE Baquba DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	65%
Unimproved	35%
Open defecation[11]	0%

98% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

98% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

85% 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	77%
Unsafe disposal methods	23%
Other	0%

9% 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	53%	47%
Human Faeces	35%	65%
Stagnant water	21%	79%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	41%
Limited	35%
No facility	23%

24% 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.

56% of households reported female members in their household had access to mentrual hygiene materials.[15]

54% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **29%** of the Water Treatment Plants (WTPs) in Baquba district were non-functional or not functioning at full capacity.[19]

1 out of 4 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

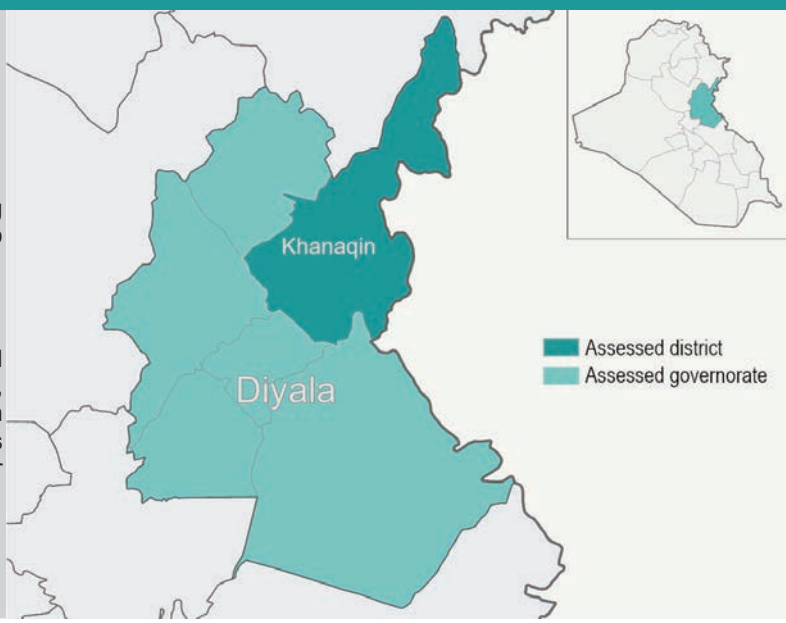
Diyala GOVERNORATE Khanaqin DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Khanaqin district 219 household surveys were conducted, in addition to 5 KIIs. Household interviews were conducted with 83 returnee, 136 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	10,680
Total returnee population in district[4,5]	96,768
Average household size	5
% of female respondents	15
% of female-headed households	7

LIVELIHOODS

Average reported monthly income of households (IQD)	578,049
% of households earning an income through employment[6]	81%

14% of households reported their main source of income is through farming.

11% of households reported their main source of income is through keeping livestock.

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]	92%
Unimproved	8%
Surface water	0%

Of the 43% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	37%
Waterpoints are too far	26%
Water points are not functioning or close	12%

Among the 78% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is unsafe	49%
It smells unpleasant	43%
It tastes unpleasant	34%

Of the 24% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred sources for other purposes	33%
Rely on less preferred drinking sources	28%
Rely on surface water for drinking water	21%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Diyala GOVERNORATE Khanaqin DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

100% 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	81%
Unsafe disposal methods	19%
Other	0%

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

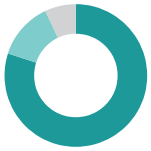
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	48%	52%
Human Faeces	0%	100%
Stagnant water	49%	51%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	80%
Limited	13%
No facility	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 mentrual hygiene materials.[15]

98% 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.

1% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **71%** of the Water Treatment Plants (WTPs) in Khanaqin district were non-functional or not functioning at full capacity.[19]

3 out of 5 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

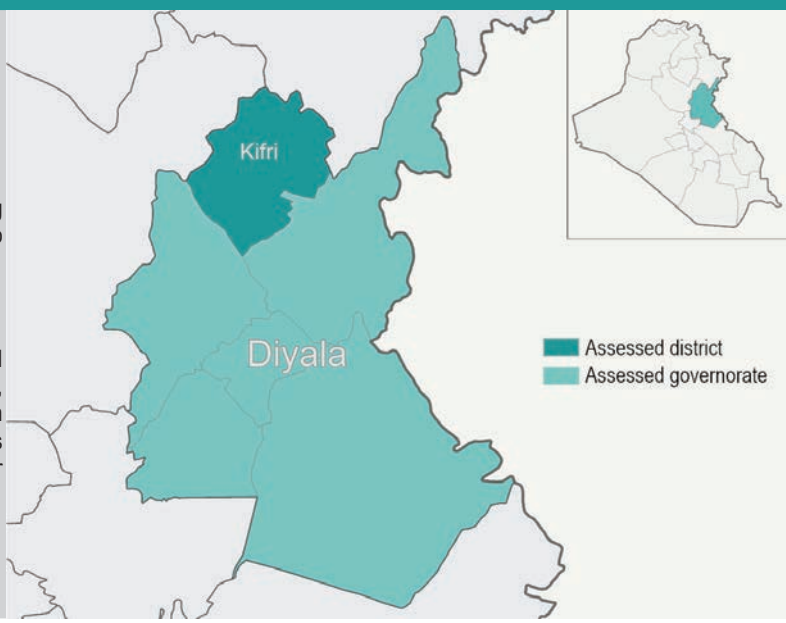
Diyala GOVERNORATE
Kifri DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kifri district 104 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 0 returnee, 104 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	13,776
Total returnee population in district[4,5]	1,200
Average household size	5
% of female respondents	33
% of female-headed households	21

LIVELIHOODS

Average reported monthly income of households (IQD)	483,308
% of households earning an income through employment[6]	78%

18% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 55% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	42%
Waterpoints are too far	13%
Insufficient number of water points	13%

Among the 69% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	50%
It is unsafe	47%
It smells unpleasant	46%

Of the 40% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred sources for other purposes	36%
Rely on less preferred drinking sources	32%
Rely on surface water for drinking water	13%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Diyala GOVERNORATE Kifri DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

99% 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	91%
Unsafe disposal methods	9%
Other	0%

73% of households reported there were insufficient waste containers in the area.

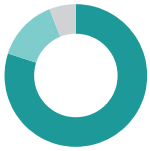
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	38%	63%
Human Faeces	1%	99%
Stagnant water	36%	64%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	80%
Limited	14%
No facility	6%



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.

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

97% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **1%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **29%** of the Water Treatment Plants (WTPs) in Kifri district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is lacking consumables (chlorine, aluminium sulfate).
- The intake water to the WTP is too dirty/salinated
- The WTP is too old/poorly maintained to function properly
- Capacity of WTP is not sufficient to serve the whole area

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE Al Amadiya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Amadiya district 100 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 0 returnee, 100 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	2,982
Total returnee population in district[4,5]	-
Average household size	7
% of female respondents	56
% of female-headed households	9

LIVELIHOODS

Average reported monthly income of households (IQD)	524,897
% of households earning an income through employment[6]	82%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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]	99%
Unimproved	0%
Surface water	0%

Of the 58% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	39%
Not enough container to store the water	33%
Waterpoints are too far	27%

Among the 45% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is unsafe	39%
It tastes unpleasant	35%
It smells unpleasant	33%

Of the 29% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce water consumption for other purposes	30%
Fetch water at a source further than the usual one	25%
Rely on less preferred sources for other purposes	23%

98% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE Al Amadiya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	97%
Unimproved	3%
Open defecation[11]	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.

6% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

97% 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	96%
Unsafe disposal methods	4%
Other	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	44%	56%
Human Faeces	1%	99%
Stagnant water	47%	53%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	74%
Limited	1%
No facility	25%

21% 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.

93% of households reported female members in their household had access to mentrual hygiene materials.[15]

92% 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.

10% reported damage to their shelter due to the flooding.[17]

Among the **9%** that reported their daily activities were affected

Loss/damage to households' items	25%
People getting sick	11%
Water services negatively affected	10%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **60%** of the Water Treatment Plants (WTPs) in Al Amadiya district were non-functional or not functioning at full capacity.[19]

0 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE
Duhok DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Duhok district 109 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 0 returnee, 109 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	31,314
Total returnee population in district[4,5]	-
Average household size	8
% of female respondents	69
% of female-headed households	14

LIVELIHOODS

Average reported monthly income of households (IQD)	659,630
% of households earning an income through employment[6]	84%

3% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 42% of households that reported facing problems related to water access, top three reasons:*[,9]

Not enough container to store the water	35%
Don't like taste / quality of water	31%
Water is too expensive	23%

Among the 31% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	44%
It is unsafe	42%
It smells unpleasant	39%

Of the 48% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce water consumption for other purposes	37%
Rely on less preferred drinking sources	27%
Reduce drinking water consumption	22%

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

78% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE
Duhok DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	0%

85% 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.[12]

92% 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	98%
Unsafe disposal methods	1%
Other	1%

73% 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	28%	72%
Human Faeces	0%	100%
Stagnant water	50%	50%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	72%
Limited	12%
No facility	16%

35% 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 mentrual hygiene materials.[15]

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

FLOODS

23% of households reported their area experienced flooding in the 12 months prior to data collection.

18% reported damage to their shelter due to the flooding.[17]

Among the **18%** that reported their daily activities were

Loss/damage to households' items	20%
Electricity services negatively affected	15%
People getting sick	14%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **3%** of the Water Treatment Plants (WTPs) in Duhok district were non-functional or not functioning at full capacity.[19]

0 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE Sumail DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Sumail district 239 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 0 returnee, 129 out-of-camp IDP, and 110 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	82,404
Total returnee population in district[4,5]	-
Average household size	8
% of female respondents	62
% of female-headed households	10

LIVELIHOODS

Average reported monthly income of households (IQD)	576,812
% of households earning an income through employment[6]	78%

7% of households reported their main source of income is through farming.

4% of households reported their main source of income is through keeping livestock.

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]	97%
Unimproved	3%
Surface water	0%

Of the 65% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	40%
Not enough container to store the water	38%
Insufficient number of water points	24%

Among the 40% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	48%
It smells unpleasant	42%
It is unsafe	41%

Of the 50% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce water consumption for other purposes	34%
Fetch water at a source further than the usual one	27%
Spend money (or credit) on water	25%

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

77% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE Sumail DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	0%

82% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

5% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

98% 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	97%
Unsafe disposal methods	3%
Other	0%

59% 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	0%	100%
Stagnant water	69%	31%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	64%
Limited	7%
No facility	29%

21% 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 mentrual hygiene materials.[15]

94% 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.

21% reported damage to their shelter due to the flooding.[17]

Among the **19%** that reported their daily activities were

People getting sick	19%
Loss/damage to households' items	18%
Electricity services negatively affected	14%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **100%** of the Water Treatment Plants (WTPs) in Sumail district were non-functional or not functioning at full capacity.[19]

0 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

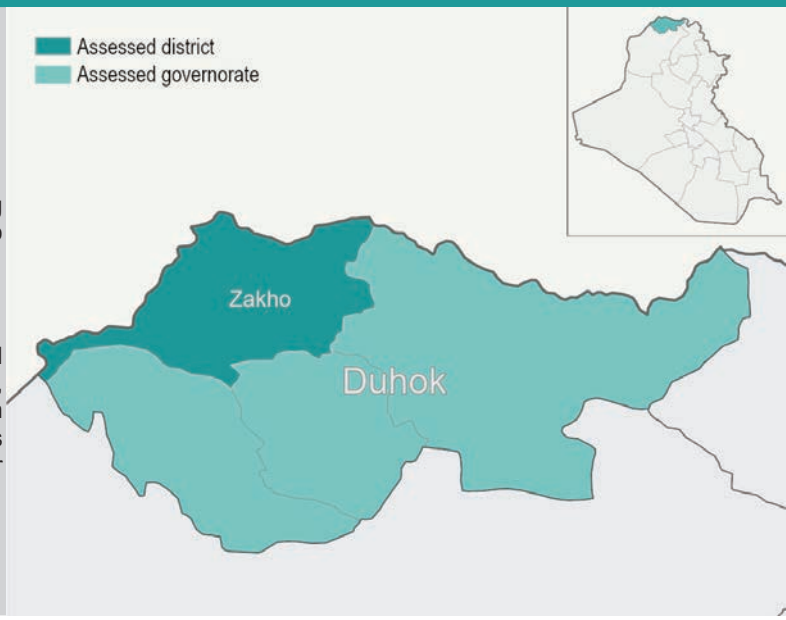
Duhok GOVERNORATE
Zakho DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Zakho district 127 household surveys were conducted, in addition to 4 KIIs. Household interviews were conducted with 0 returnee, 127 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	51,444
Total returnee population in district[4,5]	780
Average household size	7
% of female respondents	59
% of female-headed households	6

LIVELIHOODS

Average reported monthly income of households (IQD)	497,040
% of households earning an income through employment[6]	85%

7% of households reported their main source of income is through farming.

4% of households reported their main source of income is through keeping livestock.

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]	98%
Unimproved	1%
Surface water	0%

Of the 69% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	43%
Not enough container to store the water	36%
Insufficient number of water points	18%

Among the 35% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It smells unpleasant	44%
It is unsafe	43%
It is turbid	38%

Of the 31% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce water consumption for other purposes	32%
Spend money (or credit) on water	26%
Reduce drinking water consumption	25%

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

86% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Duhok GOVERNORATE Zakho DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	97%
Unimproved	3%
Open defecation[11]	0%

80% 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.[12]

100% of households reported having access to a private shower.

WASTE

16% 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	94%
Unsafe disposal methods	6%
Other	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	69%	31%
Human Faeces	0%	100%
Stagnant water	76%	24%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	61%
Limited	3%
No facility	35%

30% 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 mentrual hygiene materials.[15]

93% 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.

25% reported damage to their shelter due to the flooding.[17]

Among the **21%** that reported their daily activities were

Loss/damage to households' items	23%
People getting sick	20%
Damage to agricultural land affected livelihoods	8%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **9%** of the Water Treatment Plants (WTPs) in Zakho district were non-functional or not functioning at full capacity.[19]

1 out of 4 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

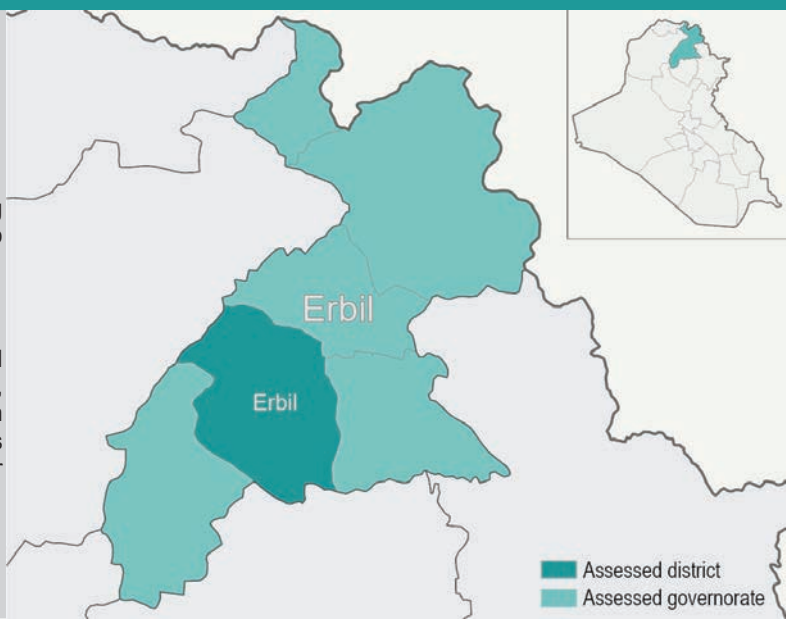
Erbil GOVERNORATE
Erbil DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Erbil district 174 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 0 returnee, 108 out-of-camp IDP, and 66 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	192,774
Total returnee population in district[4,5]	-
Average household size	6
% of female respondents	25
% of female-headed households	18

LIVELIHOODS

Average reported monthly income of households (IQD)	496,023
% of households earning an income through employment[6]	85%

14% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 10% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	20%
Waterpoints are too far	18%
Not enough container to store the water	17%

Among the 29% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is unsafe	46%
It tastes unpleasant	20%
It smells unpleasant	11%

Of the 27% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	38%
Reduce water consumption for other purposes	19%
Rely on less preferred sources for other purposes	17%

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

93% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Erbil GOVERNORATE
Erbil DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	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.

15% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	79%
Unsafe disposal methods	21%
Other	0%

85% 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	19%	81%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	78%
Limited	17%
No facility	6%

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.

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

98% 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.

1% reported damage to their shelter due to the flooding.[17]

Among the **2%** that reported their daily activities were affected

Loss/damage to households' items	19%
People getting sick	18%
Children could not get to school	13%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **1%** of the Water Treatment Plants (WTPs) in Erbil district were non-functional or not functioning at full capacity.[19]

2 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

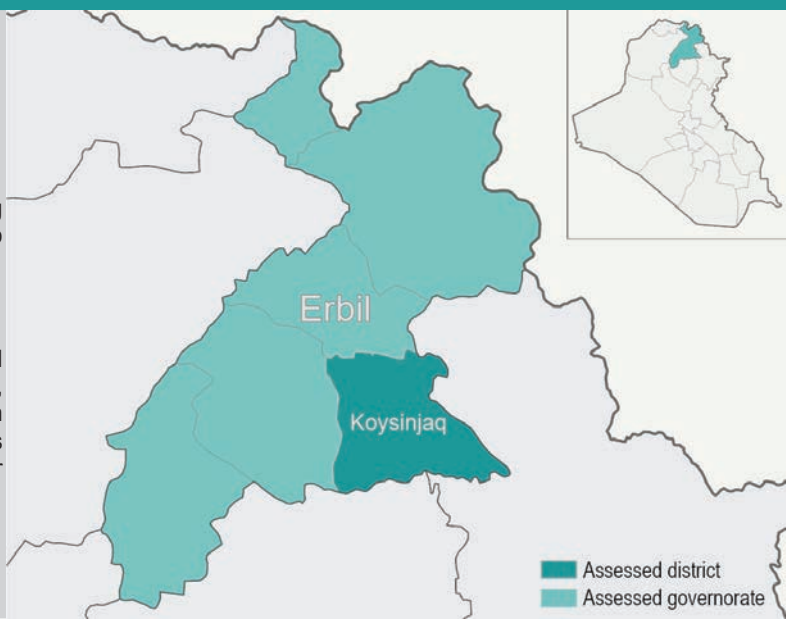
Erbil GOVERNORATE Koysinjaq DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Koysinjaq district 133 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 133 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	3,618
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	29
% of female-headed households	19

LIVELIHOODS

Average reported monthly income of households (IQD)	390,802
% of households earning an income through employment[6]	89%

4% of households reported their main source of income is through farming.

2% of households reported their main source of income is through keeping livestock.

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%

Of the 6% of households that reported facing problems related to water access, top three reasons:*,[9]

Not enough container to store the water	20%
Don't like taste / quality of water	13%
Waterpoints are too far	9%

Among the 26% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	40%
It tastes unpleasant	22%
It is turbid	3%

Of the 26% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	33%
Reduce water consumption for other purposes	22%
Reduce drinking water consumption	20%

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

95% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Erbil GOVERNORATE Koysinjaq DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

11% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	85%
Unsafe disposal methods	15%
Other	0%

77% 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	8%	92%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	80%
Limited	17%
No facility	2%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Koysinjaq district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

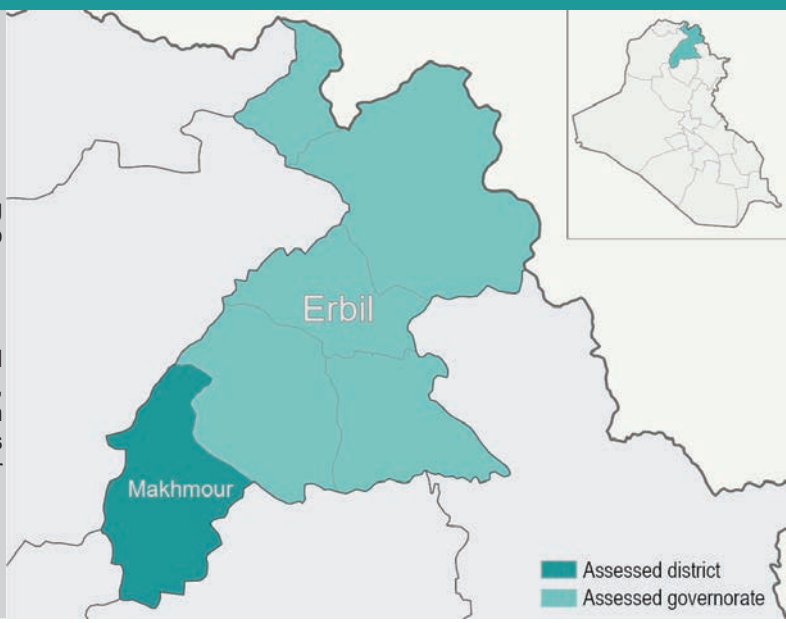
Erbil GOVERNORATE Makhmour DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Makhmour district 125 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 125 returnee, 0 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	-
Total returnee population in district[4,5]	40,560
Average household size	6
% of female respondents	27
% of female-headed households	22

LIVELIHOODS

Average reported monthly income of households (IQD)	396,382
% of households earning an income through employment[6]	78%

12% of households reported their main source of income is through farming.

3% of households reported their main source of income is through keeping livestock.

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%

Of the 37% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	33%
Insufficient number of water points	29%
Waterpoints are too far	23%

Among the 61% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is unsafe	44%
It smells unpleasant	41%
It tastes unpleasant	36%

Of the 50% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce water consumption for other purposes	36%
Rely on less preferred drinking sources	31%
Spend money (or credit) on water	28%

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

77% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Erbil GOVERNORATE Makhmour DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

100% of households reported having access to a private shower.

WASTE

44% 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	76%
Unsafe disposal methods	24%
Other	0%

54% of households reported there were insufficient waste containers in the area.

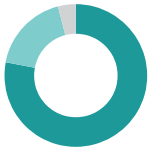
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	40%	60%
Human Faeces	0%	100%
Stagnant water	29%	71%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	78%
Limited	18%
No facility	4%



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.

100% of households reported female members in their household had access to mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **67%** of the Water Treatment Plants (WTPs) in Makhmour district were non-functional or not functioning at full capacity.[19]

2 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP is lacking consumables (chlorine, aluminium sulfate)
- Capacity of WTP is not sufficient to serve the whole area

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.

December 2019

OUT-OF-CAMP WASH NEEDS

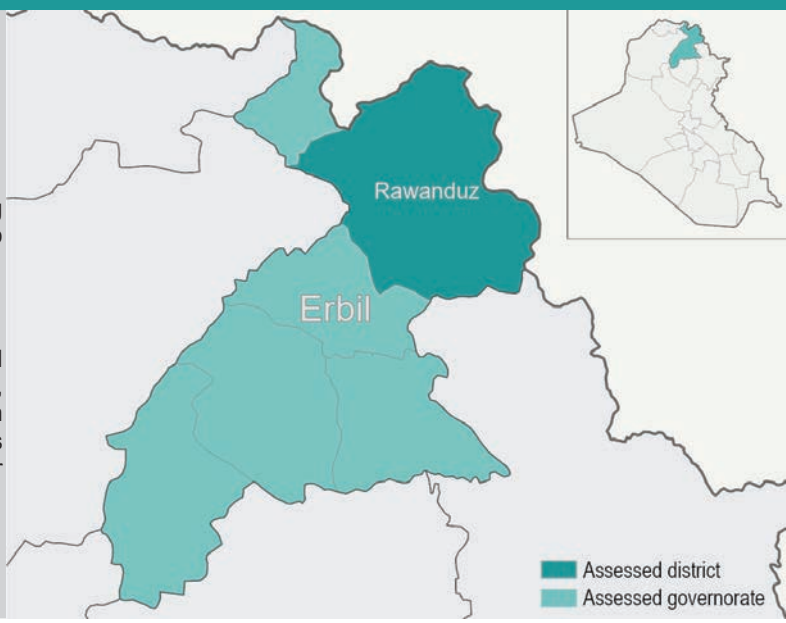
Erbil GOVERNORATE
Rawanduz DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Rawanduz district 122 household surveys were conducted, in addition to 5 KIIs. Household interviews were conducted with 0 returnee, 122 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	2,670
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	25
% of female-headed households	9

LIVELIHOODS

Average reported monthly income of households (IQD)	387,958
% of households earning an income through employment[6]	93%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 0% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are too far	3%
Waterpoints are difficult to reach	3%
Fetching water is a dangerous activity	3%

Among the 12% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	50%
It smells unpleasant	13%
It tastes unpleasant	7%

Of the 27% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Reduce drinking water consumption	26%
Reduce water consumption for other purposes	26%
Rely on less preferred drinking sources	23%

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

93% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Erbil GOVERNORATE Rawanduz DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	0%

98% 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.[12]

99% 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	85%
Unsafe disposal methods	15%
Other	0%

89% of households reported there were insufficient waste containers in the area.

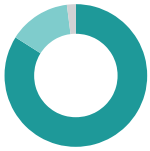
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	5%	95%
Human Faeces	0%	100%
Stagnant water	4%	96%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	84%
Limited	14%
No facility	2%



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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **100%** of the Water Treatment Plants (WTPs) in Rawanduz district were non-functional or not functioning at full capacity.[19]

0 out of 5 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

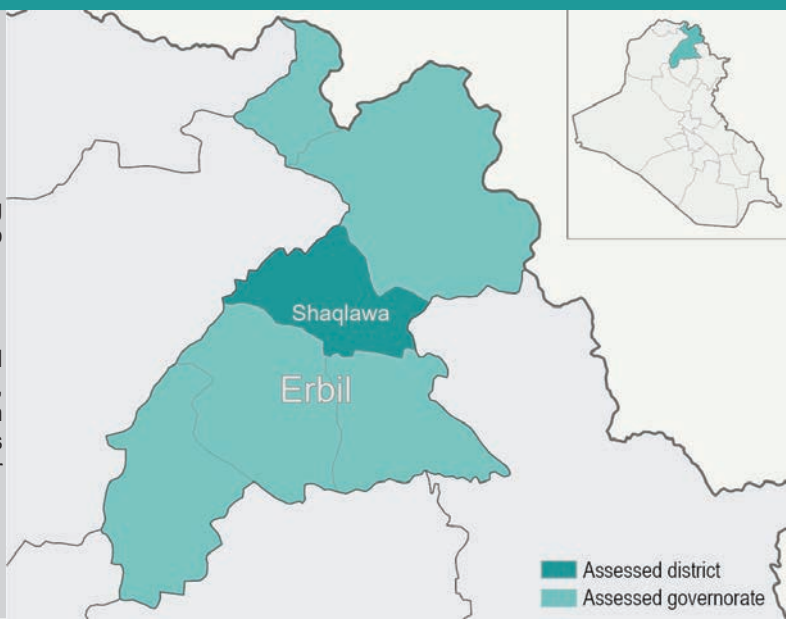
Erbil GOVERNORATE Shaqlawa DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Shaqlawa district 124 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 0 returnee, 124 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	5,280
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	31
% of female-headed households	13

LIVELIHOODS

Average reported monthly income of households (IQD)	384,545
% of households earning an income through employment[6]	82%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 5% of households that reported facing problems related to water access, top three reasons:*,[9]

Don't like taste / quality of water	14%
Insufficient number of water points	11%
Waterpoints are too far	10%

Among the 31% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	44%
It tastes unpleasant	18%
It smells unpleasant	3%

Of the 15% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	18%
Fetch water at a source further than the usual one	9%
Reduce drinking water consumption	5%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Erbil GOVERNORATE Shaqlawa DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	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.

10% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	87%
Unsafe disposal methods	13%
Other	0%

85% 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	7%	93%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	78%
Limited	20%
No facility	2%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **4%** of the Water Treatment Plants (WTPs) in Shaqlawa district were non-functional or not functioning at full capacity.[19]

0 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

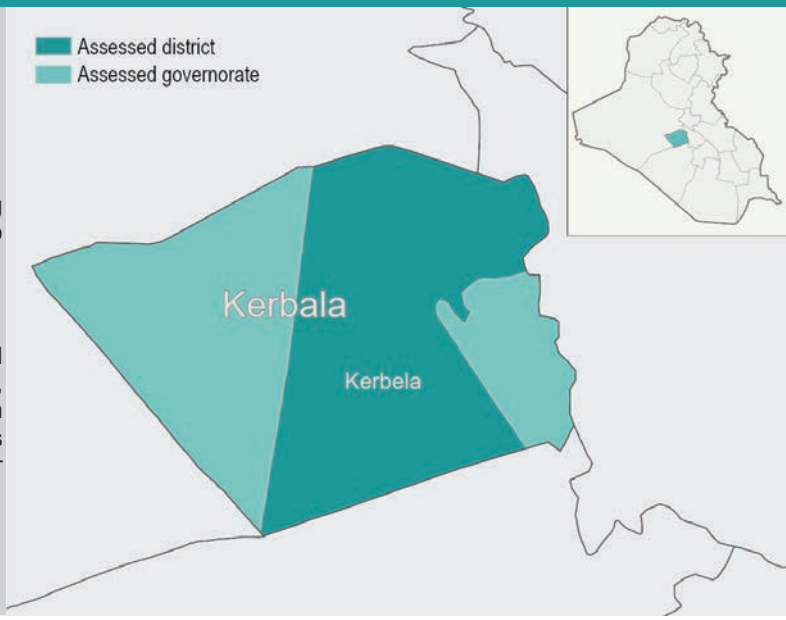
Kerbala GOVERNORATE
Al Hindiya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Hindiya district 122 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 122 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,122
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	11
% of female-headed households	8

LIVELIHOODS

Average reported monthly income of households (IQD)	512,810
% of households earning an income through employment[6]	95%

12% of households reported their main source of income is through farming.

2% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,[9]

Don't like taste / quality of water	15%
Waterpoints are difficult to reach	10%
Waterpoints are too far	3%

Among the 22% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	43%
It smells unpleasant	27%
It is unsafe	14%

Of the 7% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	14%
Rely on less preferred drinking sources	7%
Fetch water at a source further than the usual one	3%

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

95% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kerbala GOVERNORATE Al Hindiya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

0% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

43% 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	59%
Unsafe disposal methods	39%
Other	2%

24% of households reported there were insufficient waste containers in the area.

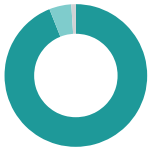
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	47%	53%
Human Faeces	0%	100%
Stagnant water	48%	52%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	94%
Limited	5%
No facility	1%



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.

94% of households reported female members in their household had access to mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Hindiya district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kerbala GOVERNORATE
Kerbela DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kerbela district 195 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 117 out-of-camp IDP, and 78 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	15,114
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	25
% of female-headed households	3

LIVELIHOODS

Average reported monthly income of households (IQD)	670,477
% of households earning an income through employment[6]	99%

6% of households reported their main source of income is through farming.

4% of households reported their main source of income is through keeping livestock.

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%

Of the 1% of households that reported facing problems related to water access, top three reasons:*,[9]

Water is too expensive	9%
Don't like taste / quality of water	9%
Water is not available at the market	6%

Among the 19% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	49%
It smells unpleasant	16%
It is unsafe	6%

Of the 2% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	5%
Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kerbala GOVERNORATE
Kerbela DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

100% 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	54%
Unsafe disposal methods	46%
Other	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	26%	74%
Human Faeces	1%	99%
Stagnant water	29%	71%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	97%
Limited	0%
No facility	3%

1% 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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Kerbela district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

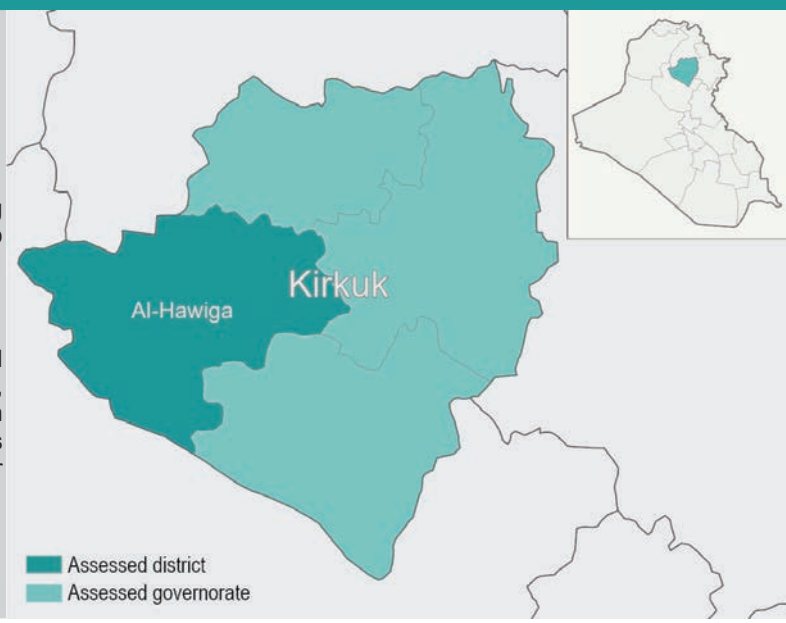
Kirkuk GOVERNORATE Hawiga DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Hawiga district 122 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 122 returnee, 0 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	426
Total returnee population in district[4,5]	149,262
Average household size	6
% of female respondents	32
% of female-headed households	22

LIVELIHOODS

Average reported monthly income of households (IQD)	404,457
% of households earning an income through employment[6]	83%

30% of households reported their main source of income is through farming.

13% of households reported their main source of income is through keeping livestock.

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]	60%
Unimproved	0%
Surface water	40%

Of the 61% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	41%
Not enough container to store the water	29%
Insufficient number of water points	28%

Among the 62% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	37%
It smells unpleasant	37%
It is turbid	25%

Of the 59% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	43%
Rely on less preferred sources for other purposes	34%
Reduce water consumption for other purposes	31%

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

80% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE Hawiga DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	98%
Unimproved	2%
Open defecation[11]	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.

48% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

63% 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	69%
Unsafe disposal methods	31%
Other	0%

34% 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	0%	100%
Stagnant water	46%	54%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	74%
Limited	26%
No facility	0%

51% 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.

93% of households reported female members in their household had access to mentrual hygiene materials.[15]

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

FLOODS

48% of households reported their area experienced flooding in the 12 months prior to data collection.

9% reported damage to their shelter due to the flooding.[17]

Among the **22%** that reported their daily activities were

Affected livelihoods due to damage to agricultural land	17%
Mobility of adults affected	12%
Children could not get to school	11%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **100%** of the Water Treatment Plants (WTPs) in Hawiga district were non-functional or not functioning at full capacity.[19]

0 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE Daquq DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Daquq district 211 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 120 returnee, 91 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	5,364
Total returnee population in district[4,5]	5,646
Average household size	6
% of female respondents	29
% of female-headed households	22

LIVELIHOODS

Average reported monthly income of households (IQD)	376,602
% of households earning an income through employment[6]	80%

27% of households reported their main source of income is through farming.

14% of households reported their main source of income is through keeping livestock.

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]	70%
Unimproved	0%
Surface water	30%

Of the 93% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	45%
Not enough container to store the water	31%
Waterpoints are too far	21%

Among the 74% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	52%
It smells unpleasant	36%
It is turbid	29%

Of the 60% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	49%
Reduce water consumption for other purposes	25%
Rely on surface water for drinking water	19%

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

86% 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., October 2019 [5] Number of individuals 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.

December 2019

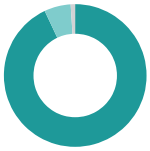
OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE Daquq DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	93%
Unimproved	6%
Open defecation[11]	2%



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.

43% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

62% 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	78%
Unsafe disposal methods	22%
Other	0%

37% 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	83%	17%
Human Faeces	0%	100%
Stagnant water	61%	39%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	83%
Limited	16%
No facility	2%

34% 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 mentrual hygiene materials.[15]

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

FLOODS

46% of households reported their area experienced flooding in the 12 months prior to data collection.

18% reported damage to their shelter due to the flooding.[17]

Among the **27%** that reported their daily activities were

Mobility of adults affected	16%
Water services negatively afftected	16%
Damage to agricultural land affected livelihoods	13%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **20%** of the Water Treatment Plants (WTPs) in Daquq district were non-functional or not functioning at full capacity.[19]

0 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE
Dibis DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Dibis district 117 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 52 returnee, 65 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	2,118
Total returnee population in district[4,5]	7,236
Average household size	5
% of female respondents	28
% of female-headed households	18

LIVELIHOODS

Average reported monthly income of households (IQD)	473,203
% of households earning an income through employment[6]	78%

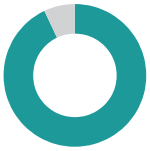
5% of households reported their main source of income is through farming.

1% of households reported their main source of income is through keeping livestock.

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]	93%
Unimproved	0%
Surface water	7%



Of the 43% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	38%
Not enough container to store the water	6%
Waterpoints are too far	3%

Among the 35% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	53%
It is turbid	44%
It smells unpleasant	23%

Of the 27% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	37%
Rely on surface water for drinking water	18%
Reduce water consumption for other purposes	14%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE Dibis DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	89%
Unimproved	11%
Open defecation[11]	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.

31% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[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	71%
Unsafe disposal methods	29%
Other	0%

77% of households reported there were insufficient waste containers in the area.

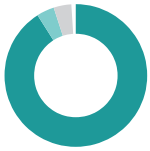
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	54%	46%
Human Faeces	0%	100%
Stagnant water	63%	37%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	91%
Limited	4%
No facility	4%



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.

95% of households reported female members in their household had access to mentrual hygiene materials.[15]

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

FLOODS

38% of households reported their area experienced flooding in the 12 months prior to data collection.

10% reported damage to their shelter due to the flooding.[17]

Among the **17%** that reported their daily activities were

Water services negatively afftected	24%
Electricity services negatively affected	21%
People getting sick	16%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **75%** of the Water Treatment Plants (WTPs) in Dibis district were non-functional or not functioning at full capacity.[19]

3 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP lacks power (electricity, fuel) to operate at full capacity.
- WTP is lacking staff to operate (at full capacity)
- The pipe network from the WTP to the area has been damaged
- The WTP is too old/poorly maintained to function properly

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE
Kirkuk DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kirkuk district 254 household surveys were conducted, in addition to 5 KIIs. Household interviews were conducted with 129 returnee, 125 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	81,456
Total returnee population in district[4,5]	162,642
Average household size	5
% of female respondents	32
% of female-headed households	16

LIVELIHOODS

Average reported monthly income of households (IQD)	475,749
% of households earning an income through employment[6]	68%

5% of households reported their main source of income is through farming.

8% of households reported their main source of income is through keeping livestock.

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%

Of the 90% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	44%
Not enough container to store the water	19%
Insufficient number of water points	17%

Among the 65% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	41%
It is turbid	34%
It smells unpleasant	28%

Of the 41% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	42%
Reduce water consumption for other purposes	20%
Rely on less preferred sources for other purposes	8%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Kirkuk GOVERNORATE
Kirkuk DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	92%
Unimproved	8%
Open defecation[11]	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.

28% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

33% 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	76%
Unsafe disposal methods	24%
Other	0%

55% of households reported there were insufficient waste containers in the area.

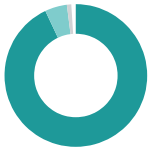
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	60%	40%
Human Faeces	0%	100%
Stagnant water	56%	44%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	93%
Limited	5%
No facility	1%



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 mentrual hygiene materials.[15]

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

FLOODS

29% of households reported their area experienced flooding in the 12 months prior to data collection.

6% reported damage to their shelter due to the flooding.[17]

Among the **10%** that reported their daily activities were

Mobility of adults affected	21%
Children could not get to school	10%
Water services negatively affected	6%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **42%** of the Water Treatment Plants (WTPs) in Kirkuk district were non-functional or not functioning at full capacity.[19]

3 out of 5 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- Capacity of WTP is not sufficient to serve the whole area
- WTP is lacking staff to operate (at full capacity)

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.

December 2019

OUT-OF-CAMP WASH NEEDS

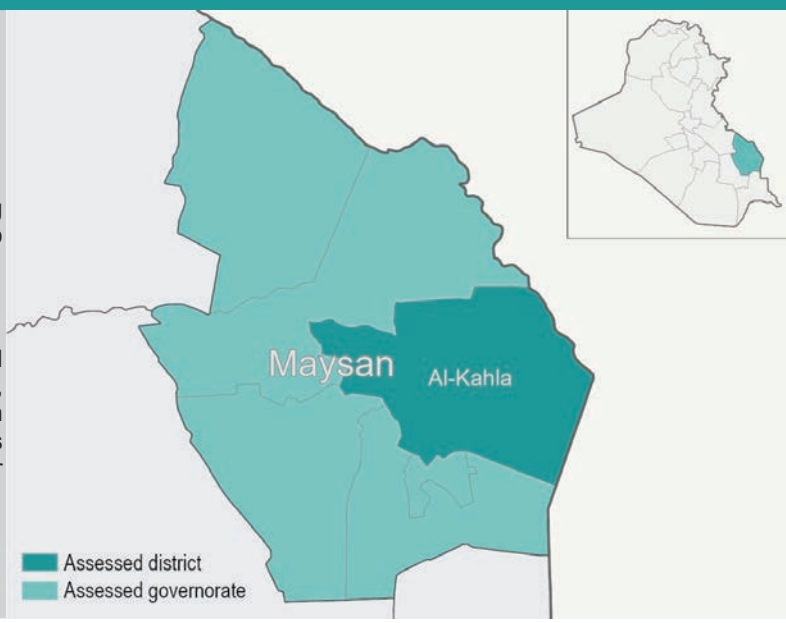
Maysan GOVERNORATE Al Kahla DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Kahla district 152 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 0 returnee, 98 out-of-camp IDP, and 54 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,956
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	8
% of female-headed households	7

LIVELIHOODS

Average reported monthly income of households (IQD)	712,089
% of households earning an income through employment[6]	90%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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 37% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	27%
It tastes unpleasant	17%
It is unsafe	17%

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

Of the 0% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are too far	3%
Waterpoints are difficult to reach	3%
Fetching water is a dangerous activity	3%

Of the 0% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Maysan GOVERNORATE Al Kahla DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

3% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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%
Other	0%

87% 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	3%	97%
Human Faeces	0%	100%
Stagnant water	0%	100%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	75%
Limited	24%
No facility	1%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **33%** of the Water Treatment Plants (WTPs) in Al Kahla district were non-functional or not functioning at full capacity.[19]

2 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Najaf GOVERNORATE
Al Kufa DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Kufa district 222 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 222 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	3,540
Total returnee population in district[4,5]	-
Average household size	7
% of female respondents	15
% of female-headed households	12

LIVELIHOODS

Average reported monthly income of households (IQD)	393,248
% of households earning an income through employment[6]	96%

2% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 6% of households that reported facing problems related to water access, top three reasons:*,[9]

Not enough container to store the water	24%
Don't like taste / quality of water	10%
Waterpoints are too far	3%

Among the 6% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	19%
It is unsafe	11%
It smells unpleasant	5%

Of the 2% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Reduce water consumption for other purposes	6%
Fetch water at a source further than the usual one	5%
Rely on less preferred drinking sources	4%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Najaf GOVERNORATE Al Kufa DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	0%
Open defecation[11]	1%

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.

7% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

68% 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%
Other	0%

18% of households reported there were insufficient waste containers in the area.

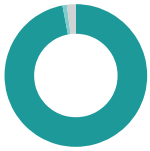
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	78%	22%
Human Faeces	0%	100%
Stagnant water	11%	89%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	97%
Limited	1%
No facility	2%



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.

100% of households reported female members in their household had access to mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **1%** that reported their daily activities were affected

Electricity services negatively affected	23%
Water services negatively afftected	17%
Children could not get to school	5%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Kufa district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

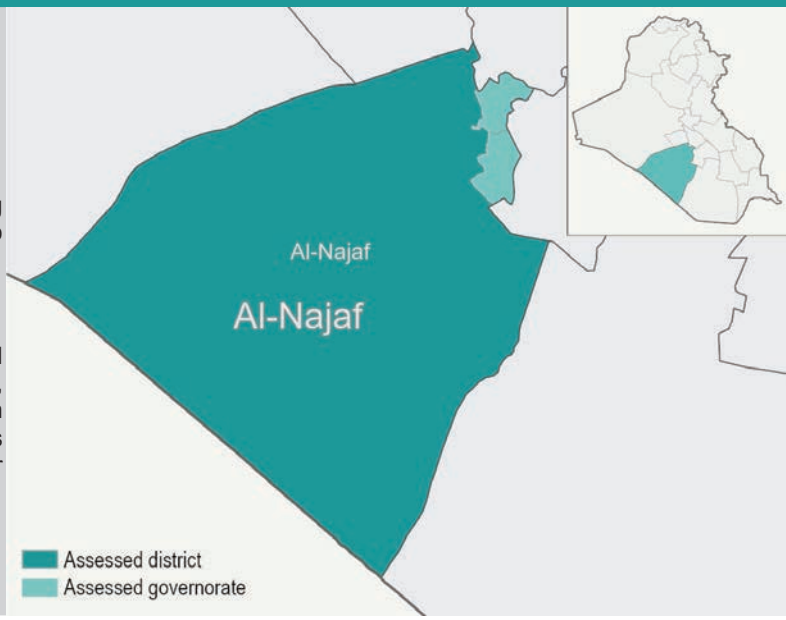
Najaf GOVERNORATE
Al Najaf DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Najaf district 148 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 147 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	-
Total returnee population in district[4,5]	-
Average household size	13
% of female respondents	2
% of female-headed households	2

LIVELIHOODS

Average reported monthly income of households (IQD)	354,820
% of households earning an income through employment[6]	100%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 1% of households that reported facing problems related to water access, top three reasons:*[,9]

Not enough container to store the water	8%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 0% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

NA	NA%
NA	NA%
NA	NA%

Of the 0% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	3%
Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Najaf GOVERNORATE
Al Najaf DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

89% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

97% 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%
Other	0%

3% 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	97%	3%
Human Faeces	0%	100%
Stagnant water	1%	99%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	99%
Limited	1%
No facility	0%

90% 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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Najaf district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

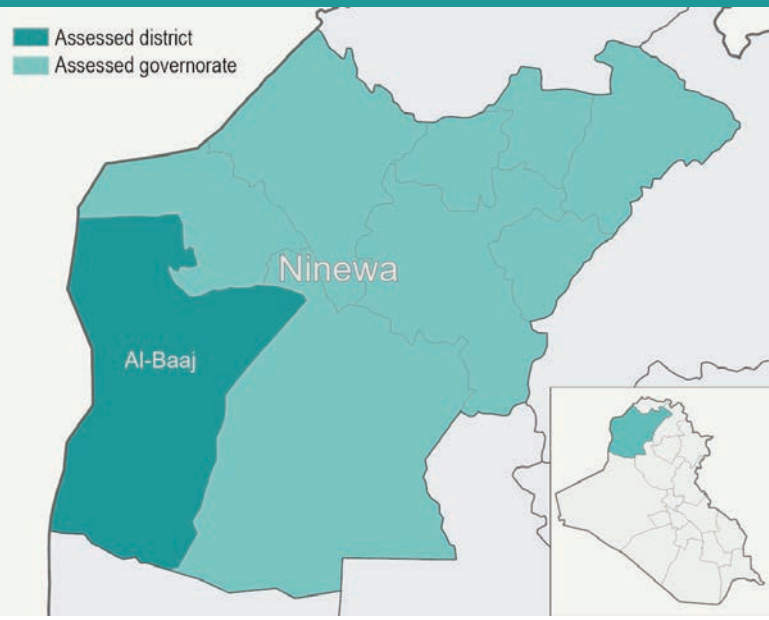
Ninewa GOVERNORATE Al Baaj DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Baaj district 270 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 212 returnee, 58 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	6,588
Total returnee population in district[4,5]	19,086
Average household size	9
% of female respondents	27
% of female-headed households	15

LIVELIHOODS

Average reported monthly income of households (IQD)	264,079
% of households earning an income through employment[6]	88%

3% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 100% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	41%
Insufficient number of water points	33%
Water points are not functioning or close	26%

Among the 22% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	35%
It is unsafe	35%
It tastes unpleasant	19%

Of the 99% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	50%
Rely on less preferred sources for other purposes	37%
Reduce water consumption for other purposes	35%

15% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

21% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE
Al Baaj DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	71%
Unimproved	29%
Open defecation[11]	0%

84% 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.[12]

99% of households reported having access to a private shower.

WASTE

14% 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	80%
Unsafe disposal methods	20%
Other	0%

34% 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	80%	20%
Human Faeces	0%	100%
Stagnant water	22%	78%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	60%
Limited	24%
No facility	16%

19% 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.

92% of households reported female members in their household had access to mentrual hygiene materials.[15]

86% of households reported having access to sufficient hygiene materials.[16]

FLOODS

39% of households reported their area experienced flooding in the 12 months prior to data collection.

25% reported damage to their shelter due to the flooding.[17]

Among the **31%** that reported their daily activities were

Mobility of adults affected	23%
Electricity services negatively affected	19%
Loss/damage to households' items	15%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Baaj district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

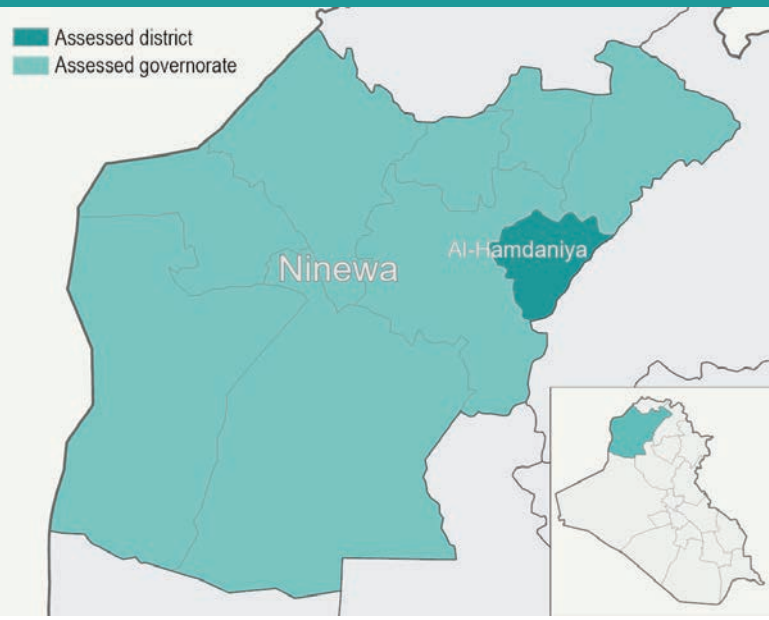
Ninewa GOVERNORATE Al Hamdaniya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Hamdaniya district 131 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 76 returnee, 52 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	26,712
Total returnee population in district[4,5]	177,408
Average household size	7
% of female respondents	52
% of female-headed households	42

LIVELIHOODS

Average reported monthly income of households (IQD)	475,063
% of households earning an income through employment[6]	76%

10% of households reported their main source of income is through farming.

9% of households reported their main source of income is through keeping livestock.

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%

Of the 48% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	31%
Not enough container to store the water	28%
Don't like taste / quality of water	27%

Among the 49% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	39%
It smells unpleasant	35%
It is unsafe	29%

Of the 39% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Reduce drinking water consumption	30%
Reduce water consumption for other purposes	29%
Rely on less preferred drinking sources	26%

94% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

59% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Al Hamdaniya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	97%
Unimproved	3%
Open defecation[11]	0%

86% 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.[12]

96% of households reported having access to a private shower.

WASTE

16% 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	71%
Unsafe disposal methods	29%
Other	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	38%	62%
Human Faeces	0%	100%
Stagnant water	22%	78%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	48%
Limited	51%
No facility	1%

23% 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.

93% of households reported female members in their household had access to mentrual hygiene materials.[15]

87% 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.

9% reported damage to their shelter due to the flooding.[17]

Among the **22%** that reported their daily activities were

Children could not get to school	22%
Electricity services negatively affected	22%
Water services negatively affected	21%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Al Hamdaniya district were non-functional or not functioning at full capacity.[19]

0 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

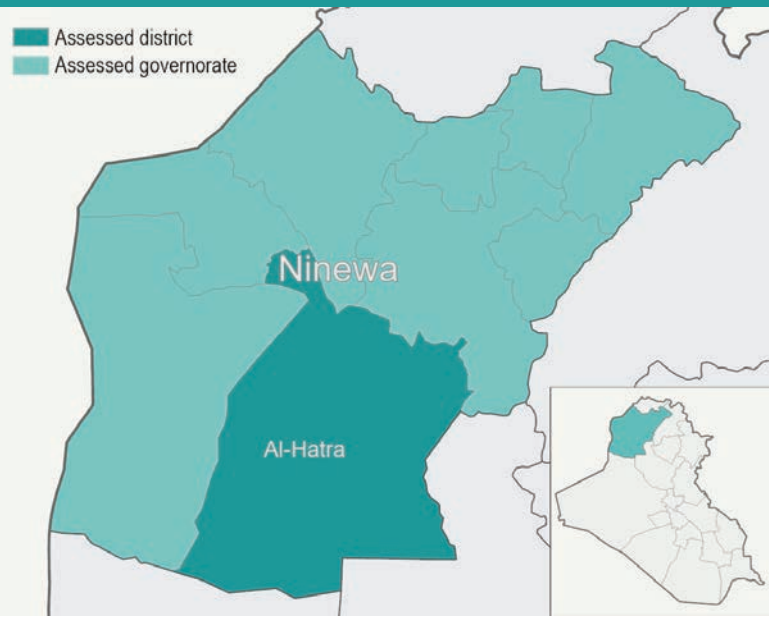
Ninewa GOVERNORATE Al Hatra DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Hatra district 156 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 156 returnee, 0 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,290
Total returnee population in district[4,5]	34,422
Average household size	8
% of female respondents	12
% of female-headed households	8

LIVELIHOODS

Average reported monthly income of households (IQD)	346,090
% of households earning an income through employment[6]	99%

0% of households reported their main source of income is through farming.

11% of households reported their main source of income is through keeping livestock.

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%

Of the 88% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	40%
Don't like taste / quality of water	32%
Insufficient number of water points	30%

Among the 38% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	46%
It tastes unpleasant	32%
It smells unpleasant	29%

Of the 72% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	51%
Rely on less preferred sources for other purposes	31%
Fetch water at a source further than the usual one	28%

51% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

42% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Al Hatra DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	97%
Unimproved	3%
Open defecation[11]	0%

82% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

34% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% of households reported having access to a private shower.

WASTE

49% 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	79%
Unsafe disposal methods	21%
Other	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	79%	21%
Human Faeces	0%	100%
Stagnant water	17%	83%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	75%
Limited	10%
No facility	15%

19% 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.

86% of households reported female members in their household had access to mentrual hygiene materials.[15]

78% 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.

26% reported damage to their shelter due to the flooding.[17]

Among the **29%** that reported their daily activities were

Mobility of adults affected	22%
Children could not get to school	18%
Electricity services negatively affected	16%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Hatra district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

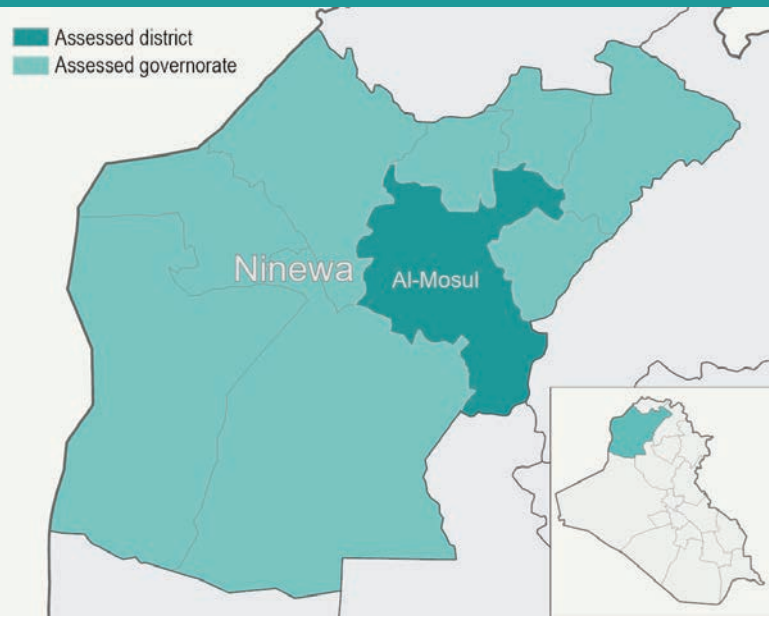
Ninewa GOVERNORATE
Al Mosul DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Mosul district 329 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 103 returnee, 114 out-of-camp IDP, and 112 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	100,548
Total returnee population in district[4,5]	986,922
Average household size	6
% of female respondents	10
% of female-headed households	9

LIVELIHOODS

Average reported monthly income of households (IQD)	462,975
% of households earning an income through employment[6]	97%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 35% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	33%
Don't like taste / quality of water	28%
Insufficient number of water points	27%

Among the 67% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	33%
It tastes unpleasant	24%
It is unsafe	7%

Of the 54% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	47%
Rely on less preferred sources for other purposes	28%
Fetch water at a source further than the usual one	20%

95% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

78% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Al Mosul DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

29% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

22% 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	95%
Unsafe disposal methods	5%
Other	0%

61% of households reported there were insufficient waste containers in the area.

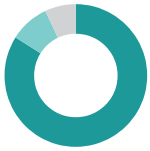
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	71%	29%
Human Faeces	0%	100%
Stagnant water	14%	86%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	84%
Limited	9%
No facility	7%



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.

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

91% of households reported having access to sufficient hygiene materials.[16]

FLOODS

27% of households reported their area experienced flooding in the 12 months prior to data collection.

10% reported damage to their shelter due to the flooding.[17]

Among the **26%** that reported their daily activities were

Water services negatively afftected	18%
Children could not get to school	15%
Mobility of adults affected	15%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Al Mosul district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

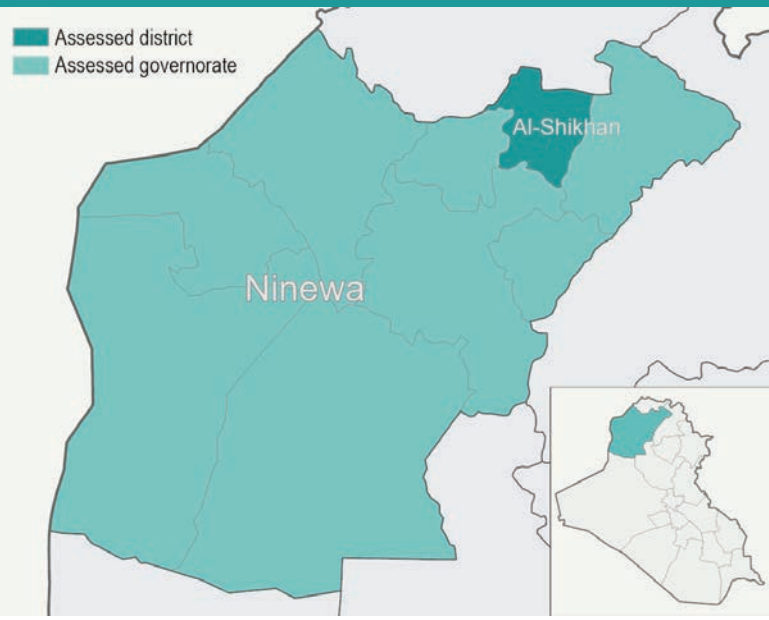
Ninewa GOVERNORATE Al Shikhan DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Shikhan district 201 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 63 returnee, 138 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	22,674
Total returnee population in district[4,5]	1,776
Average household size	7
% of female respondents	37
% of female-headed households	17

LIVELIHOODS

Average reported monthly income of households (IQD)	439,990
% of households earning an income through employment[6]	86%

21% of households reported their main source of income is through farming.

3% of households reported their main source of income is through keeping livestock.

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%

Of the 29% of households that reported facing problems related to water access, top three reasons:*[,9]

Not enough container to store the water	30%
Don't like taste / quality of water	26%
Waterpoints are too far	19%

Among the 25% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	38%
It is unsafe	37%
It smells unpleasant	30%

Of the 35% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	36%
Reduce water consumption for other purposes	28%
Rely on less preferred sources for other purposes	20%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Al Shikhan DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	91%
Unimproved	7%
Open defecation[11]	2%

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.

14% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

91% of households reported having access to a private shower.

WASTE

15% 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	83%
Unsafe disposal methods	17%
Other	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	29%	71%
Human Faeces	0%	100%
Stagnant water	35%	65%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	61%
Limited	12%
No facility	27%

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.

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

89% 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.

14% reported damage to their shelter due to the flooding.[17]

Among the **11%** that reported their daily activities were

Loss/damage to households' items	22%
People getting sick	15%
Electricity services negatively affected	10%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Al Shikhan district were non-functional or not functioning at full capacity.[19]

0 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

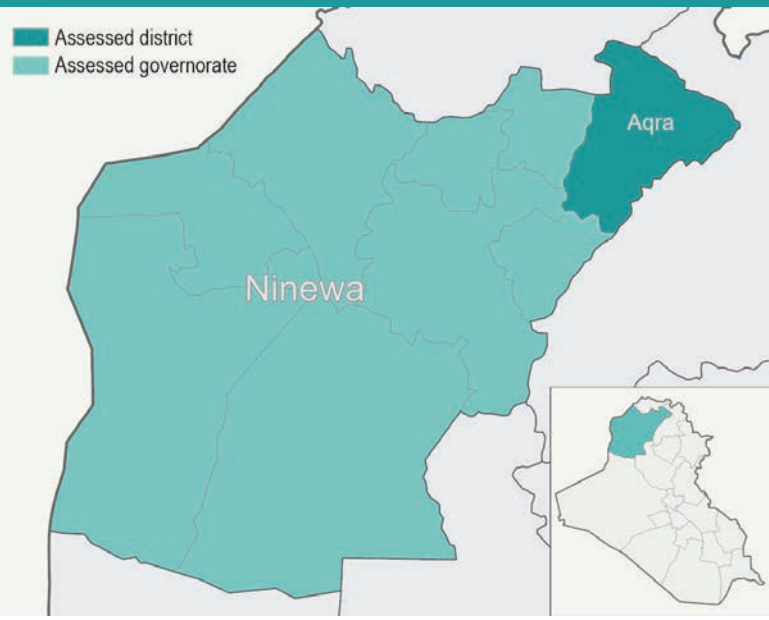
Ninewa GOVERNORATE Aqra DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Aqra district 164 household surveys were conducted, in addition to 5 KIIs. Household interviews were conducted with 0 returnee, 163 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	24,894
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	17
% of female-headed households	11

LIVELIHOODS

Average reported monthly income of households (IQD)	438,303
% of households earning an income through employment[6]	88%

4% of households reported their main source of income is through farming.

3% of households reported their main source of income is through keeping livestock.

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%

Of the 5% of households that reported facing problems related to water access, top three reasons:*,9

Don't like taste / quality of water	16%
Fetching water is a dangerous activity	7%
Insufficient number of water points	7%

Among the 12% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,9

It is unsafe	48%
It tastes unpleasant	11%
It is turbid	8%

Of the 23% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,9

Rely on less preferred drinking sources	30%
Reduce water consumption for other purposes	21%
Reduce drinking water consumption	18%

99% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Aqra DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	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.

7% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

18% 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	76%
Unsafe disposal methods	24%
Other	0%

74% 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	3%	97%
Human Faeces	0%	100%
Stagnant water	16%	84%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	68%
Limited	13%
No facility	19%

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.

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

98% 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.

1% reported damage to their shelter due to the flooding.[17]

Among the **1%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **100%** of the Water Treatment Plants (WTPs) in Aqra district were non-functional or not functioning at full capacity.[19]

0 out of 5 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

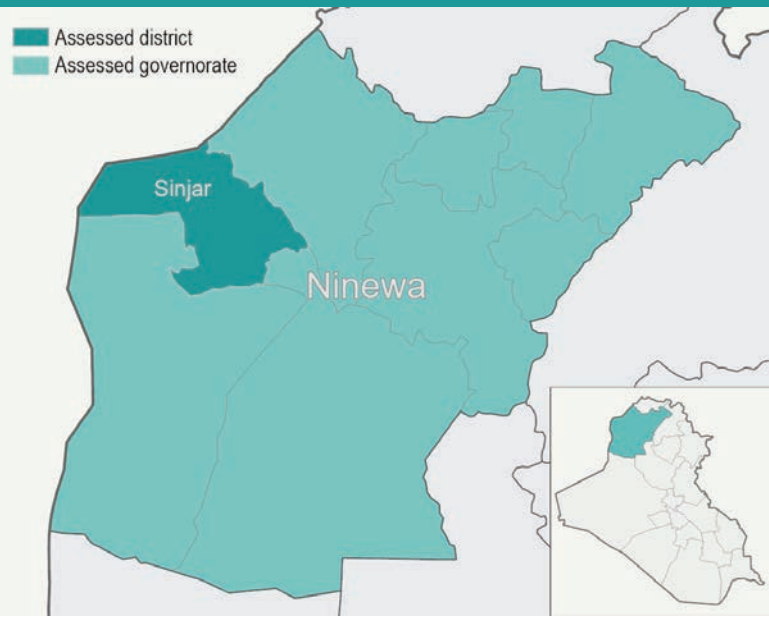
Ninewa GOVERNORATE Sinjar DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Sinjar district 217 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 123 returnee, 94 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	25,404
Total returnee population in district[4,5]	66,396
Average household size	8
% of female respondents	25
% of female-headed households	13

LIVELIHOODS

Average reported monthly income of households (IQD)	253,108
% of households earning an income through employment[6]	71%

27% of households reported their main source of income is through farming.

15% of households reported their main source of income is through keeping livestock.

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%

Of the 86% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	39%
Not enough container to store the water	37%
Don't like taste / quality of water	34%

Among the 43% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	32%
It tastes unpleasant	25%
It smells unpleasant	24%

Of the 91% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	52%
Rely on less preferred sources for other purposes	39%
Reduce water consumption for other purposes	33%

90% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

22% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Sinjar DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	74%
Unimproved	15%
Open defecation[11]	11%

20% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

50% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

89% of households reported having access to a private shower.

WASTE

19% 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	32%
Unsafe disposal methods	55%
Other	13%

37% 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	47%	53%
Human Faeces	6%	94%
Stagnant water	37%	63%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	17%
Limited	50%
No facility	33%

26% 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.

55% of households reported female members in their household had access to mentrual hygiene materials.[15]

48% of households reported having access to sufficient hygiene materials.[16]

FLOODS

52% of households reported their area experienced flooding in the 12 months prior to data collection.

34% reported damage to their shelter due to the flooding.[17]

Among the **41%** that reported their daily activities were

Electricity services negatively affected	25%
Water services negatively afftected	23%
Damage to agricultural land affected livelihoods	20%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Sinjar district were non-functional or not functioning at full capacity.[19]

0 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

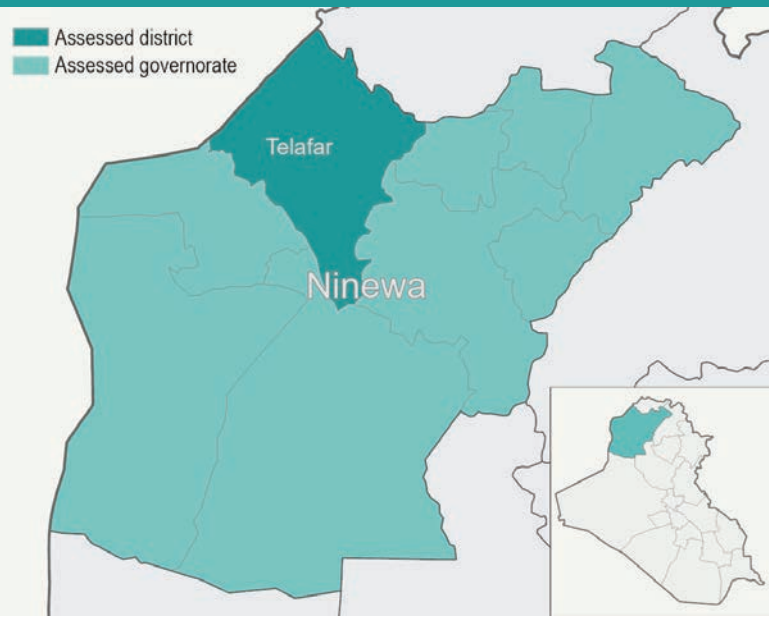
Ninewa GOVERNORATE Telafar DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Telafar district 218 household surveys were conducted, in addition to 6 KIIs. Household interviews were conducted with 119 returnee, 99 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	9,900
Total returnee population in district[4,5]	339,396
Average household size	7
% of female respondents	8
% of female-headed households	7

LIVELIHOODS

Average reported monthly income of households (IQD)	406,582
% of households earning an income through employment[6]	97%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 52% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	37%
Insufficient number of water points	31%
Don't like taste / quality of water	30%

Among the 59% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	45%
It is turbid	31%
It smells unpleasant	7%

Of the 59% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	48%
Rely on less preferred sources for other purposes	32%
Reduce water consumption for other purposes	24%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Telafar DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	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.

31% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% of households reported having access to a private shower.

WASTE

51% 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	86%
Unsafe disposal methods	13%
Other	1%

32% 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	83%	17%
Human Faeces	0%	100%
Stagnant water	33%	67%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	76%
Limited	9%
No facility	15%

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.

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

88% of households reported having access to sufficient hygiene materials.[16]

FLOODS

36% of households reported their area experienced flooding in the 12 months prior to data collection.

27% reported damage to their shelter due to the flooding.[17]

Among the **36%** that reported their daily activities were

Children could not get to school	21%
Mobility of adults affected	19%
Water services negatively affected	19%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Telafar district were non-functional or not functioning at full capacity.[19]

3 out of 6 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.
- The intake water to the WTP is too dirty/salinated

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

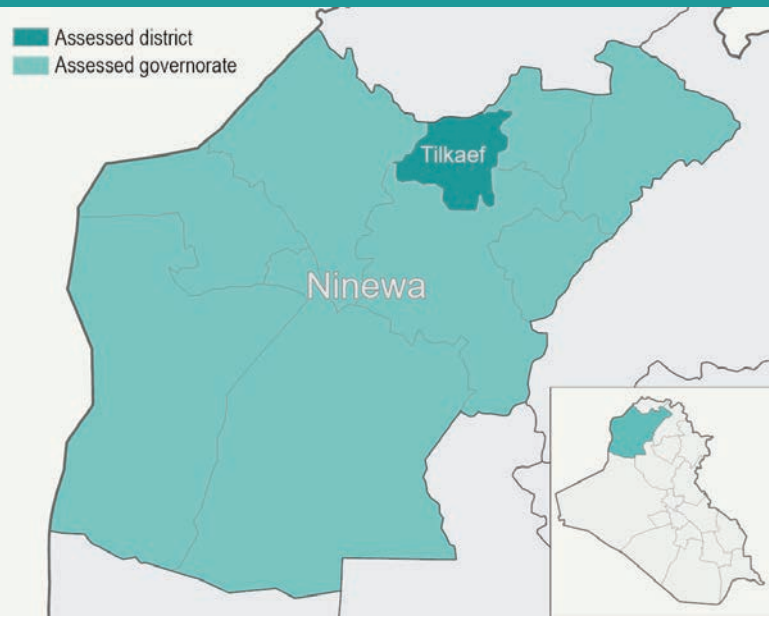
Ninewa GOVERNORATE Tilkaef DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Tilkaef district 254 household surveys were conducted, in addition to 4 KIIs. Household interviews were conducted with 118 returnee, 135 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	21,204
Total returnee population in district[4,5]	121,950
Average household size	6
% of female respondents	17
% of female-headed households	10

LIVELIHOODS

Average reported monthly income of households (IQD)	338,731
% of households earning an income through employment[6]	96%

8% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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]	99%
Unimproved	0%
Surface water	0%

Of the 43% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	36%
Waterpoints are too far	24%
Not enough container to store the water	15%

Among the 58% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It tastes unpleasant	39%
It is turbid	37%
It smells unpleasant	32%

Of the 48% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	46%
Reduce water consumption for other purposes	13%
Spend money (or credit) on water	8%

98% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

93% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Ninewa GOVERNORATE Tilkaef DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

20% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% of households reported having access to a private shower.

WASTE

26% 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	95%
Unsafe disposal methods	5%
Other	0%

37% 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	67%	33%
Human Faeces	0%	100%
Stagnant water	42%	58%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	78%
Limited	10%
No facility	12%

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.

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

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

FLOODS

20% of households reported their area experienced flooding in the 12 months prior to data collection.

13% reported damage to their shelter due to the flooding.[17]

Among the **20%** that reported their daily activities were

Mobility of adults affected	24%
Children could not get to school	20%
Loss/damage to households' items	11%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **0%** of the Water Treatment Plants (WTPs) in Tilkaef district were non-functional or not functioning at full capacity.[19]

1 out of 4 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

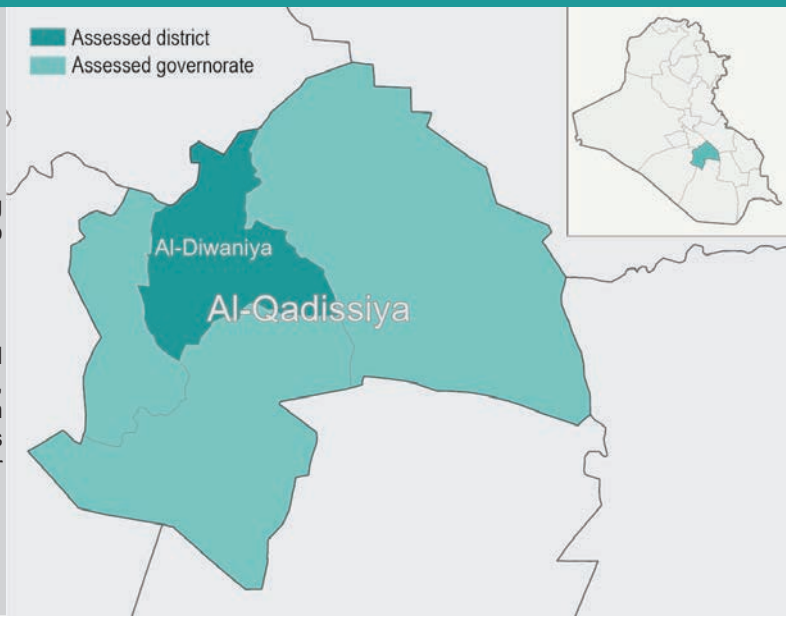
Qadissiya GOVERNORATE
Al Diwaniya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Diwaniya district 82 household surveys were conducted, in addition to 4 KIIs. Household interviews were conducted with 0 returnee, 82 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	2,520
Total returnee population in district[4,5]	-
Average household size	4
% of female respondents	1
% of female-headed households	1

LIVELIHOODS

Average reported monthly income of households (IQD)	658,171
% of households earning an income through employment[6]	100%

5% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 1% of households that reported facing problems related to water access, top three reasons:*,[9]

Don't like taste / quality of water	11%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 51% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It tastes unpleasant	54%
It is turbid	51%
It is unsafe	51%

Of the 0% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Qadissiya GOVERNORATE Al Diwaniya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

7% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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%
Other	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	100%	0%
Human Faeces	0%	100%
Stagnant water	51%	49%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	91%
Limited	7%
No facility	1%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **10%** of the Water Treatment Plants (WTPs) in Al Diwaniya district were non-functional or not functioning at full capacity.[19]

4 out of 4 KIs reported water in the area is not clean enough to drink, top reasons were:

- The pipe network from the WTP to the area has been damaged.
- The WTP is too old/poorly maintained to function properly
- Capacity of WTP is not sufficient to serve the whole area

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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Al Daur DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Daur district 75 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 75 returnee, 0 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	306
Total returnee population in district[4,5]	60,486
Average household size	7
% of female respondents	25
% of female-headed households	16

LIVELIHOODS

Average reported monthly income of households (IQD)	596,919
% of households earning an income through employment[6]	73%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 20% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	28%
Not enough container to store the water	25%
Don't like taste / quality of water	25%

Among the 72% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	41%
It is unsafe	30%
It tastes unpleasant	23%

Of the 19% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Spend money (or credit) on water	22%
Rely on less preferred drinking sources	19%
Rely on less preferred sources 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).

93% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Al Daur DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	99%
Unimproved	1%
Open defecation[11]	0%

95% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

36% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

95% of households reported having access to a private shower.

WASTE

8% 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	83%
Unsafe disposal methods	17%
Other	0%

52% 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	0%	100%
Stagnant water	27%	73%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	59%
Limited	41%
No facility	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.

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

96% 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.

3% reported damage to their shelter due to the flooding.[17]

Among the **5%** that reported their daily activities were affected

Water services negatively afftected	22%
Children could not get to school	16%
Damage to agricultural land affected livelihoods	15%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **75%** of the Water Treatment Plants (WTPs) in Al Daur district were non-functional or not functioning at full capacity.[19]

2 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP lacks power (electricity, fuel) to operate at full capacity
- The WTP is too old/poorly maintained to function properly
- Capacity of WTP is not sufficient to serve the whole area

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Al Shirqat DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Shirqat district 284 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 127 returnee, 89 out-of-camp IDP, and 68 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,386
Total returnee population in district[4,5]	131,850
Average household size	5
% of female respondents	22
% of female-headed households	21

LIVELIHOODS

Average reported monthly income of households (IQD)	305,978
% of households earning an income through employment[6]	86%

18% of households reported their main source of income is through farming.

7% of households reported their main source of income is through keeping livestock.

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 60% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,9

It is turbid	45%
It smells unpleasant	20%
It is unsafe	10%

96% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

Of the 33% of households that reported facing problems related to water access, top three reasons:*,9

Waterpoints are too far	34%
Not enough container to store the water	27%
Insufficient number of water points	22%

Of the 36% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,9

Rely on less preferred drinking sources	39%
Rely on surface water for drinking water	29%
Rely on less preferred sources for other purposes	19%

72% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Al Shirqat DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	88%
Unimproved	12%
Open defecation[11]	0%

73% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

37% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

80% of households reported having access to a private shower.

WASTE

24% 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	26%
Unsafe disposal methods	73%
Other	1%

28% 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	0%	100%
Stagnant water	17%	83%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	60%
Limited	36%
No facility	4%

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.

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

93% of households reported having access to sufficient hygiene materials.[16]

FLOODS

5% of households reported their area experienced flooding in the 12 months prior to data collection.

4% reported damage to their shelter due to the flooding.[17]

Among the **4%** that reported their daily activities were affected

Children could not get to school	23%
Affected livelihoods due to damage to agricultural land	18%
Electricity services negatively affected	17%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **4%** of the Water Treatment Plants (WTPs) in Al Shirqat district were non-functional or not functioning at full capacity.[19]

1 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP is lacking consumables (chlorine, aluminium sulfate)
- The WTP is too old/poorly maintained to function properly
- Capacity of WTP is not sufficient to serve the whole area

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Beygee DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Beygee district 177 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 109 returnee, 68 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,482
Total returnee population in district[4,5]	131,304
Average household size	8
% of female respondents	5
% of female-headed households	5

LIVELIHOODS

Average reported monthly income of households (IQD)	418,934
% of households earning an income through employment[6]	88%

18% of households reported their main source of income is through farming.

21% of households reported their main source of income is through keeping livestock.

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%

Of the 30% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	36%
Not enough container to store the water	26%
Insufficient number of water points	23%

Among the 65% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	50%
It smells unpleasant	26%
It is unsafe	13%

Of the 39% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	41%
Rely on less preferred sources for other purposes	29%
Rely on surface water for drinking water	23%

91% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

69% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Beygee DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	82%
Unimproved	15%
Open defecation[11]	3%

72% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

42% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

80% of households reported having access to a private shower.

WASTE

34% 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	10%
Unsafe disposal methods	89%
Other	1%

21% 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	1%	99%
Stagnant water	29%	71%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	32%
Limited	51%
No facility	16%

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.

92% of households reported female members in their household had access to mentrual hygiene materials.[15]

88% 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.

7% reported damage to their shelter due to the flooding.[17]

Among the **7%** that reported their daily activities were affected

Children could not get to school	24%
Electricity services negatively affected	24%
Water services negatively affected	20%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **75%** of the Water Treatment Plants (WTPs) in Beygee district were non-functional or not functioning at full capacity.[19]

2 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP lacks power (electricity, fuel) to operate at full capacity
- The WTP is too old/poorly maintained to function properly

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Tikrit DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Tikrit district 206 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 101 returnee, 104 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	22,620
Total returnee population in district[4,5]	173,016
Average household size	6
% of female respondents	25
% of female-headed households	24

LIVELIHOODS

Average reported monthly income of households (IQD)	385,346
% of households earning an income through employment[6]	78%

9% of households reported their main source of income is through farming.

1% of households reported their main source of income is through keeping livestock.

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%

Of the 10% of households that reported facing problems related to water access, top three reasons:*[,9]

Waterpoints are too far	30%
Not enough container to store the water	23%
Insufficient number of water points	6%

Among the 83% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is turbid	48%
It smells unpleasant	40%
It is unsafe	18%

Of the 14% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Spend money (or credit) on water	18%
Rely on less preferred drinking sources	17%
Fetch water at a source further than the usual one	7%

91% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

63% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Tikrit DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	66%
Unimproved	33%
Open defecation[11]	1%

62% 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.[12]

87% 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	13%
Unsafe disposal methods	85%
Other	2%

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

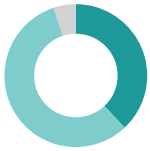
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	11%	89%
Human Faeces	0%	100%
Stagnant water	25%	75%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	38%
Limited	57%
No facility	5%



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 mentrual hygiene materials.[15]

93% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **9%** of the Water Treatment Plants (WTPs) in Tikrit district were non-functional or not functioning at full capacity.[19]

0 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Tooz Khurmato DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Tooz Khurmato district 271 household surveys were conducted, in addition to 3 KIIs. Household interviews were conducted with 143 returnee, 105 out-of-camp IDP, and 0 host community households.

DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	-
Total returnee population in district[4,5]	-
Average household size	6
% of female respondents	53
% of female-headed households	29

LIVELIHOODS

Average reported monthly income of households (IQD)	267,161
% of households earning an income through employment[6]	77%

7% of households reported their main source of income is through farming.

18% of households reported their main source of income is through keeping livestock.

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]	97%
Unimproved	0%
Surface water	2%

Of the 51% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	35%
Not enough container to store the water	32%
Waterpoints are too far	29%

Among the 39% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It smells unpleasant	38%
It is turbid	36%
It is unsafe	31%

Of the 54% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred drinking sources	45%
Rely on less preferred sources for other purposes	30%
Rely on surface water for drinking water	25%

99% of households reported needing less than 30 minutes to fetch water (round trip by walking, queuing and time needed to fetch water).

78% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Salah Al-Din GOVERNORATE Tooz Khurmato DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	98%
Unimproved	1%
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.

14% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

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

WASTE

47% 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	73%
Unsafe disposal methods	27%
Other	0%

27% 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	39%	61%
Human Faeces	0%	100%
Stagnant water	22%	78%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	47%
Limited	25%
No facility	28%

31% 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.

91% of households reported female members in their household had access to mentrual hygiene materials.[15]

90% 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.

2% reported damage to their shelter due to the flooding.[17]

Among the **4%** that reported their daily activities were affected

Mobility of adults affected	20%
Affected livelihoods due to damage to agricultural land	16%
Water services negatively affected	15%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **75%** of the Water Treatment Plants (WTPs) in Tooz Khurmato district were non-functional or not functioning at full capacity.[19]

1 out of 3 KIs reported water in the area is not clean enough to drink, top reasons were:

- Capacity of WTP is not sufficient to serve the whole area.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

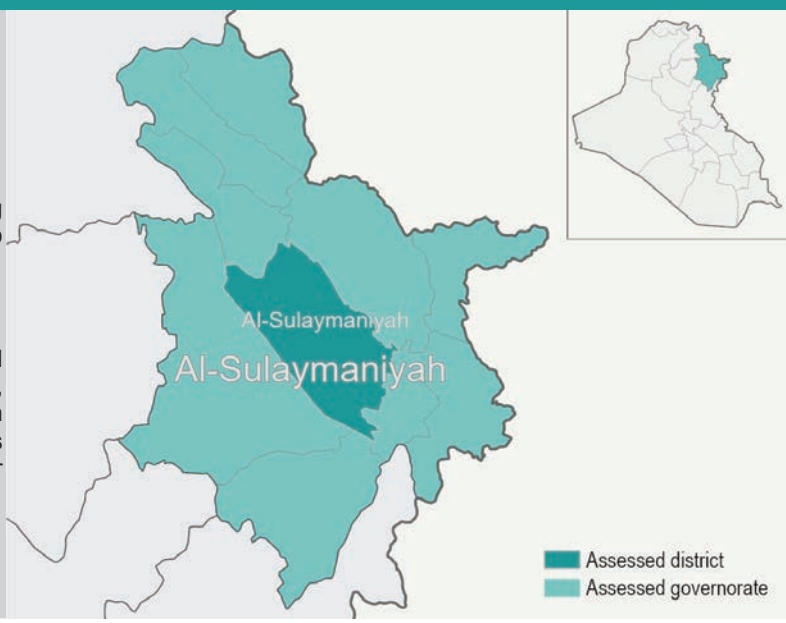
Sulaymaniyah GOVERNORATE
Al Sulaymaniyah DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Sulaymaniyah district 49 household surveys were conducted, in addition to 1 KIIs. Household interviews were conducted with 0 returnee, 49 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	-
Total returnee population in district[4,5]	-
Average household size	6
% of female respondents	29
% of female-headed households	14

LIVELIHOODS

Average reported monthly income of households (IQD)	427,143
% of households earning an income through employment[6]	88%

55% of households reported their main source of income is through farming.

10% of households reported their main source of income is through keeping livestock.

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%

Of the 4% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are difficult to reach	24%
Waterpoints are too far	3%
Fetching water is a dangerous activity	3%

Among the 10% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	36%
It is turbid	13%
It tastes unpleasant	13%

Of the 4% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	9%
Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%

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 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE
Al Sulaymaniyah DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	98%
Unimproved	2%
Open defecation[11]	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.

2% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	86%
Unsafe disposal methods	14%
Other	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	14%	86%
Human Faeces	0%	100%
Stagnant water	10%	90%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	78%
Limited	8%
No facility	14%

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.

95% of households reported female members in their household had access to mentrual hygiene materials.[15]

94% 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **20%** of the Water Treatment Plants (WTPs) in Al Sulaymaniyah district were non-functional or not functioning at full capacity.[19]

0 out of 1 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

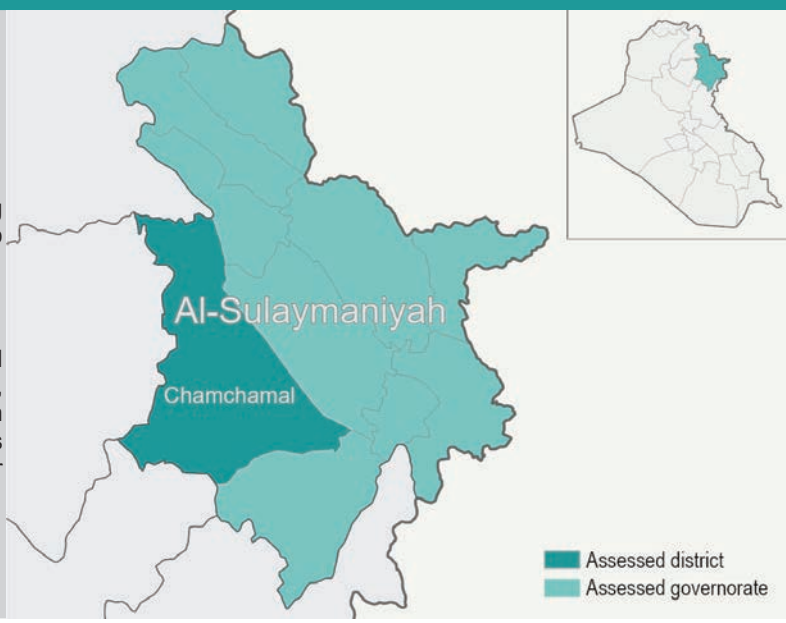
Sulaymaniyah GOVERNORATE Chamchamal DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Chamchamal district 106 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 106 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	10,260
Total returnee population in district[4,5]	-
Average household size	6
% of female respondents	41
% of female-headed households	20

LIVELIHOODS

Average reported monthly income of households (IQD)	295,429
% of households earning an income through employment[6]	82%

16% of households reported their main source of income is through farming.

10% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,[9]

Not enough container to store the water	21%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 24% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	34%
It tastes unpleasant	23%
It smells unpleasant	10%

Of the 8% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	11%
Reduce water consumption for other purposes	8%
Rely on less preferred sources 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).

67% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE Chamchamal DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	92%
Unimproved	8%
Open defecation[11]	0%

73% 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.[12]

100% 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	90%
Unsafe disposal methods	9%
Other	1%

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

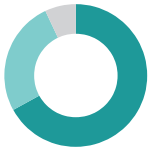
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	3%	97%
Human Faeces	0%	100%
Stagnant water	4%	96%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	67%
Limited	26%
No facility	7%



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.

86% of households reported female members in their household had access to mentrual hygiene materials.[15]

81% 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.

1% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Chamchamal district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

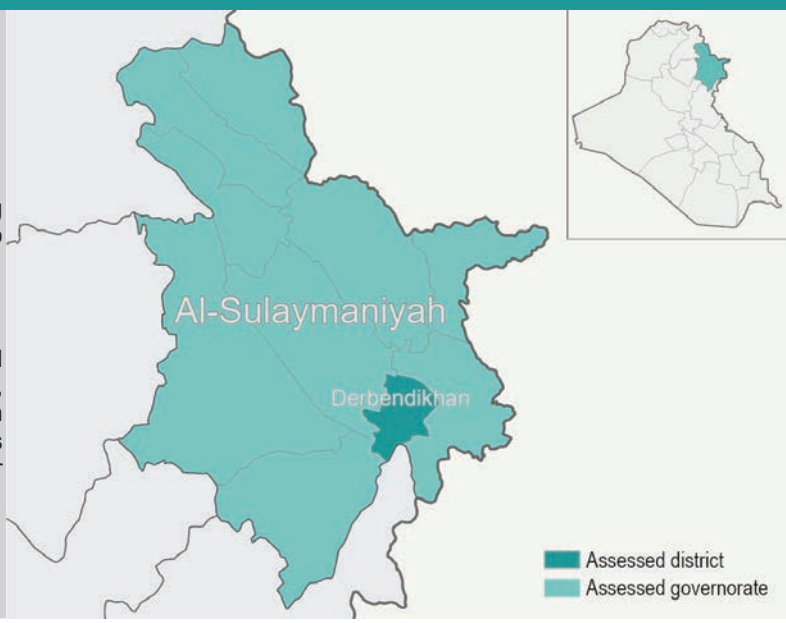
Sulaymaniyah GOVERNORATE Derbendikhan DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Derbendikhan district 111 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 111 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	6,378
Total returnee population in district[4,5]	-
Average household size	7
% of female respondents	32
% of female-headed households	17

LIVELIHOODS

Average reported monthly income of households (IQD)	347,928
% of households earning an income through employment[6]	85%

10% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 4% of households that reported facing problems related to water access, top three reasons:*,[9]

Not enough container to store the water	16%
Insufficient number of water points	12%
Waterpoints are too far	6%

Among the 24% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	38%
It smells unpleasant	34%
It tastes unpleasant	26%

Of the 6% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	11%
Spend money (or credit) on water	11%
Reduce drinking water consumption	9%

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

80% 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., October 2019 [5] Number of individuals 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.

December 2019

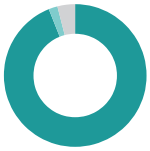
OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE Derbendikhan DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	94%
Unimproved	2%
Open defecation[11]	4%



85% 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.[12]

100% 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	89%
Unsafe disposal methods	8%
Other	3%

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	5%	95%
Human Faeces	0%	100%
Stagnant water	9%	91%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	75%
Limited	17%
No facility	8%

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.

89% of households reported female members in their household had access to mentrual hygiene materials.[15]

89% 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.

4% reported damage to their shelter due to the flooding.[17]

Among the **4%** that reported their daily activities were affected

Loss/damage to households' items	24%
Water services negatively afftected	22%
Electricity services negatively affected	20%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Derbendikhan district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

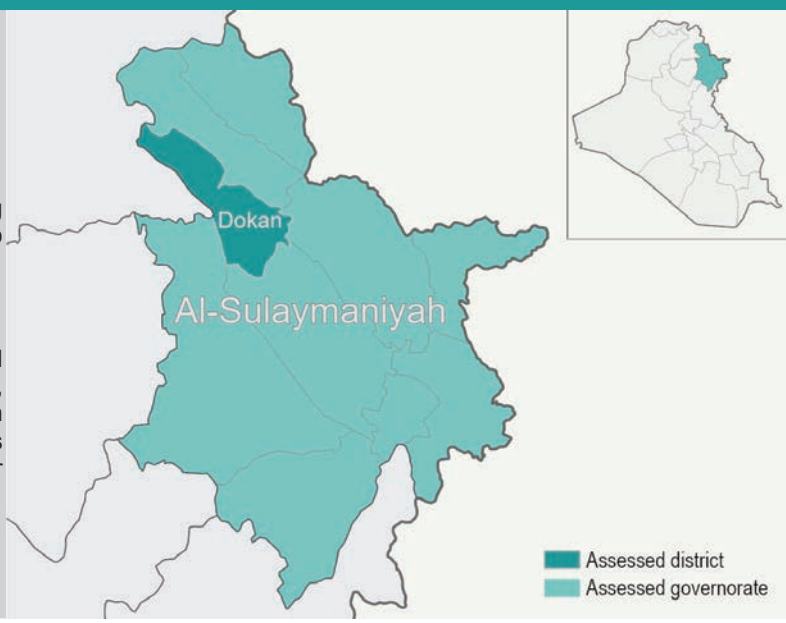
Sulaymaniyah GOVERNORATE
Dokan DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Dokan district 78 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 78 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	4,716
Total returnee population in district[4,5]	-
Average household size	6
% of female respondents	35
% of female-headed households	18

LIVELIHOODS

Average reported monthly income of households (IQD)	349,103
% of households earning an income through employment[6]	87%

32% of households reported their main source of income is through farming.

15% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are difficult to reach	18%
Don't like taste / quality of water	12%
Waterpoints are too far	8%

Among the 6% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	47%
It tastes unpleasant	16%
It smells unpleasant	3%

Of the 0% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE
Dokan DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	95%
Unimproved	4%
Open defecation[11]	1%

86% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

4% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	95%
Unsafe disposal methods	5%
Other	0%

99% 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	5%	95%
Human Faeces	1%	99%
Stagnant water	4%	96%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	77%
Limited	22%
No facility	1%

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.

93% of households reported female members in their household had access to mentrual hygiene materials.[15]

97% 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.

3% reported damage to their shelter due to the flooding.[17]

Among the **3%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Dokan district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

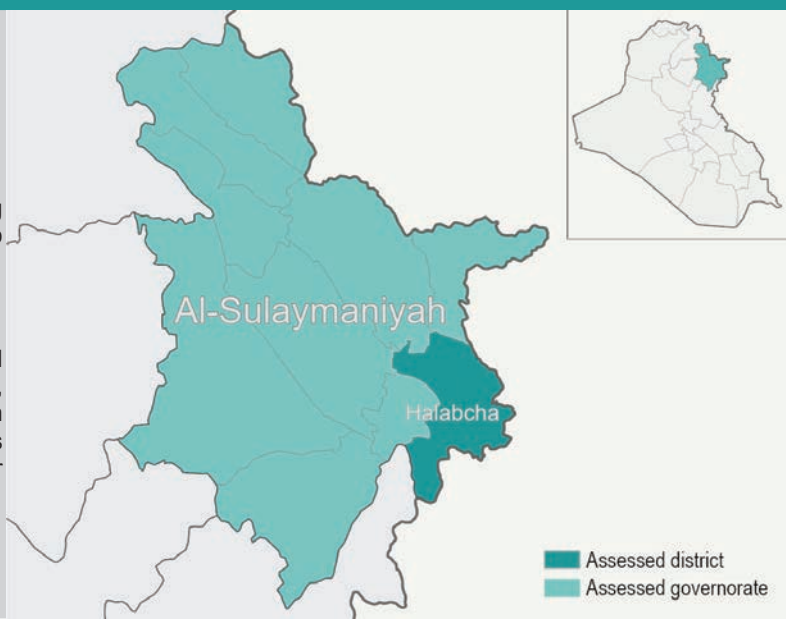
Sulaymaniyah GOVERNORATE Halabcha DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Halabcha district 103 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 103 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	3,714
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	31
% of female-headed households	20

LIVELIHOODS

Average reported monthly income of households (IQD)	315,534
% of households earning an income through employment[6]	83%

25% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 1% of households that reported facing problems related to water access, top three reasons:*,[9]

Not enough container to store the water	12%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 18% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	24%
It tastes unpleasant	15%
It smells unpleasant	12%

Of the 4% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Reduce drinking water consumption	12%
Reduce water consumption for other purposes	9%
Rely on less preferred drinking sources	8%

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

86% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE Halabcha DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	97%
Unimproved	1%
Open defecation[11]	2%

86% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

2% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% 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	99%
Unsafe disposal methods	1%
Other	0%

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

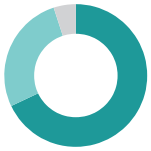
Proportion of households that reported the following was visible in vicinity of their accommodation in the 30 days prior to data collection:

	Yes	No
Solid Waste or Trash	1%	99%
Human Faeces	0%	100%
Stagnant water	2%	98%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	68%
Limited	27%
No facility	5%



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.

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

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

FLOODS

5% of households reported their area experienced flooding in the 12 months prior to data collection.

3% reported damage to their shelter due to the flooding.[17]

Among the **2%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Halabcha district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

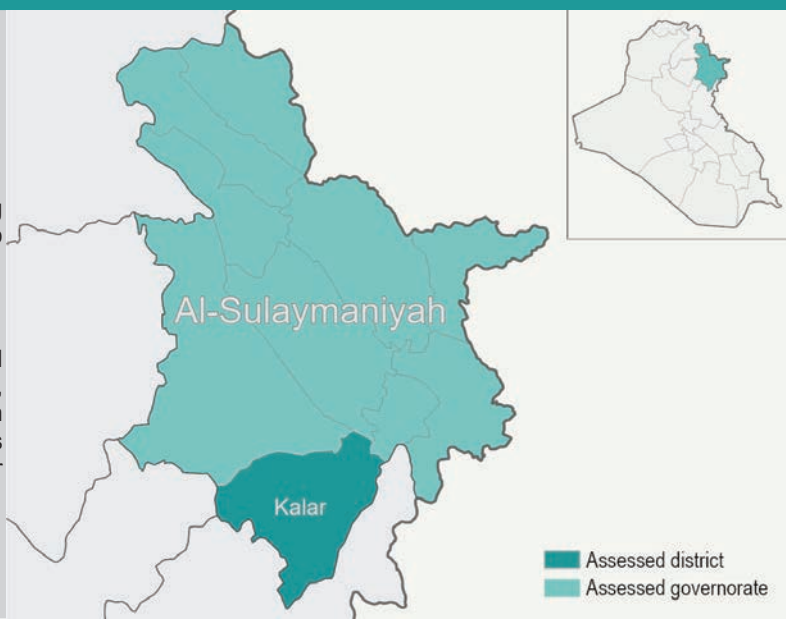
Sulaymaniyah GOVERNORATE Kalar DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Kalar district 115 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 115 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	14,268
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	37
% of female-headed households	14

LIVELIHOODS

Average reported monthly income of households (IQD)	534,078
% of households earning an income through employment[6]	76%

3% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 17% of households that reported facing problems related to water access, top three reasons:*[,9]

Don't like taste / quality of water	24%
Not enough container to store the water	10%
Waterpoints are too far	3%

Among the 40% of households that reported (sometimes) treating the water before drinking it, top three reasons:*[,9]

It is unsafe	45%
It smells unpleasant	31%
It tastes unpleasant	29%

Of the 19% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*[,9]

Rely on less preferred sources for other purposes	25%
Rely on less preferred drinking sources	16%
Rely on surface water for drinking water	15%

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

93% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE Kalar DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	90%
Unimproved	10%
Open defecation[11]	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.

7% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

96% 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	99%
Unsafe disposal methods	1%
Other	0%

71% 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	2%	98%
Stagnant water	9%	91%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	73%
Limited	19%
No facility	8%

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.

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

91% of households reported having access to sufficient hygiene materials.[16]

FLOODS

5% of households reported their area experienced flooding in the 12 months prior to data collection.

3% reported damage to their shelter due to the flooding.[17]

Among the **4%** that reported their daily activities were affected

Children could not get to school	25%
Mobility of adults affected	22%
Loss/damage to households' items	21%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Kalar district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

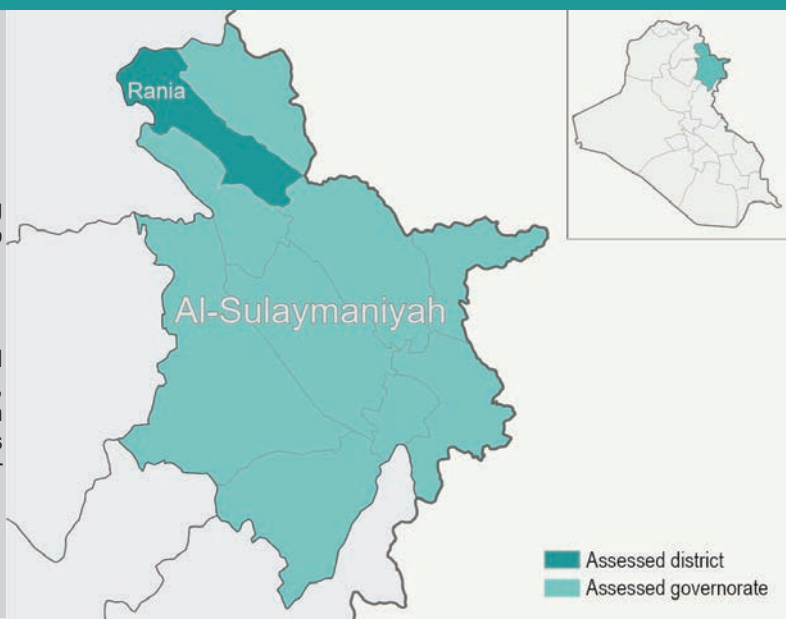
Sulaymaniyah GOVERNORATE
Rania DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Rania district 163 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 163 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	2,634
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	29
% of female-headed households	16

LIVELIHOODS

Average reported monthly income of households (IQD)	365,559
% of households earning an income through employment[6]	85%

17% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 3% of households that reported facing problems related to water access, top three reasons:*,[9]

Waterpoints are difficult to reach	22%
Water is too expensive	10%
Waterpoints are too far	3%

Among the 18% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is unsafe	36%
It tastes unpleasant	21%
It is turbid	13%

Of the 11% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred drinking sources	13%
Reduce water consumption for other purposes	11%
Spend money (or credit) on water	9%

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

74% 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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Sulaymaniyah GOVERNORATE
Rania DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	98%
Unimproved	0%
Open defecation[11]	2%

76% of households reported access to sanitation has been enough to satisfy their household's basic needs in the 30 days prior to data collection.

2% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

99% 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	98%
Unsafe disposal methods	2%
Other	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	1%	99%
Human Faeces	0%	100%
Stagnant water	1%	99%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	75%
Limited	23%
No facility	2%

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.

92% of households reported female members in their household had access to mentrual hygiene materials.[15]

88% 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.

2% reported damage to their shelter due to the flooding.[17]

Among the **2%** that reported their daily activities were affected

Mobility of adults affected	17%
Water services negatively afftected	17%
Loss/damage to households' items	17%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Rania district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

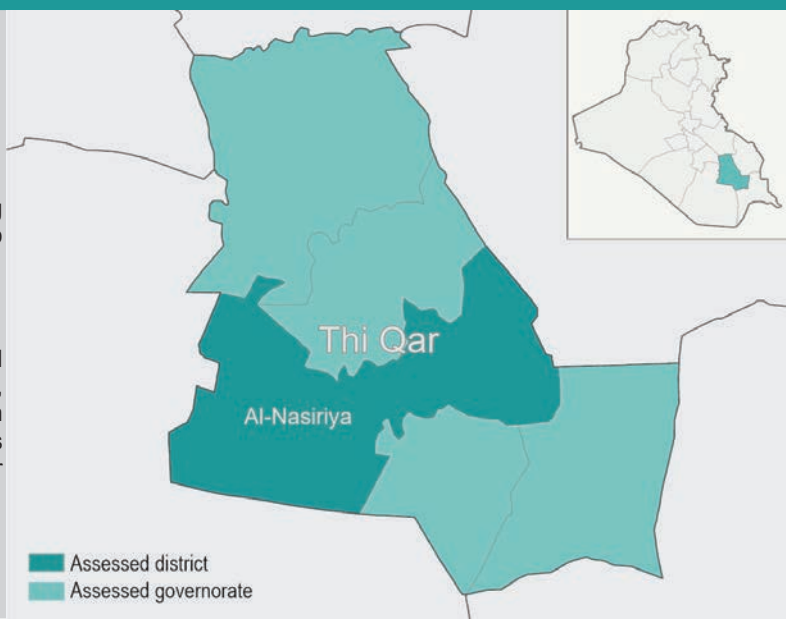
Thi Qar GOVERNORATE Al Nasiriya DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Nasiriya district 80 household surveys were conducted, in addition to 2 KIIs. Household interviews were conducted with 0 returnee, 80 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,980
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	3
% of female-headed households	3

LIVELIHOODS

Average reported monthly income of households (IQD)	662,700
% of households earning an income through employment[6]	96%

6% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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 13% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,9

It tastes unpleasant	55%
It is turbid	53%
It is unsafe	52%

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

Of the 0% of households that reported facing problems related to water access, top three reasons:*,9

Waterpoints are too far	3%
Waterpoints are difficult to reach	3%
Fetching water is a dangerous activity	3%

Of the 0% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,9

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Thi Qar GOVERNORATE Al Nasiriya DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.

39% of households reported engaging in a coping strategy to deal with a lack of access to sanitation facilities.[12]

100% 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	99%
Unsafe disposal methods	1%
Other	0%

94% 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	25%	75%
Human Faeces	0%	100%
Stagnant water	13%	88%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	99%
Limited	1%
No facility	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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **11%** of the Water Treatment Plants (WTPs) in Al Nasiriya district were non-functional or not functioning at full capacity.[19]

1 out of 2 KIs reported water in the area is not clean enough to drink, top reasons were:

- WTP is damaged due to the conflict and can't (fully) operate.
- WTP is lacking consumables (chlorine, aluminium sulfate)
- WTP lacks power (electricity, fuel) to operate at full capacity
- The intake water to the WTP is too dirty/salinated

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

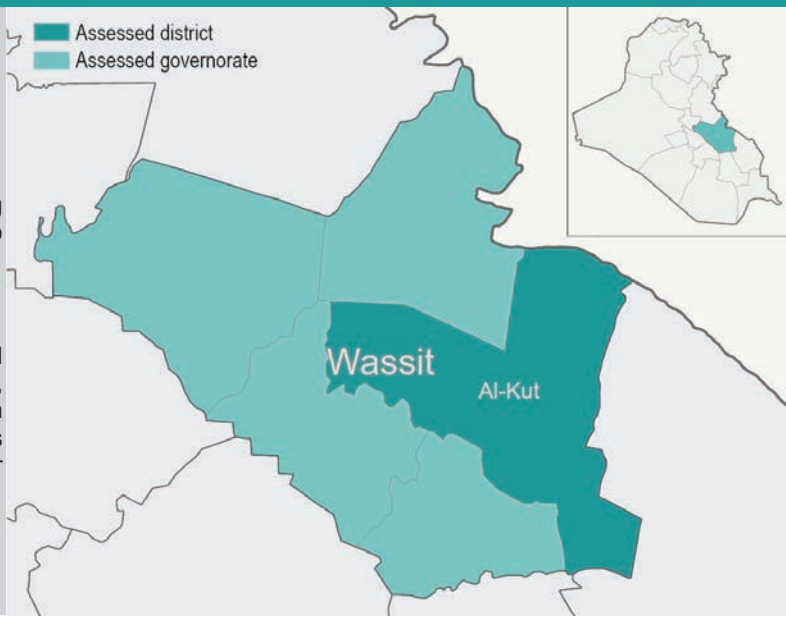
Wassit GOVERNORATE Al Kut DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Kut district 97 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 97 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	4,560
Total returnee population in district[4,5]	-
Average household size	5
% of female respondents	19
% of female-headed households	4

LIVELIHOODS

Average reported monthly income of households (IQD)	573,218
% of households earning an income through employment[6]	100%

0% of households reported their main source of income is through farming.

0% of households reported their main source of income is through keeping livestock.

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%

Of the 4% of households that reported facing problems related to water access, top three reasons:*,[9]

Don't like taste / quality of water	18%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 14% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	30%
It is unsafe	28%
It smells unpleasant	21%

Of the 1% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Wassit GOVERNORATE Al Kut DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

100% 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	88%
Unsafe disposal methods	12%
Other	0%

80% 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	9%	91%
Human Faeces	0%	100%
Stagnant water	19%	81%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	98%
Limited	1%
No facility	1%

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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Kut district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.

December 2019

OUT-OF-CAMP WASH NEEDS

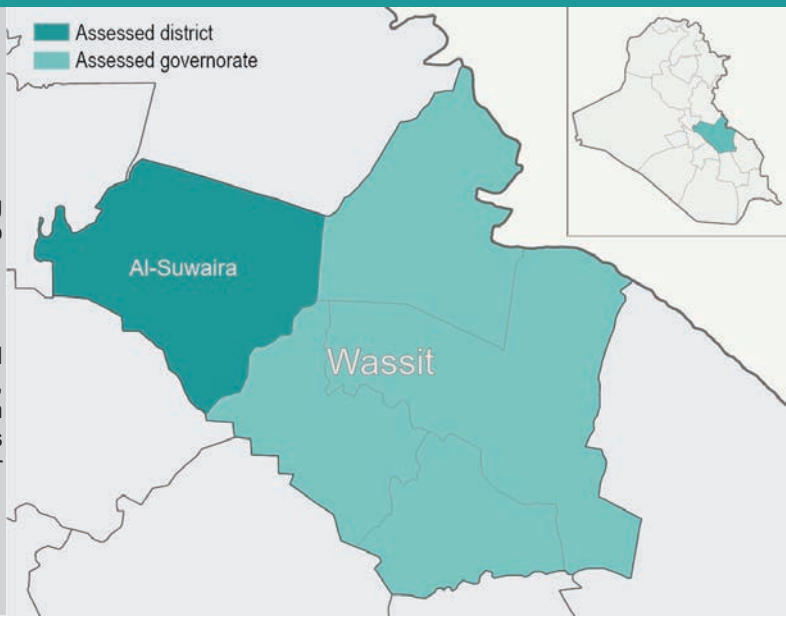
Wassit GOVERNORATE Al Suwaira DISTRICT

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 1.09 outside of camps.[1] IDPs are increasingly moving to non-camp locations or returning to their area of origin, especially bearing in mind ongoing camp closures.[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 57 accessible districts across Iraq with at least 200 returnee or IDP families according to IOM DTM data. Nationwide 9,069 household level surveys were conducted out-of-camp, as well as 211 key informant interviews (KIIs).[3] Data collection was carried out from 22 September to 31 December 2019. At a district level, household level findings are statistically representative with a 90% confidence level and 10% margin of error for each included population group.

In Al Suwaira district 95 household surveys were conducted, in addition to 0 KIIs. Household interviews were conducted with 0 returnee, 93 out-of-camp IDP, and 0 host community households.



DEMOGRAPHICS

Total out-of-camp IDP population in district[4,5]	1,314
Total returnee population in district[4,5]	324
Average household size	5
% of female respondents	8
% of female-headed households	0

LIVELIHOODS

Average reported monthly income of households (IQD)	554,959
% of households earning an income through employment[6]	100%

39% of households reported their main source of income is through farming.

2% of households reported their main source of income is through keeping livestock.

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%

Of the 1% of households that reported facing problems related to water access, top three reasons:*,[9]

Don't like taste / quality of water	6%
Waterpoints are too far	3%
Waterpoints are difficult to reach	3%

Among the 6% of households that reported (sometimes) treating the water before drinking it, top three reasons:*,[9]

It is turbid	52%
It smells unpleasant	47%
It tastes unpleasant	46%

Of the 1% of households that reported engaging in coping mechanisms for lack of access to water, top three mechanisms:*,[9]

Rely on less preferred sources for other purposes	3%
Fetch water at a source further than the usual one	3%
Send children to fetch water	3%

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., October 2019 [5] Number of individuals 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.

December 2019

OUT-OF-CAMP WASH NEEDS

Wassit GOVERNORATE Al Suwaira DISTRICT

SANITATION

Proportion of households reporting using an improved sanitation facility:[10]

Improved	100%
Unimproved	0%
Open defecation[11]	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.[12]

100% 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	94%
Unsafe disposal methods	6%
Other	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	2%	98%
Human Faeces	0%	100%
Stagnant water	5%	95%

HYGIENE

Proportion of households reported having basic, limited or no access to appropriate handwashing facilities:[14]

Basic	99%
Limited	0%
No facility	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 mentrual 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.

0% reported damage to their shelter due to the flooding.[17]

Among the **0%** that reported their daily activities were affected

NA	NA%
NA	NA%
NA	NA%

KEY INFORMANTS (KIs)

Findings are indicative only.

KIs estimated that **NA%** of the Water Treatment Plants (WTPs) in Al Suwaira district were non-functional or not functioning at full capacity.[19]

0 out of 0 KIs reported water in the area is not clean enough to drink, top reasons were:

- NA.

*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.