

Humanitarian overview: South East Mosul City

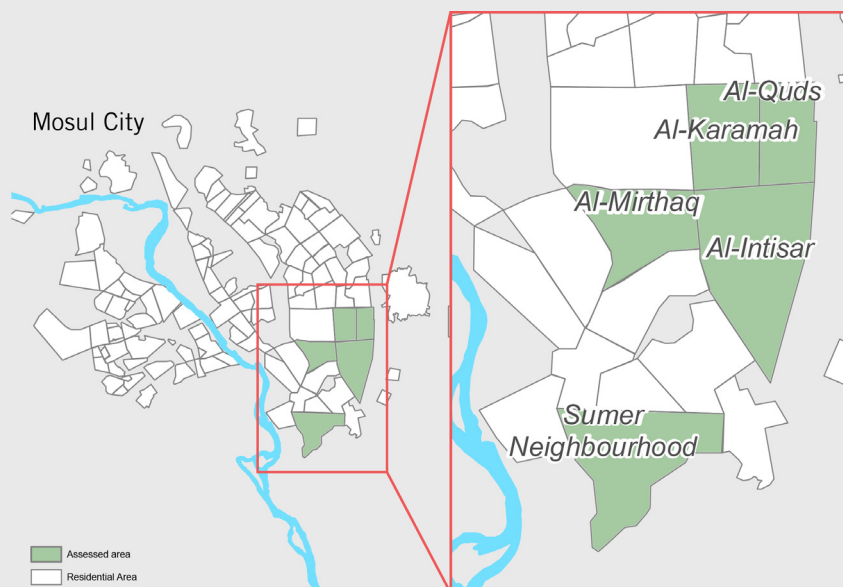
Iraq, 12 January 2017



Introduction

Total population of Mosul City:	1.3 to 1.5 mil ¹
Est. % of IDPs (of total pop.):	25%- 50% ²
Total population of South East Mosul:	Unknown
Date of armed group arrival:	June 2014
Humanitarian access:	Limited
Date of data collection:	2 - 12 January 2017

Map 1: Assessed Neighbourhoods in South East Mosul City



Overview

South East Mosul City has been under the control of armed groups (AGs) since June 2014, after which it became inaccessible to humanitarian aid. As of 16 October 2016, when military operations in Mosul City began,³ 147,990 individuals have been displaced.⁴ In particular, the intensification of military activity beginning on 29 December 2016 has caused the displacement of 15,942 individuals over a one-week period.⁵ While the exact number displaced persons from South East Mosul City is unknown, there are increasing reports of displacement from south-eastern neighbourhoods especially Al-Intisar.

According to interviewed Key Informants (KIs) who recently fled the area, between roughly 15-90% of the pre-crisis neighbourhood populations remain in the assessed neighbourhoods. The most reported reasons for individuals remaining in these neighbourhoods were an inability to displace, the risk of displacing, or to protect assets such as property.

Key findings

Summary of key findings and needs by sector:

Severity ranking below is based on indicators measuring the severity of each sector: 0= No severity to 4 = Extreme severity.

Sector	Severity	South East Mosul City
Healthcare	4	<ul style="list-style-type: none"> KIs indicated that no hospitals are open in the assessed neighbourhoods. A small health facility is reportedly available in Al Intisar neighbourhood providing primary healthcare.⁶ Some civilians travel from nearby neighbourhoods to Al Intisar however distance and security concerns limit movement.⁷ Access to basic and especially specialized medicine is reportedly very limited. KIs in Al-Quds and Al-Karamah, and Sumer neighbourhoods reported instances of death in the past month, due to lack of access to basic healthcare in their neighbourhoods.
Food Security	4	<ul style="list-style-type: none"> KIs reported that most neighbourhoods had access to a limited number of shops selling some fresh and dry food items. A severe lack of available cash reportedly hinders civilians ability to buy food especially as KIs reported higher food prices than normal. KIs, especially from Sumer neighbourhood, reported that a lack of food was a key push factor for displacement to IDP camps. The majority of families skip meals,⁸ eat smaller meals or rely on assistance from those who have cash. Further some rely on remaining food stocks however KIs reported that many have already or are close to finishing available food stocks.⁹
WASH	4	<ul style="list-style-type: none"> All neighbourhoods reported no access to grid water and instead get water from wells.¹⁰ However access to well water can be limited by electrical shortages and limited fuel to run generators to operate water pumps. The majority of KIs reported that the well water was dirty¹¹ resulting in cases of diarrhea especially amongst children. KIs reported few coping mechanisms other than families combining their resources to buy fuel in order to operate water pumps and in some cases civilians buying drinking water. KIs reported going several days without access to water instead relying on water stored in tanks and limiting water consumption.
Livelihoods	4 ¹¹	<ul style="list-style-type: none"> The majority of assessed individuals indicated that there are very limited to no livelihood opportunities available in their neighbourhoods, resulting in a severe shortage of liquid currency. The primary source of income was government pensions Assessed individuals reported that those with the available cash share with family and neighbours.
Education	4	<ul style="list-style-type: none"> No children attend school across the assessed neighbourhoods due to insecurity, lack of teachers, and lack of infrastructure.
Shelter	4	<ul style="list-style-type: none"> Damaged to housing was reported across all assessed neighbourhoods with estimates of 10-40% of structures damaged. Overcrowding of up to 5 families sharing one accommodation was reported. However generally overcrowding was not due to a lack of housing but rather due to safety concerns or in order for families to combine their limited resources to facilitate meeting their basic needs.¹²

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Methodology

REACH collected in-depth information from 21 recently displaced KIs from South Eastern Neighbourhoods of Mosul City, and 3 NGO staff. Data was collected through Community Group Discussions (CGDs) and KI interviews between 2 and 3 January with additional top up information gathered on 12 January for Al-Mirthaq, Al-Intisar

and Sumer neighbourhoods. Most KIs had up to date information on the situation in Mosul City as they remained in contact with friends and relatives who remained in their neighbourhoods of origin. Due to inherent limitations, presented findings should be understood as indicative only.

Intentions

The majority of KIs quoted increased conflict as a key driver for displacement from South East Mosul. Information gathered from KIs about remaining populations in their neighbourhoods provides varied information on intentions; across the five neighbourhoods, percentages of those who remained ranged from 15% to as high as 90%¹³ - depending on the exposure to conflict and access to

displacement routes. It was noted that families usually displaced as a unit and that protecting assets and property was seen as the main reason for remaining. Given a severe lack of cash, especially limiting access to food, compounded by security concerns individuals who previously chose to remain may be pushed to displace to IDP camps in order to meet their basic needs.

Displacement

IDPs reported leaving their areas of origin in several distinct family or community groups - primarily based on the nature of the conflict in their neighbourhoods. Those in Al-Intisar reported leaving in larger, organized groups, after being instructed to do so by Iraqi forces. However, those in remaining neighbourhoods tended to leave in smaller groups, and the timing of their movement and routes chosen were primarily determined by what they believed to be the safest. In all cases IDPs continue to displace on foot as civilians cannot use cars to travel between neighbourhoods as instructed by Iraqi forces. Once reaching Kurdish or Iraqi forces, IDPs often receive food and water and are transported by bus or truck to screening centres.

Due to the rapid nature of their displacement, and the distances necessary to travel on foot, most assessed IDPs reported bringing few belongings with them. Some assessed individuals reported

bringing cash, though due to the general lack of liquidity in their areas of origin, the amounts carried were small - ranging from 20,000 - 50,000 IQD (26-58 USD).¹⁴ The majority of IDPs were able to travel with identification documents, though children younger than 2-3 years were without official government issued ID - however this was not reported to cause any delays. Adults without identification were required by authorities to have another individual vouch for them. Those without ID were reportedly subjected to longer waiting times during screening. In general, IDPs indicated that waiting times at screening sites ranged from several hours to 2 days. Those who did spend the night at the screening site reportedly slept in the open, or in unfinished buildings. Once being cleared by the authorities, all assessed individuals were transported to IDP camps by government forces.

Footnotes:

¹ REACH, *Humanitarian Overview: Mosul*, Oct. 2016

² Idib

³ OCHA, *Mosul Humanitarian Response: Situation Report No. 14*, 26 December 2016- 1 January 2017

⁴ Based on: IOM, DMT ET, 3 January 2017

⁵ Idib

⁶ From Al-Intisar neighbourhood KIs reported that some cases had been transferred out of Mosul to be treated. In addition, KIs reported that an individual with limited medical training was providing basic health services in return for cash payments in Al-Quds neighbourhood.

⁷ KIs from Sumer neighbourhoods reported that few civilians travel to Al-Intisar to access healthcare due to security concerns and the distance.

⁸ KIs reported that civilians eat between 1-2 meals a day and that some parents are skipping meals so that their children have enough to eat.

⁹ The vast majority of IDP KIs reported that their family and relatives, who are still living in the assessed neighbourhoods, had not received any assistance. However according to NGO KIs Al-Mirthaq, Al-Quds and Al-Karama received food and hygiene assistance between 3 and 11 January. Al-Intisar and Sumer neighbourhoods are also believed to have received similar assistance however this was not confirmed during the assessment.

¹⁰ Al-Karamah reported 4 months and Al-Intisar neighbourhood 2 months without grid water.

¹¹ One exception is Al-Mirthaq neighbourhood where a water treatment facility is reportedly operational.

¹² Across the Community Group Discussions (CGDs), the range of families sharing one accommodation was between 3 and 5, with 5 being the maximum reported.

¹³ 15% reported in Al-Intisar and 90% in Al-Mirthaq.

¹⁴ Based on conversion rates of 1USD= 1,182 IQD (as of 03/01/2017).

Map 2: Displacement routes from South East Mosul City, January 2017

