

IRAQ

# Multi-Cluster Needs Assessment

December 2017



Cover image: West Mosul, November 2017. © IMPACT Initiatives, 2017

### About REACH

REACH is a joint initiative of two international non-governmental organizations - ACTED and IMPACT Initiatives - and the UN Operational Satellite Applications Programme (UNOSAT). REACH aims to strengthen evidence-based decision making by aid actors through efficient data collection, management and analysis before, during and after an emergency. By doing so, REACH contributes to ensuring that communities affected by emergencies receive the support they need. All REACH activities are conducted in support to and within the framework of inter-agency aid coordination mechanisms. For more information please visit our website: [www.reach-initiative.org](http://www.reach-initiative.org). You can contact us directly at: [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) and follow us on Twitter @REACH\_info.

## SUMMARY

2017 marked the third year of the latest internal displacement crisis in Iraq, which was triggered by the 2014 invasion and subsequent seizure of large swathes of the country's territory by the so-called Islamic State of Iraq and the Levant (ISIL). Following similar operations in other areas of the country in 2015, Iraqi Security Forces (ISF) launched a large-scale military campaign in October 2016 to retake the city of Mosul from ISIL, where over one million civilians were residing under the group's control.<sup>1</sup> Mosul was declared as retaken in July 2017, after which other ISIL strongholds – namely Telafar, Hawiga and Ka'im – fell. These events have dramatically altered the humanitarian context in Iraq, broadening efforts to assist not only displaced households, but also those households returning to their areas of origin, those previously living under ISIL control who have now become accessible to humanitarian actors, and those living in communities hosting high proportions of internally displaced persons (IDPs).

As of November 2017, the International Organization for Migration (IOM) Displacement Tracking Matrix (DTM) reported nearly 2.9 million IDPs and close to 2.8 million returnees across Iraq.<sup>2</sup> In addition, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) reported that 11 million people are in need of humanitarian assistance as of September 2017.<sup>3,4</sup> Given the shifting context and emergence of new conflict-affected population groups, humanitarian planning and programming have been constrained by lack of data regarding the prevalence of multi-sectoral needs amongst these groups and how their needs compare with one another. In particular, a comprehensive and coordinated needs assessment to inform the 2018 Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) in Iraq, and in turn meet a core commitment of the Grand Bargain, was lacking.<sup>5</sup>

To address these information gaps, in August 2017 the Iraq Assessment Working Group (AWG), with facilitation by REACH, conducted a Multi-Cluster Needs Assessment (MCNA), designed to align with the tentative 2018 HNO/HRP timeline. The MCNA objectives and methodology were developed with the Assessment Working Group (AWG) and endorsed by the Inter-Cluster Coordination Group (ICCG) in Iraq in July 2017. AWG partners provided feedback and guidance on methodology, indicators and analysis, in addition to conducting data collection in their specific areas of access. Consultation with all clusters and incorporation of cluster-specific feedback into the design of the assessment indicators and tools took place in July 2017. REACH conducted a series of cluster-specific preliminary findings presentations in September 2017, culminating in a final presentation and joint analysis workshop in October 2017. Through these presentations and the consolidated datasets that were shared, humanitarian actors in Iraq were able to use MCNA data and findings to inform their HNO/HRP planning.

The primary objective of the assessment was to inform evidence-based, multi-sectoral humanitarian programming across the whole of Iraq. The assessment included all conflict-affected population groups, in order to best align with the shifting context in the country and the new conflict-affected population groups identified for the 2018 HNO. Therefore, a specific objective of the assessment was to identify the multi-sectoral needs of the following population groups:<sup>6</sup>

- Out-of-camp IDPs in accessible areas
- In-camp IDPs
- Returnees in accessible and hard-to-reach areas<sup>7</sup>
- Non-displaced in newly retaken and conflict areas<sup>8</sup>

<sup>1</sup> Paul Torpey, Pablo Gutierrez, and Paul Scruton, "[The Battle for Mosul in Maps](#)," *The Guardian*, 26 June 2017, accessed 7 December 2017.

<sup>2</sup> [IOM DTM](#), accessed 6 December 2017.

<sup>3</sup> The humanitarian response in Iraq is coordinated by OCHA through the cluster system. A range of international and national non-governmental organisations (NGOs) work through the clusters and with local government actors to provide humanitarian assistance and services.

<sup>4</sup> OCHA, [Iraq - Key Figures](#), accessed 6 December 2017.

<sup>5</sup> The [Grand Bargain](#) is an agreement between over 30 international aid providers and donors "to get more means into the hands of people in need," and was endorsed in May 2016 at the World Humanitarian Summit in Istanbul, Turkey. Core commitment 5 is to improve joint and impartial needs assessments.

<sup>6</sup> Inclusion of these groups and how they are defined is based on the OCHA 2018 humanitarian profile for Iraq.

<sup>7</sup> Formally IDPs, but who have now returned from displacement to their areas of origin.

<sup>8</sup> "Non-displaced" here refers to those who did not displace from the following districts in recently retaken and conflict areas as defined by OCHA/HNO at the time of data collection: Ana, Ba'aj, Haditha, Hawiga, Ka'im, Mosul, Shirqat and Telafar. For the purpose of brevity, this population group will be referred to as "non-displaced" throughout the remainder of the report. Due to operational and access constraints, the districts of Ana and Ka'im were not possible to assess at the time of data collection.

- Vulnerable host communities<sup>9</sup>

The assessment was nationwide in scope, employing a mixed methods approach that combined secondary data with primary data collection in the form of key informant (KI) interviews in hard-to-reach areas and a structured household survey in fully accessible areas.<sup>10</sup> In total 1,571 household surveys and 262 KI interviews were conducted during primary data collection, in addition to 12,613 household surveys available from secondary data.

Table 1: Data collection methods, by population group

Population group	Data collection date	Data collected at	Household surveys conducted in accessible areas	Precision of findings	KI interviews conducted for communities in hard-to-reach areas	Dataset
<i>In-camp IDP</i>	May 2017	Camp level	6,422	95% confidence level 10% margin of error	n/a	REACH
<i>Out-of-camp IDP</i>	March-May 2017	District level	6,191	90% confidence level 10% margin of error	n/a	REACH
<i>Host community</i>	August 2017	National level	654	95% confidence level 5% margin of error	n/a	MCNA
<i>Returnee</i>	August 2017	District level	917	90% confidence level 10% margin of error	172	MCNA
<i>Non-displaced</i>	August 2017	District level	n/a	n/a	90	MCNA

Primary data collection

The assessment encompassed both cross-sectoral indicators related to priority needs, assistance received during the course of the crisis and movement intentions, in addition to sector-specific indicators regarding shelter and non-food items (NFIs), water, sanitation and hygiene (WASH), health, food security, livelihoods and social cohesion, and education.

Key partners implementing the MCNA with REACH included the Office for US Foreign Disaster Assistance (OFDA) as funder for the project and OCHA in its capacity as AWG co-chair. REACH also partnered with ACAPS to produce a secondary data review, and with the following organisations to complete primary data collection:

- Canadian Aid Organization for International Society Rehab (CAOFISR)
- Mercy Hands for Humanitarian Aid
- Representative of Ninewa Voluntary for IDP (RNVDO)
- World Food Programme (WFP) Iraq

As findings from communities assessed in hard-to-reach areas are based on KI interviews, they are not generalisable with a quantifiable level of precision and should be considered indicative only. In addition, because data collection for in-camp and out-of-camp IDP households in accessible areas occurred several months prior to data collection for returnee and host community households, direct comparisons between population groups are limited. Finally, certain indicators may be under-reported or over-reported, due to the subjectivity and perceptions of respondents.

<sup>9</sup> Defined as communities in which IDPs comprise 10% or more of the total population.

<sup>10</sup> KI interviews in hard-to-reach areas were conducted for returnee and non-displaced population groups. Household interviews in accessible areas were conducted for returnee, host community, in-camp IDP, and out-of-camp IDP population groups. Returnees were included in both types of data collection due to their presence in both hard-to-reach and in accessible areas at the time of data collection.

## Overall findings

*Key findings from both the households assessed in accessible areas and the communities assessed in hard-to-reach areas are presented below:*

- Findings from the assessment reveal that the priority needs of all population groups, both in accessible and in hard-to-reach areas, remain centred on improved access to basic necessities such as food and healthcare services. Food was consistently identified as a priority need across all population groups in accessible areas, along with medical care and employment opportunities. In hard-to-reach areas, returnee KIs reported the need for food and employment across all districts assessed. For non-displaced populations, access to vocational training, clothing and winterisation equipment were needs reported by all KIs. Other needs raised included access to water, medical care, food and employment.
- Findings point to a need to strengthen and expand public services to support non-displaced populations in newly retaken and conflict areas, many of whom face difficulties in meeting their basic food needs. Lesser access to food assistance, coupled with lesser access to markets, highlights the comparative vulnerability of non-displaced populations with respect to food security.
- In addition to meeting basic needs, the cessation of major conflict also signals a need for aid actors to shift towards stabilisation and recovery. As returns increase in 2018, conflict-affected populations will be looking to revive income generation and livelihood activities, and findings confirm that greater access to sustained livelihoods sources is a key need. In areas where agriculture is the predominant source of employment, particular attention could be paid to the impact of land contamination and other effects of the conflict that hamper the capacity for agricultural work.
- The last few years of conflict have impacted the state of critical infrastructure, especially in hard-to-reach areas. In particular, non-displaced populations in recently retaken and conflict areas have potentially seen greater damage to water infrastructure.
- The impact of the conflict can also be seen in the health and education sectors, as evidenced by the reported lack of medicines available at hospitals and inability to afford medicines from pharmacies. Similarly, with respect to education, the poor physical condition of schools was a commonly reported barrier to accessing education for non-displaced and returnee populations in hard-to-reach areas.
- The majority of both returnee and host community households in accessible areas reported that they had not received humanitarian assistance since the onset of the crisis – 88% and 76%, respectively. Of the 12% of returnee and 24% host community households who reported that they had received assistance, this was primarily in the form of cash (15% of returnee households) or food (12% of host community and 9% of returnee households).
- Lastly, assessment findings highlight the need to continue supporting displaced populations with humanitarian assistance even as shifts towards stabilisation and recovery are ongoing. In particular, IDPs living out of camps are in need of shelter assistance, as a significant proportion (22%) reported residing in critical shelter types. Moreover, continued displacement in the short term is anticipated, given that nearly three-quarters of IDP households reported no intentions to move in the three months following data collection. To inform the needs of those in protracted displacement, this assessment also identified a need for further research and more frequent monitoring of intentions to better inform assistance to IDPs.

## Key sectoral findings

*Sector-specific findings from both households assessed in accessible areas and communities assessed in hard-to-reach areas are presented below:*

### Shelter

#### Settlement types

- The majority of households in accessible areas resided in residential housing, as reported by 95% of host community, 75% of returnee, and 64% of out-of-camp IDP households. However, around one-quarter of both returnee and out-of-camp IDP households lived in collective centres, and 8% of out-of-camp IDP households lived in informal sites, indicating a greater vulnerability with respect to settlement conditions amongst these population groups.
- In hard-to-reach areas, residential accommodation was reportedly the main settlement type for non-displaced populations assessed in Shirqat district (Salah al Din), as well as for returnees assessed in Falluja (Anbar), Abu Ghraib (Baghdad), Kirkuk (Kirkuk), Hamdaniya (Ninewa), Sinjar (Ninewa), Telafar (Ninewa), Tilkaif (Ninewa), Baiji, and Samarra districts (Salah al Din). While reports of other settlement types varied across hard-to-reach districts where non-displaced and returnees were assessed, only in Heet district (Anbar) were transit sites identified as one of the settlement types in use by returnees. Collective centres were reportedly in use by returnees assessed in Haditha (Anbar), Heet (Anbar), Mosul (Ninewa), Daur and Tikrit (Salah al Din), while informal sites were a main settlement type for returnees assessed in Haditha (Anbar), Heet (Anbar), Balad, Daur, Shirqat, Tikrit and in Tooz (Salah al Din).

#### Shelter types

- All returnee households and 97% of host community households in accessible areas reported living in houses, whereas only 66% of out-of-camp IDP households indicated so. The remaining one-third of out-of-camp IDP households lived in apartments (12%), unfinished buildings (9%), religious buildings (6%), or other shelter types (7%) which include public buildings more generally, abandoned buildings, containers or tents.
- In hard-to-reach areas, houses were the main shelter type reported for both non-displaced and returnee populations, across the majority of assessed districts. Tents were also reported by KIs in Mosul and Telafar (Ninewa) for non-displaced. For returnees, shelter in unfinished buildings was reported in Haditha and Heet (Anbar), while shelter in damaged buildings was also reported in Heet and Falluja (Anbar).

#### Shelter occupancy

- The majority of returnee and host community households in accessible areas reported residing in shelters that they owned, as reported by 92% of returnee and 75% of host community households. In contrast to returnee and host community households, out-of-camp IDPs were primarily living in rented accommodation (69%) or were squatting (29%).
- In hard-to-reach areas, the proportion of the non-displaced population estimated to be under threat of eviction varied across the assessed newly retaken and conflict districts. With regard to returnees in hard-to-reach areas, KIs estimated that less than 25% of the returnee population in their communities was at risk of eviction in all districts except Falluja (Anbar), Haditha (Anbar), Heet (Anbar), Kirkuk (Kirkuk), Hamdaniya (Ninewa), Sinjar (Ninewa), Samarra, Shirqat and Tooz (Salah al Din), where responses varied.

#### Perceived shelter adequacy

- Across all population groups, the majority of households in accessible areas perceived the shelter they were inhabiting to be of an adequate level of quality. This was reported by 98% of host community, 94% of returnee and 78% of out-of-camp IDP households.<sup>11</sup>
- In hard-to-reach areas, perceptions of shelter adequacy varied across districts and between non-displaced and returnee population groups. In Falluja (Anbar) and Abu Ghraib (Baghdad), and in the majority of

<sup>11</sup> This indicator was not included in the Camp Profiling assessment. Therefore, data regarding adequacy of shelters amongst in-camp IDP households is unavailable.

districts in Salah al Din where returnees were assessed, the proportion of the returnee population estimated not to have access to adequate shelter varied, with some KIs reporting as high as 75% not having access to adequate shelter (Baiji, Balad, Daur, Shirqat). In all assessed districts in Ninewa, up to half of the returnee population was estimated not to have access to adequate shelter. This was also reported for returnees assessed in Haditha and Heet (Anbar), Samarra (Salah al Din) and Tooz (Salah al Din), as well as for non-displaced assessed in Haditha (Anbar), Baaj (Ninewa) and Shirqat (Salah al Din).

## WASH

### Sources of drinking and general purpose water

- For all population groups in accessible areas other than in-camp IDPs, the primary source of drinking water was an internal private network, as indicated by 79% of host community, 60% of returnee and 59% of out-of-camp IDP households. The majority (53%) of in-camp IDP households used an external communal water network, and around one-fifth used an internal private network.
- One-third of returnee households reportedly used bottled water purchased from shops as a primary source of drinking water, reflecting a lack of access to potable water sources inside the home amongst a significant portion of this population group. This was also the case for 16% of out-of-camp IDP households and 15% of host community households.
- With respect to all-purpose water usage such as for cooking, washing and bathing, the majority of households in accessible areas used private water networks – again with the exception of in-camp IDP households. Ninety percent (90%) of both host community and returnee households used a private network, as well as 72% of out-of-camp IDP households and 25% of in-camp IDP households.
- Across all hard-to-reach districts where non-displaced populations were assessed, KIs reported reliance on a variety of primary drinking water sources, with the exception of Baaj (Ninewa) and Shirqat (Salah al Din) districts, where all non-displaced populations assessed relied primarily on water trucking and communal networks respectively. All returnee populations assessed in Kirkuk (Kirkuk) relied mainly on dug wells while those in Haditha (Anbar) mainly relied on communal networks. In the remaining hard-to-reach districts where returnees were assessed, a variety of primary drinking water and general-purpose water sources were reported.

### Water availability and shortages

- A significant proportion of host community and returnee households in accessible areas reported experiencing water shortages lasting 24 hours or more in the 30 days preceding data collection – 18% and 11%, respectively. Amongst displaced groups, 7% of out-of-camp IDP households and 5% of in-camp IDP households experienced water shortages in the month preceding data collection.
- Reports of water shortages varied for both non-displaced and returnee populations in hard-to-reach areas, reflecting a lack of sufficient water infrastructure and service provision. In Hawiga district however, less than 25% of the non-displaced population assessed had reportedly experienced water shortages of 24 hours and more in the month preceding data collection. The same was reported for the returnee population assessed in Haditha (Anbar), Kirkuk (Kirkuk), Mosul (Ninewa), Telafar (Ninewa) and Tikrit (Salah al Din).

### Access to latrines

- A large majority of host community, returnee and out-of-camp IDP households in accessible areas had access to private latrines: 99%, 92% and 82%, respectively. IDP households living in camps most commonly use communal or public latrines, due to the design of WASH infrastructure within most camps. This is reflected in the 44% of households in camps using public latrines and 31% using communal latrines.
- Of those in-camp IDP households using either public or communal latrines (75%), only 25% reported that the latrines had functioning lighting, while 86% reported that the latrines were gender-segregated. Of the out-of-camp and returnee households that reported using either communal or public latrines (18% and 8%, respectively), only 25% and 1%, respectively, reported the latrines to be gender-segregated.
- In hard-to-reach areas, all non-displaced populations assessed in Haditha (Anbar), Hawiga (Kirkuk), Baaj (Ninewa) and Shirqat (Salah al Din) were reported to primarily use private latrines, whilst in Mosul and

Telafar (Ninewa) both private and communal latrines were used. Similarly, in all hard-to-reach districts where returnees were assessed, all assessed returnee populations mainly used private latrines, with the exception of Hamdaniya (Ninewa), Mosul (Ninewa), Sinjar (Ninewa), Telafar (Ninewa) and Shirqat (Salah al Din) where various latrine types were reportedly used.

#### Solid waste management

- Across all population groups in accessible areas except for returnees, households most frequently used garbage collection services to dispose of solid waste, as indicated by 83% of host community, 77% of out-of-camp IDPs and 62% of in-camp IDP households. Waste disposal methods amongst returnee households were roughly equally split between using collection services (34%), disposing of garbage in communal bins (32%) and burning garbage (28%). No data was collected on garbage disposal methods for population groups assessed in hard-to-reach areas.

## Health

### Healthcare needs

- Amongst assessed population groups in accessible areas, out-of-camp IDP households were most frequently affected by health events,<sup>12</sup> as one-quarter reported one or more members of their households had experienced at least one health event in the two weeks preceding data collection. This was followed to a lesser extent by returnee households and host community households (13% respectively).
- Around two-thirds of returnee households that reported one or more members experiencing a health event in the two weeks preceding data collection had cases of diarrhoea (37%) or minor injuries (32%). Respiratory issues were most common in out-of-camp IDP households (43%), followed by host community households (31%). Extreme stress reactions were also common across all population groups, as reported by 44% of host community, 35% of out-of-camp IDP and 30% of returnee households that had at least one member experiencing a health event in the two weeks preceding data collection.
- Reported child vaccination rates were high across all population groups in accessible areas. Of households with children, nearly all out-of-camp IDP, returnee and host community households reported that at least one child in the household had received measles and polio vaccinations. Amongst in-camp IDP households with children, 86% reported at least one child had been vaccinated for measles.
- In hard-to-reach areas, there were reports of households experiencing health events in the two weeks preceding data collection in all returnee populations assessed in Kirkuk (Kirkuk). Skin issues were reportedly present in all assessed returnee populations in Kirkuk. In all other hard-to-reach districts where returnees and non-displaced were assessed, reported incidence and type of health events varied.

### Access to healthcare services

- Public healthcare services were the most frequently cited source of healthcare across all population groups in accessible areas – as indicated by 100% of returnee, 94% of host community and 90% of out-of-camp IDP households. Unique to out-of-camp IDP households, 11% reported using services provided by either the United Nations (UN) or non-governmental organisations (NGOs).
- In hard-to-reach areas, all non-displaced populations assessed in Shirqat district (Salah al Din) were reported to primarily rely on public healthcare services. In all other districts where non-displaced populations were assessed, a variety of healthcare providers were reportedly used. With regard to returnees assessed in hard-to-reach areas, residents reportedly primarily relied on public healthcare services in the majority of assessed districts, while in Kirkuk district (Kirkuk) all assessed returnee populations reportedly relied on private healthcare services.<sup>13</sup>

<sup>12</sup> Respondents were asked if one or more members of their household had suffered from any health events within the two weeks preceding the interview. Health events were defined as the following: child birth, diarrhoea, symptoms of hypertension, symptoms of malnutrition, minor injury, respiratory issues, serious injury, skin disease, extreme stress reaction, asthma, or other events.

<sup>13</sup> Hard-to-reach districts where public healthcare was reported to be the primary healthcare provider for assessed returnee populations: Falluja, Haditha, Heet, Abu Ghraib, Mosul, Telafar, Baiji, Balad, Daur, Shirqat and Tooz.

### Barriers to accessing healthcare

- Of households in accessible areas that reported needing and seeking healthcare in the two weeks preceding data collection, a slight majority of IDP households both in and out of camps reported facing barriers to accessing care (55% and 51%, respectively). Nearly one-half of host community and returnee households that needed and sought care also reported facing barriers (49% and 46%, respectively).
- Of households that reported facing barriers to accessing care, the cost of services and medicines was most frequently cited for the majority of households, reported by 96% of returnee and 80% of host community households. Both in and out-of-camp IDP households also frequently reported the inability to afford the cost of healthcare: 61% and 77% respectively. The inability to afford medicines was the second most reported barrier to healthcare (57% of out-of-camp and 40% of in-camp IDP households). Finally, the lack of medicines available in hospitals was also a common barrier, reported by 28% and 32% of out-of-camp and in-camp IDP households respectively.
- In hard-to-reach areas, over 75% of the non-displaced population assessed in Hawiga (Kirkuk) had reportedly faced barriers accessing healthcare. This was also reported for returnees assessed in Kirkuk district (Kirkuk). In all other hard-to-reach districts where non-displaced and returnee populations were assessed, responses varied. In terms of barriers to accessing healthcare, the inability to afford the cost of healthcare and medicines, and the lack of medicines in hospitals or pharmacies were reported in all districts where non-displaced were assessed. The inability to afford the cost of healthcare and/or medicines was also reported to be a barrier to accessing healthcare in all hard-to-reach districts where returnees were assessed.

## Food security

### Access to food

- Nearly all host community and returnee households in accessible areas were found to have an acceptable food consumption score.<sup>14</sup> The majority of IDP households were also found to have an acceptable score (95% of out-of-camp and 87% of in-camp IDP households respectively). Furthermore, at the national level, 96% of households in accessible areas reported eating three meals per day, on average, with minimal variation between population groups. Overall, these findings indicate that most households in accessible areas across Iraq have adequate access to food.
- Across all population groups in accessible areas, purchasing food with cash was the most frequently used food source in the seven days preceding data collection, as indicated by 87% of host community, 82% of returnee and 63% of out-of-camp IDP households. The second most frequently used source of food was purchasing on credit, which was highest amongst out-of-camp IDP households (29%), followed by 17% of returnee and 12% of host community households.
- In newly retaken and conflict areas, more than half of the non-displaced population assessed in Hawiga (Kirkuk) reportedly did not have sufficient access to food in the seven days preceding data collection. Findings in other newly retaken and conflict districts where non-displaced were assessed varied, with KIs in Mosul (Ninewa) and Shirqat (Salah al Din) reporting that the majority of the non-displaced population had sufficient access to food in the seven days preceding data collection. For returnees assessed in hard-to-reach areas, access to food was a particular concern in Kirkuk (Kirkuk), where over 75% of the returnee population reportedly did not have sufficient access to food in the seven days preceding data collection. Findings in other hard-to-reach districts where returnees were assessed varied, with the majority of the returnee population assessed in Falluja (Anbar), Heet (Anbar), Hamdaniya (Ninewa), Tilkaif (Ninewa) and Samarra (Salah al Din) reported to have had sufficient access to food in the seven days preceding data collection.

<sup>14</sup> The food consumption score was calculated using WFP's Consolidated Approach to Reporting Indicators of Food Security (CARI), and measures households' current status of food consumption based on the number of days per week a household is able to eat items from nine standard food groups weighted for their nutritional value.

### Access to markets

- Nationwide, the vast majority of households in accessible areas (94%) reported living within walking distance of a market, with minimal variation across population groups. This finding indicates that distance itself is not a barrier to obtaining food for those living in accessible areas.
- In hard-to-reach areas, all assessed non-displaced populations in Haditha (Anbar) and Mosul (Ninewa) were reported to have access to a functional market within walking distance. Meanwhile, none of the assessed non-displaced populations in Hawiqa (Kirkuk) and Baaj (Ninewa) were reported to have access to a functional market nearby. In the majority of hard-to-reach districts where returnees were assessed, all assessed returnee populations were reported to have a functional market within walking distance. At the opposite end of the spectrum, none of the assessed returnee populations in Kirkuk district (Kirkuk) were reported to have access to a functional market nearby, while returnee populations in the districts of Shirqat and Samarra (Salah al Din) had varying degrees of access.

### Food Assistance

- In accessible areas, 68% of in-camp IDP households and one-third of out-of-camp IDP households reported having received Public Distribution System (PDS) assistance within the same month as data collection, in contrast with returnee and host community households, where only 16% and 19% respectively had reportedly received assistance within the same month as data collection.<sup>15</sup> Regardless of when last received, the large majority of households in all groups reported that they received a half-ration of PDS assistance as opposed to a full ration.
- In hard-to-reach areas, the majority of the non-displaced population assessed in Hawiqa (Kirkuk) reportedly did not have access to PDS assistance, while the majority of the non-displaced population assessed in Telafar (Ninewa) reportedly had access. Amongst returnees in hard-to-reach areas, the majority of the returnee population assessed in Ninewa governorate (Hamdaniya, Mosul, Sinjar, Telafar and Tilkaif) reportedly had access to PDS assistance; this was also reported for returnees in Heet (Anbar) as well as Tikrit and Tooz (Salah al Din). While returnees assessed in other hard-to-reach districts were reported to have varying degrees of access to PDS, Kirkuk (Kirkuk governorate) was the only district where the majority of the returnee population was reportedly not receiving PDS assistance.

### Coping strategies

- The majority of returnee and host community households in accessible areas reported that they did not use any coping strategies in the seven days preceding data collection as a means to maintain food consumption levels – 80% and 61% of households, respectively. Consuming less expensive food was the most frequently reported coping strategy amongst host community and returnee households, indicated by 35% and 17% of households, respectively.
- Amongst displaced population groups in accessible areas, 54% of in-camp and 36% of out-of-camp IDP households reported that they did not use any food consumption coping strategies during the recall period. The consumption of less expensive food was the most frequently reported coping strategy in the seven days preceding data collection, as indicated by 40% of in-camp and 57% of out-of-camp IDP households.
- In all newly retaken and conflict districts where non-displaced populations were assessed, a variety of consumption-based coping strategies were reported. Sending children (under 18) to work was reported as a coping strategy in Haditha (Anbar) and Telafar (Ninewa), while consuming cheaper food, limiting portions and/or reducing the number of meals per day were reported across all districts where non-displaced populations were assessed. For returnees assessed in hard-to-reach areas, sending children (under 18) to work was reportedly a coping strategy in all districts except for Kirkuk (Kirkuk) and Hamdaniya (Ninewa). The assessed returnee population in Kirkuk reportedly resorted to borrowing food in addition to eating less expensive food. Reliance on less expensive food was reported as a coping strategy in all other hard-to-reach districts where returnees were assessed.

<sup>15</sup> The Iraqi Public Distribution System (PDS) provides government-subsidised food rations on a monthly basis as well as an annual kerosene distribution.

## Livelihoods and social cohesion

### Income and employment

- Returnee households in accessible areas reported the highest average income in the 30 days preceding data collection – approximately 654,000 Iraqi Dinars (IQD) or 564 United States Dollars (USD) – compared with host community households (approximately 627,000 IQD / 541 USD) and out-of-camp IDP households, who reported the lowest average income (approximately 530,000 IQD / 460 USD).<sup>16</sup> Out-of-camp IDPs also most frequently reported unemployed household members who were actively seeking employment, as indicated by 46% of households, compared to 22% of host community and 19% of returnee households.
- Half of out-of-camp IDP households, followed by 38% of returnee and one-third of host community households, cited a form of seasonal or short-term employment as their primary livelihood source, such as agricultural wage, skilled wage or low-skilled service labour, in the month preceding data collection.
- In hard-to-reach areas, working as a civil servant was reportedly the primary source of income for the assessed non-displaced population in Shirqat, while agricultural waged labour was the primary source of income for the returnee population assessed in Kirkuk. In all other hard-to-reach districts where non-displaced and returnee populations were assessed, primary income sources reportedly varied.

### Coping mechanisms

- The majority of both returnee and host community households in accessible areas reported not using any livelihoods coping strategies in the 30 days preceding data collection (71% and 67%, respectively). Spending savings was the most commonly reported strategy across both groups (21% of returnee and 14% of host community households). Acquiring debt (12% of host community households) and selling assets (11% of returnee households) were the second most common strategies used.
- Amongst displaced groups, 40% of out-of-camp IDP households in accessible areas reported not using any livelihoods coping strategies in the 30 days preceding data collection, compared with only 17% of in-camp IDP households. Borrowing money and receiving support from friends and relatives were the most commonly reported strategies employed by out-of-camp IDP households (24% and 20%, respectively), whereas selling assets and receiving charitable donations were the most commonly reported strategies amongst in-camp IDP households (31% and 27%, respectively).
- Across all hard-to-reach districts where non-displaced populations were assessed, taking on debt, spending savings and relying on support from family and friends were all reported as coping strategies used to deal with the lack of access to livelihood opportunities. Taking on debt was also reported as a coping strategy used in all hard-to-reach districts where returnees were assessed except for Abu Ghraib (Baghdad), Kirkuk (Kirkuk), Baiji and Shirqat (Salah al Din). In Kirkuk district, spending savings was reportedly a coping strategy across all assessed returnee populations.

### Social cohesion

- Of all hard-to-reach districts where non-displaced populations were assessed, Baaj district was the only district where all assessed non-displaced populations reported a decrease in perceived hospitality levels.<sup>17</sup> In the rest of the districts where non-displaced were assessed, perceptions regarding the change in hospitality levels were mixed. For returnees, hospitality levels had reportedly either increased or stayed the same in most hard-to-reach districts (Abu Ghraib (Baghdad), Falluja (Anbar), Heet (Anbar), Balad (Salah al Din), Daur (Salah al Din), Tikrit (Salah al Din) and all districts in Ninewa governorate where returnees were assessed), while they had reportedly decreased a lot in Kirkuk (Kirkuk).
- Amongst returnee and host community households in accessible areas, the majority perceived that crime levels had stayed the same in the 30 days preceding data collection (82% and 70%, respectively), with 23% of returnee and 22% of host community households reporting that crime levels had either decreased

<sup>16</sup> Currency exchanges have been calculated using [OANDA](#), based on the last date of data collection (31 August 2017 for returnee and host community households and 17 May 2017 for out-of-camp IDP households).

<sup>17</sup> "Hospitality levels" here refers to the extent to which non-displaced and/or returnee populations welcome IDPs to live amongst them and are willing to provide help when needed.

a little or decreased a lot. Around two-thirds of out-of-camp IDP households perceived that crime levels had stayed the same in the 30 days preceding, with 29% considering the crime levels to have either decreased a little or decreased a lot.

- In hard-to-reach areas, petty crime had reportedly not increased among non-displaced populations in Haditha, while in all other newly retaken and conflict districts where non-displaced were assessed perceptions of petty crime levels varied. In almost all hard-to-reach districts where returnees were assessed, petty crime among returnee populations had reportedly not increased. The exceptions were Tilkaif (Ninewa) and Tooz (Salah al Din), where perceptions of petty crime levels varied.

## Education

### Access and attendance

- Across all population groups in accessible areas, the majority of households with school-aged children reported that their children were receiving formal education. Returnee and host community households indicated similar levels of access to formal education – 89% and 87%, respectively – whereas 82% of out-of-camp IDP and only 67% of in-camp IDP households reported that their children were receiving formal education. Only in-camp IDP households with school-aged children reported having children attending non-formal educational services (11%).
- In-camp IDP households with school-aged children most frequently reported children not attending any form of education (21%), followed by out-of-camp IDP (18%), host community (12%), and returnee (11%) households. Of these households, 79% of host community households indicated that their children had never attended any schooling, whereas 21% indicated that their children had dropped out. The drop-out rate was higher amongst both out-of-camp IDPs and returnees, with 55% of returnee households and 43% of out-of-camp IDP households reporting that their children had dropped out. These differences could be attributed to the impact of displacement on the ability of children to remain in school – both for those groups who are still displaced, and for those who have recently returned from displacement.
- In hard-to-reach areas, in all assessed non-displaced populations in Hawiga (Kirkuk) and Baaj (Ninewa), no more than 25% of school-aged children were reportedly attending either formal or informal education. The same was reported for the assessed returnee population in Kirkuk, while in other hard-to-reach districts where returnees were assessed responses varied.

### Barriers to accessing education

- In accessible areas, the most commonly reported reason for non-attendance amongst host community households with school-aged children was the prohibitively high cost of education (16%), followed by the school being too far away (8%). For returnees, the main reason was the bad condition of the school facilities (28%), reflecting the impact of the conflict on school buildings, followed by the high cost of education (12%). The most reported type of cost preventing school attendance across all population groups was transportation, followed by uniform costs.
- In hard-to-reach areas, the quality of the curriculum was identified as a barrier to accessing education in all districts where non-displaced populations were assessed. Distance to school was also identified as a barrier in all districts where non-displaced were assessed except for Hawiga (Kirkuk) and Shirqat (Salah al Din), while security was noted as a barrier in Hawiga (Kirkuk), Ba'aj (Ninewa) and Shirqat (Salah al Din). Similarly to non-displaced, the quality of the curriculum was identified as a barrier to accessing education in all hard-to-reach districts where returnees were assessed, except in Sinjar (Ninewa), Baiji (Salah al Din) and Samarra (Salah al Din). Distance to school was also identified as a barrier in all assessed districts except Kirkuk (Kirkuk) and Tooz (Salah al Din). By contrast, all returnee populations assessed in Kirkuk (Kirkuk) reported that security was an issue, thus preventing children from accessing education even if there was a school nearby. The cost associated with sending children to school was reportedly a barrier in all hard-to-reach districts in Ninewa governorate where returnees were assessed.

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## List of Acronyms

<b>AWG</b>	Assessment Working Group
<b>CAOFISR</b>	Canadian Aid Organization for International Society Rehab
<b>DTM</b>	Displacement Tracking Matrix
<b>HNO</b>	Humanitarian Needs Overview
<b>HRP</b>	Humanitarian Response Plan
<b>ICCG</b>	Inter-Cluster Coordination Group
<b>IDP</b>	Internally displaced person
<b>IOM</b>	International Organization for Migration
<b>ISF</b>	Iraqi Security Forces
<b>ISIL</b>	Islamic State of Iraq and the Levant
<b>IQD</b>	Iraqi Dinar
<b>KI</b>	Key informant
<b>KRI</b>	Kurdistan Region of Iraq
<b>MCNA</b>	Multi-Cluster Needs Assessment
<b>MODM</b>	Ministry of Displacement and Migration
<b>NFI</b>	Non-food item
<b>NGO</b>	Non-governmental organisation
<b>ODK</b>	Open Data Kit
<b>OFDA</b>	Office for US Foreign Disaster Assistance
<b>PDS</b>	Public Distribution System
<b>RNVDO</b>	Representative of Ninewa Voluntary for IDP
<b>RRM</b>	Rapid Response Mechanism
<b>UN</b>	United Nations
<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>UNICEF</b>	United Nations Children's Fund
<b>UNOCHA</b>	United Nations Office for the Coordination of Humanitarian Affairs
<b>USD</b>	United States Dollar
<b>VAM</b>	Vulnerability Analysis and Mapping
<b>WASH</b>	Water, sanitation and hygiene
<b>WFP</b>	World Food Programme

## Geographical Classifications

<b>Governorate</b>	Highest administrative boundary below the national level.
<b>District</b>	Second highest administrative boundary. Each governorate is comprised of collections of districts.

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## INTRODUCTION

2017 marked the third year of the latest internal displacement crisis in Iraq, which was triggered by the 2014 invasion and subsequent seizure of large swathes of the country's territory by the so-called Islamic State of Iraq and the Levant (ISIL). Following similar operations in other areas of the country in 2015, Iraqi Security Forces (ISF) launched a large-scale military campaign in October 2016 to retake the city of Mosul from ISIL, where over one million civilians were residing under the group's control.<sup>18</sup> Mosul was declared as retaken in July 2017, after which other ISIL strongholds – namely Telafar, Hawiga and Ka'im – fell. These events have dramatically altered the humanitarian context in Iraq, broadening efforts to assist not only displaced households, but also those households returning to their areas of origin, those previously living under ISIL occupation who have now become accessible to humanitarian actors, and those living in communities hosting high proportions of internally displaced persons (IDPs).

As of November 2017, the International Organization for Migration (IOM) Displacement Tracking Matrix (DTM) reported nearly 2.9 million IDPs and close to 2.8 million returnees across Iraq,<sup>19</sup> and the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) reported that 11 million people are in need of humanitarian assistance as of September 2017.<sup>20,21</sup> Given the shifting context and emergence of new conflict-affected populations, humanitarian planning and programming have been constrained by lack of data regarding the prevalence of multi-sectoral needs amongst these groups and how their needs compare with one another. In particular, a comprehensive and coordinated needs assessment to inform the 2018 Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) in Iraq, and in turn meet a core commitment of the Grand Bargain, was lacking.<sup>22</sup>

To address these information gaps, in August 2017 the Iraq Assessment Working Group (AWG), with facilitation by REACH, conducted a Multi-Cluster Needs Assessment (MCNA), designed to align with the tentative 2018 HNO/HRP timeline. The MCNA objectives and methodology were developed with the Assessment Working Group (AWG) and endorsed by the Inter-Cluster Coordination Group (ICCG) in Iraq in July 2017. AWG partners provided feedback and guidance on methodology, indicators and analysis, in addition to conducting data collection in their specific areas of access. Consultation with all clusters and incorporation of cluster-specific feedback into the design of the assessment indicators and tools took place in July 2017. REACH conducted a series of cluster-specific preliminary findings presentations in September 2017, culminating in a final presentation and joint analysis workshop in October 2017. Through these presentations and the consolidated datasets that were shared, humanitarian actors in Iraq were able to use MCNA data and findings to inform their HNO/HRP planning.

The primary objective of the assessment was to inform evidence-based, multi-sectoral humanitarian programming across the whole of Iraq. The assessment included all conflict-affected population groups, to best align with the shifting context in the country and the new population groups identified for the 2018 HNO – IDPs, returnees, non-displaced in newly retaken and conflict areas, and vulnerable host communities.

Key partners implementing the MCNA with REACH included the Office for US Foreign Disaster Assistance (OFDA) as funder for the project and OCHA in its capacity as AWG co-chair. REACH also partnered with ACAPS to produce a secondary data review, and with the following organisations to complete primary data collection:

- Canadian Aid Organization for International Society Rehab (CAOFISR)
- Mercy Hands for Humanitarian Aid
- Representative of Ninewa Voluntary for IDP (RNVDO)
- World Food Programme (WFP) Iraq

<sup>18</sup> Paul Torpey, Pablo Gutierrez, and Paul Scruton, "[The Battle for Mosul in Maps](#)," *The Guardian*, 26 June 2017, accessed 7 December 2017.

<sup>19</sup> [IOM DTM](#), accessed 6 December 2017.

<sup>20</sup> The humanitarian response in Iraq is coordinated by OCHA through the cluster system. A range of international and national non-governmental organisations (NGOs) work through the clusters and with local government actors to provide humanitarian assistance and services.

<sup>21</sup> OCHA, [Iraq - Key Figures](#), accessed 6 December 2017.

<sup>22</sup> The [Grand Bargain](#) is an agreement between over 30 international aid providers and donors "to get more means into the hands of people in need," and was endorsed in May 2016 at the World Humanitarian Summit in Istanbul, Turkey. Core commitment 5 is to improve joint and impartial needs assessments.

This report provides a detailed description of the assessment methodology, followed by an outline of the key assessment findings, organised into the following sections:

1. Population demographics and cross-sectoral indicators
2. Shelter and non-food items (NFIs)
3. Water, sanitation and hygiene (WASH)
4. Health
5. Food security
6. Livelihoods & social cohesion
7. Education
8. Conclusion

## METHODOLOGY

### Research objectives and research questions

The primary objective of the MCNA was to inform evidence-based, multi-sectoral humanitarian programming across the whole of Iraq. Although prior rounds of the MCNA focused exclusively on out-of-camp IDPs, this round was broadened to include all conflict-affected population groups, to best align with the shifting context in the country and the new population groups identified for the 2018 HNO. Therefore, a specific objective of the assessment was to identify the multi-sectoral needs of the following population groups:<sup>23</sup>

- Out-of-camp IDPs in accessible areas
- In-camp IDPs
- Returnees in accessible and hard-to-reach areas<sup>24</sup>
- Non-displaced in newly retaken and conflict areas<sup>25</sup>
- Vulnerable host communities<sup>26</sup>

Another specific objective of the MCNA was to inform the 2018 HNO and HRP for Iraq, through providing comprehensive data regarding the prevalence of cluster-specific needs amongst each of the population groups outlined above. These objectives were achieved through answering the following research questions:

- What is the prevalence of cluster-specific needs, inclusive of protection, shelter and NFIs, WASH, health, food security, livelihoods, and education, of each conflict-affected population group?
- What proportion of each population group has received various types of humanitarian assistance in the 90 days preceding data collection, and what are the perceptions of households regarding the assistance received?
- What are the movement intentions of population groups in the 90 days following data collection?

### Methodology overview

The assessment was implemented through a mixed-methods approach consisting of the following components:

1. Secondary data review (SDR) conducted in partnership with ACAPS
2. Secondary data analysis of existing REACH datasets on in-camp and out-of-camp IDPs
3. Statistically representative household survey administered in districts that were fully directly accessible
4. Key informant (KI) interviews administered in districts that were not fully directly accessible

In all districts where direct access to households was possible, a structured household survey was conducted amongst a representative sample of households from each applicable population group. However, not all districts were accessible for direct household-level data collection, due to security risks posed in these areas. Therefore, in any district that was not fully directly accessible, i.e. a random sample could not be drawn from its entirety, KI interviews were conducted instead.

Primary data collection took place from 9 to 31 August 2017. In total, 1,571 household surveys were conducted amongst returnee and host community populations in accessible areas (917 and 654 households, respectively), and 262 KI interviews were conducted for returnee and non-displaced populations in hard-to-reach areas (172 and 90 KIs, respectively). See Table 1 for an overview of the data collection methods for each population group that was assessed:

<sup>23</sup> Inclusion of these groups and how they are defined is based on the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) 2018 humanitarian profile for Iraq.

<sup>24</sup> Formally IDPs, but who have now returned from displacement to their areas of origin.

<sup>25</sup> "Non-displaced" here refers to those who did not displace from the following districts in recently retaken and conflict areas as defined by OCHA/HNO at the time of data collection: Ana, Ba'aj, Haditha, Hawiga, Ka'im, Mosul, Shirqat and Telafar. For the purpose of brevity, this population group will be referred to as "non-displaced" throughout the remainder of the report. Due to operational and access constraints, the districts of Ana and Ka'im were not possible to assess at the time of data collection.

<sup>26</sup> Defined as communities in which IDPs comprise 10% or more of the total population.

Table 2: Data collection methods, by population group

	Population group	Data collection date	Data collected at	Household surveys conducted in accessible areas	Precision of findings	KI interviews conducted for communities in hard-to-reach areas	Dataset
Primary data collection	<i>In-camp IDP</i>	May 2017	Camp level	6,422	95% confidence level 10% margin of error	n/a	REACH
	<i>Out-of-camp IDP</i>	March-May 2017	District level	6,191	90% confidence level 10% margin of error	n/a	REACH
	<i>Host community</i>	August 2017	National level	654	95% confidence level 5% margin of error	n/a	MCNA
	<i>Returnee</i>	August 2017	District level	917	90% confidence level 10% margin of error	172	MCNA
	<i>Non-displaced</i>	August 2017	District level	n/a	n/a	90	MCNA

### Geographical coverage

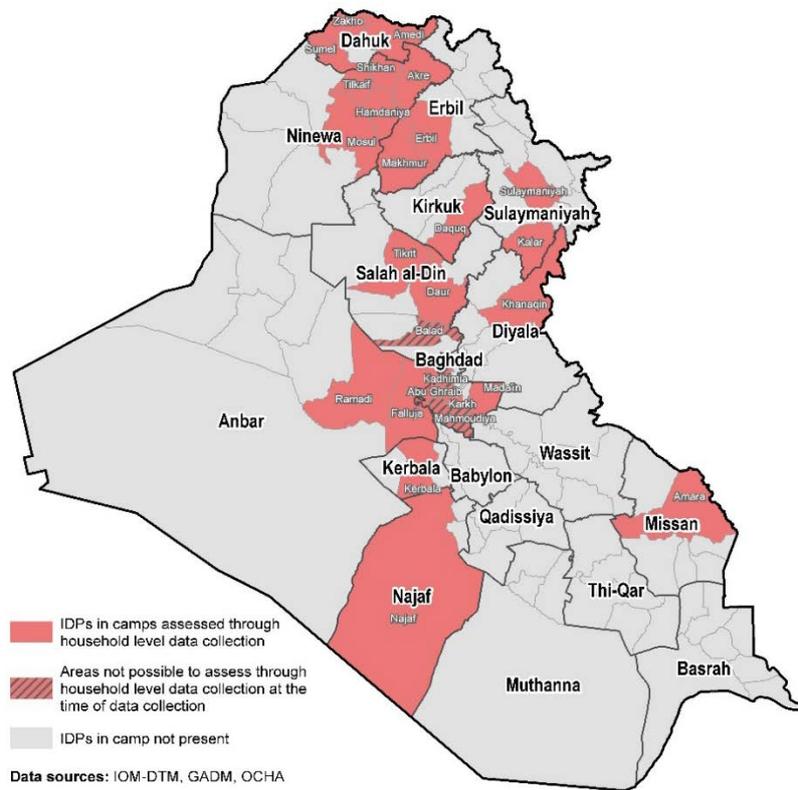
The assessment encompassed the whole of Iraq, with data from 92 districts across all 18 governorates. Primary data collection during August 2017 took place in 44 districts across 11 governorates. Geographical coverage for the primary data collection exercise was influenced by two primary factors: the presence of a particular population group in the district, which varied across the country, and the security situation in each individual district, which would in turn influence the ability to conduct direct household level data collection and necessitate the use of KI interviews instead. Coverage by governorate and population group is summarized in the table below, followed by population group-specific maps which depict variations in the data collection coverage.

Table 3: Data collection coverage by governorate and population group<sup>27</sup>

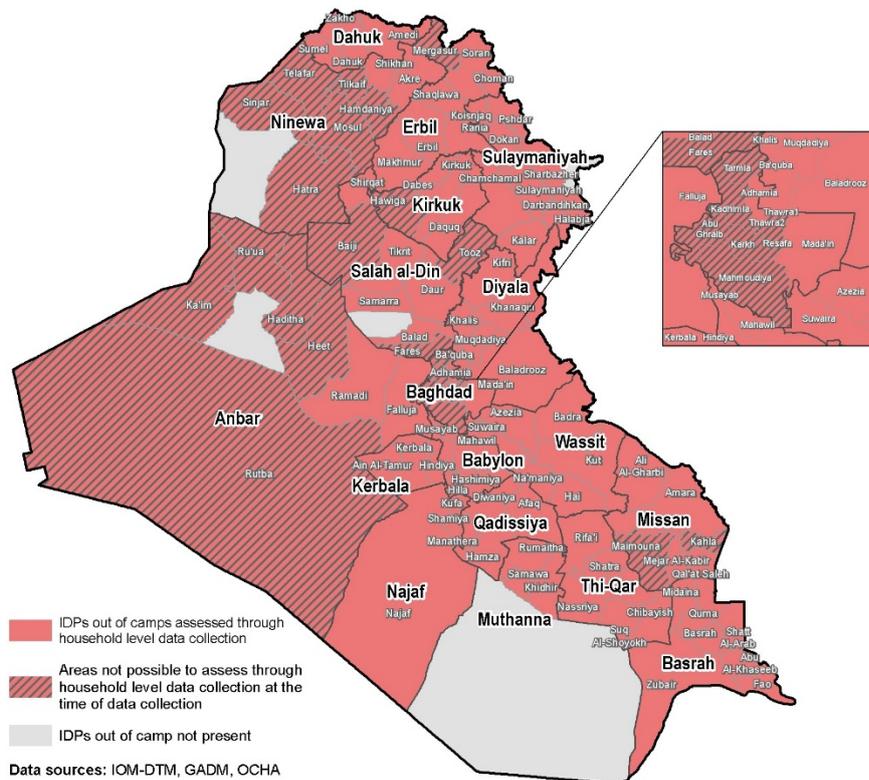
Governorate	In-camp IDP	Out-of-camp IDP	Host community	Returnee	Non-displaced
Anbar	✓	✓	✓	✓	✓
Babylon		✓			
Baghdad	✓	✓	✓	✓	
Basrah		✓			
Dahuk	✓	✓	✓	✓	
Diyala	✓	✓	✓	✓	
Erbil	✓	✓	✓	✓	
Kerbala	✓	✓	✓	✓	
Kirkuk	✓	✓	✓	✓	✓
Missan	✓	✓			
Muthanna		✓			
Najaf	✓	✓	✓	✓	
Ninewa	✓	✓	✓	✓	✓
Qadissiya		✓			
Salah al Din	✓	✓		✓	✓
Sulaymaniyah	✓	✓	✓	✓	
Thi-Qar		✓			
Wasit		✓	✓	✓	

<sup>27</sup> If a governorate had no data collection coverage for a particular population group, this indicates that the population group was not present in that governorate. The presence of a group in a particular governorate was determined based on IOM DTM and LandScan data.

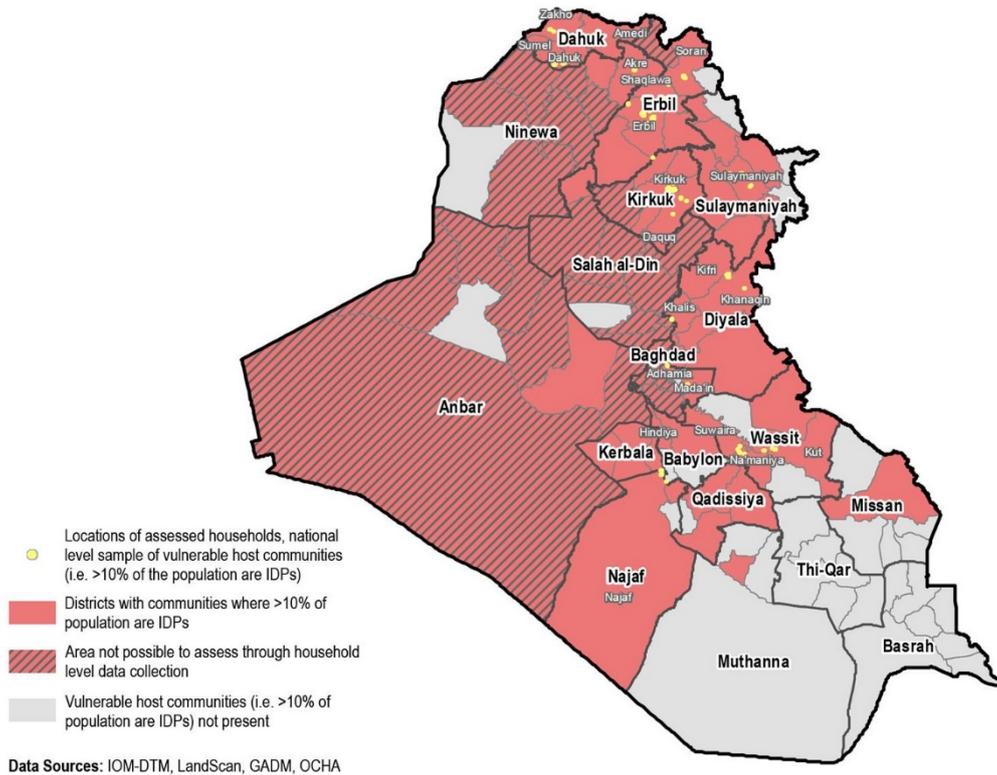
Map 1: Data collection coverage for in-camp IDP population group (household surveys)



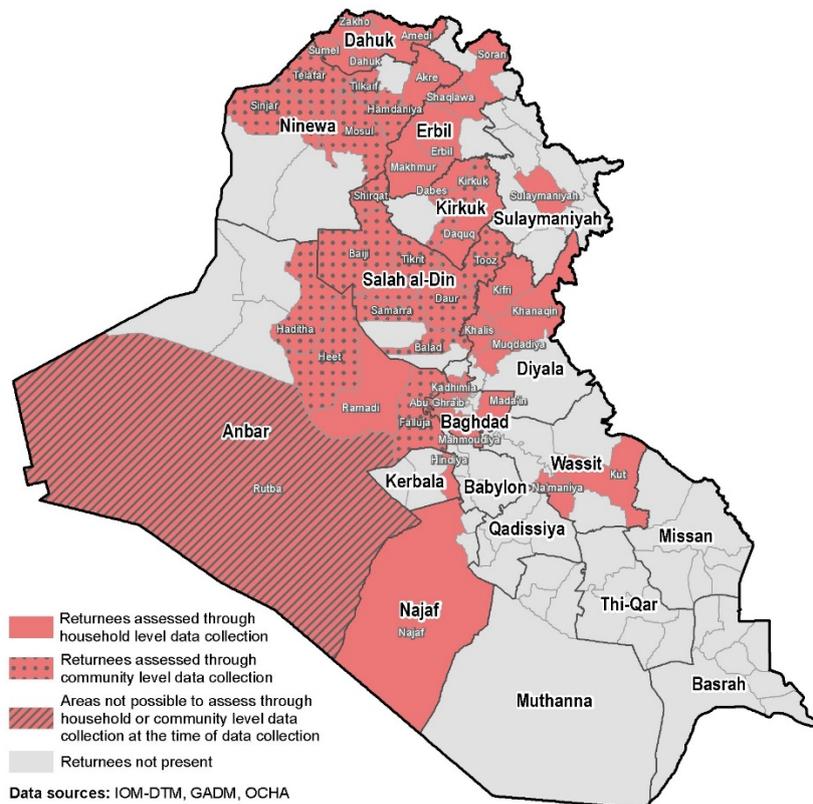
Map 2: Data collection coverage for out-of-camp IDP population group (household surveys)



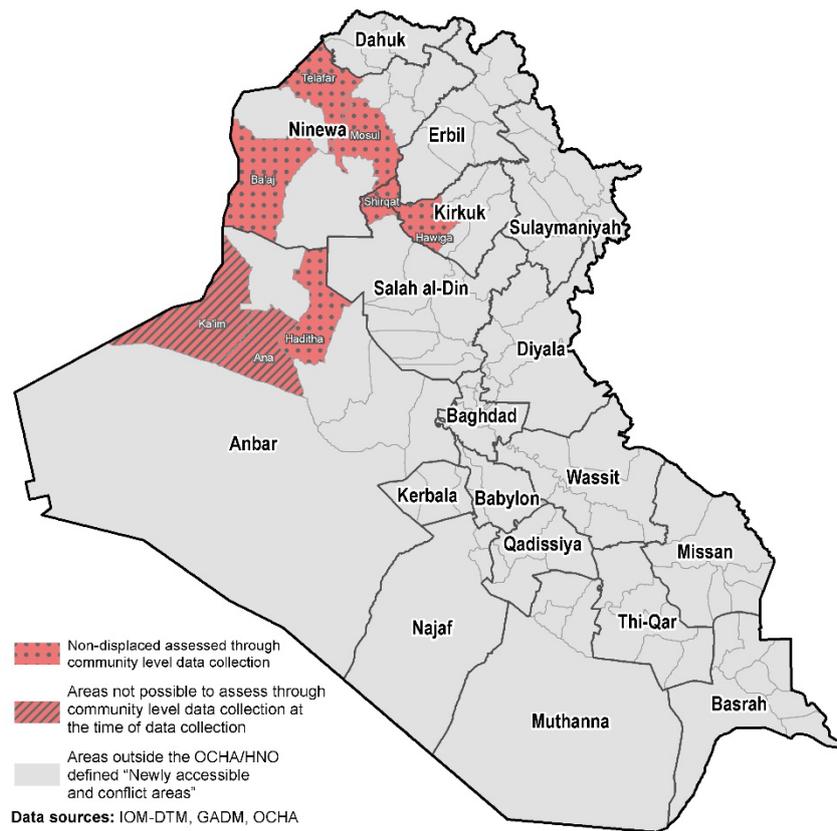
Map 3: Data collection coverage for host community population group (household surveys)



Map 4: Data collection coverage for returnee population group (household surveys and KI interviews)



Map 5: Data collection coverage for non-displaced population group (KI interviews)



## Use of secondary data

Secondary data was utilized in two key ways for this assessment. Firstly, rather than reassessing IDP population groups for which recent comparable data was available, REACH used datasets from its May 2017 round of nationwide IDP Camp Profiling and March-May 2017 round of the MCNA, which focused exclusively on out-of-camp IDPs. These datasets were merged with the primary data collected in August, weighted appropriately, and aggregated to the national level to enable comparisons across population groups.

Additionally, REACH partnered with ACAPS to conduct an SDR, which provided relevant secondary research to contextualize and triangulate the findings derived from the primary data collection exercise. The SDR entailed amassing all available literature, evaluating the methodology, cataloguing key sectoral findings and highlighting any residual information gaps.

## Indicator and tool design

The set of indicators and structured household survey tool were designed to enable surveying multiple population groups, and a separate KI tool adapted from the household survey was developed for assessing areas without direct access. Additionally, the indicators were shared with each cluster prior to finalization, to incorporate sectoral expertise and to ensure that the indicators were appropriately aligned with each cluster's objectives and informational needs.

## Sampling

### Quantitative

A multi-stage, cluster sampling approach was used for household data collection in directly accessible districts. Population sizes and locations of each population group, which informed the sampling framework, were largely derived from IOM DTM data:

- **Returnees (district level):** The sampling frame consisted of all locations with presence of returnees recorded in the IOM DTM database. A cluster sample was drawn for each district, with Probability Proportional to Size (PPS) based on recorded number of returnees, with the aim of generalising findings to the population group in each district with a 90% level of confidence and a 10% margin of error. The aim was also to generalise findings with a 95% level of confidence and a 10% margin of error at the national level. See Annex 1 for district sample sizes.
- **Vulnerable host communities (national level):** The sampling frame consisted of all locations nationwide where more than 10% of the population consisted of IDPs. A cluster sample was drawn, with PPS based on population density data, with the aim of generalising findings at the national level with a 95% level of confidence and a 5% margin of error.

Once arriving at a selected location, data collection teams randomly selected households for the group to be sampled using the most feasible method depending on the context. Where feasible, this was achieved by using pre-generated sample maps of the location where the location of randomly generated GPS points were identified within the community. Enumerators would then interview the eligible household nearest to each point. Where pre-generated sampling was not feasible, a systematic random sampling approach was used, ensuring as equal as possible intervals between interviewed households.

### Qualitative

KI interview locations were selected by applying the first stage of the multi-stage cluster sampling approach outlined above. Individual KI respondents were then identified through purposive sampling, with the aid of a KI profile list (Table 4) and by consulting community leaders at each location. Broadly, KIs were defined as individuals with knowledge of the community in which they lived, particularly those who possessed knowledge of the multi-sectoral needs of households in their communities.

Table 4: KI profiles sought for interviews during community level data collection

Protection	Food Security	Health	Livelihoods/ Social Cohesion	NFI/Shelter	WASH	Education
Teachers	Farmers	Doctors	Gov't employees	Engineers	Engineers	Teachers
Head Teachers	Traders	Nurses	Mukhtars	Government employees	Government employees	Head Teachers
Doctors	Government employees	Pharmacists	Daily workers	Mukhtars	Mukhtars	Government employees
Mukhtars <sup>28</sup>	Mukhtars	Healthcare facility workers	NGO workers	NGO workers	NGO workers	Mukhtars
NGO workers	NGO workers	Mukhtars NGO workers	Teachers Head Teachers			NGO workers

<sup>28</sup> A "mukhtar" is defined as a community representative at the neighbourhood or village level who acts as a conduit between the local government and his community.

## Primary data collection

### Quantitative

Data collection was implemented by a mixed-sex team of experienced REACH enumerators, under the supervision of a REACH field coordinator at each base. All interview responses were recorded through Open Data Kit (ODK), an Android-based mobile application designed to enable digital data collection and minimize data entry errors that are more likely to occur when administering pen-and-paper questionnaires.

### Qualitative

KI interviews were conducted in one of three ways, depending on the security context:

1. **Direct data collection** in areas where access to the physical location was possible, but large-scale household level data collection was still not feasible.
2. **Remote data collection** through phone interviews in areas that were completely inaccessible, where there was no risk to the KI's safety by calling him or her.
3. **"Area of knowledge"** data collection, where interviews were conducted with individuals who had recently displaced from the location of interest. This method was used when remote interviews by phone were considered a risk to the KI's safety.

Additionally, REACH partnered with CAOFISR, Mercy Hands for Humanitarian Aid, RNVDO, and WFP Iraq to complete KI interviews for the non-displaced population group, where REACH faced the greatest access and security constraints.

## Data processing and analysis

Completed interview forms were uploaded to a Kobo server at the end of each data collection day, to be reviewed and cleaned by the REACH Assessment Officer. The majority of data cleaning was conducted by running an automated script, which flagged entries needing further examination. The Assessment Officer would then cross-check these flagged entries with the responsible Field Coordinator. All changes to the raw data were logged in a data cleaning logbook, including demonstrably erroneous records that were removed entirely.

Quantitative analysis was conducted using both SPSS software and an automated R script to weight and aggregate data, provide descriptive statistics, and test differences between population groups and geographical areas for statistical significance. Qualitative analysis was conducted similarly, although tests for statistical significance were not conducted due to the indicative nature of qualitative data.

## Limitations

- **Community level findings in hard-to-reach areas are not statistically generalisable.** KI interviews with community leaders were conducted in areas that were not accessible for direct household surveys due to security constraints. As such, these findings should be interpreted as indicative of the target population only. To distinguish between indicative findings and findings that are generalisable with a quantifiable level of precision, findings based on household surveys in accessible areas and findings on communities in hard-to-reach areas are presented in separate sub-sections throughout the remainder of the report.
- **The host community population sample was drawn at the national level only.** Due to time and resource constraints, the host community population sample was not stratified at district level. As such, findings for this population group cannot be disaggregated by governorate or district.
- **Household surveys of in-camp and out-of-camp IDP households occurred several months prior to surveys of returnee and host community households.** As the two sets of data were collected several months apart, this limitation should be considered when interpreting comparisons between population groups. Furthermore, comparisons between IDPs and other population groups have not been visually presented in charts and tables for any indicators bound by a specific recall period – i.e. 7 days, 30 days, or 90 days preceding data collection, as well as 30 days or 90 days following data collection.

- **Certain assessment indicators are not directly comparable across all population groups.** The final household level dataset merged secondary data assessing IDPs with primary data assessing returnee and host community households. As such, some comparability is lost due to slightly varied questionnaires, and certain indicators cannot be compared at all as they were not included in both questionnaires. These instances are noted where relevant.
- **Biases due to self-reporting of household level indicators may exist.** Certain indicators may be under-reported or over-reported, due to the subjectivity and perceptions of respondents. These biases should be taken into consideration when interpreting findings, particularly those pertaining to sensitive indicators.
- **Findings based on the responses of a subset of the sample population have a lower confidence level and higher margin of error.** For example, questions asked only to households with school-aged children, or only to households who reported needing access to healthcare services, will yield results with a lower precision. Findings based on small subsets of the sample may be indicative only, and are noted as such in the report.

## FINDINGS

This chapter of the report presents main findings from the MCNA. The first section will provide an overview of key population demographics, and the second chapter will examine cross-sectoral indicators related to movement intentions, access to assistance, and priority needs. Each subsequent chapter will provide key sector-specific findings for shelter and NFI, WASH, health, food security, livelihoods and social cohesion, and education.

Findings are presented for both households in accessible areas and communities in hard-to-reach areas, and are distinguished as such in separate sub-sections. This distinction reflects the data collection methodology: household-level data was collected by surveying a random sample of households, with findings generalisable to the target population, whereas community-level data was collected from KIs who provided responses on behalf of households living in their communities. Community-level findings are therefore indicative only.

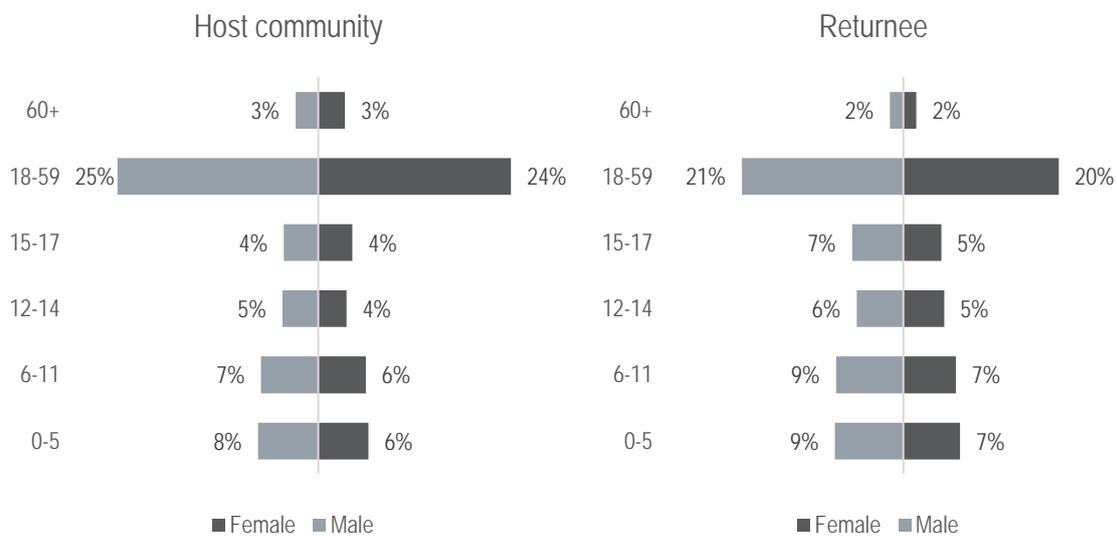
### Demographics

This section outlines key demographic figures for the population groups that were assessed at household level:<sup>29</sup>

- Host community households;
- Returnee households;
- In-camp IDP households
- Out-of-camp IDP households

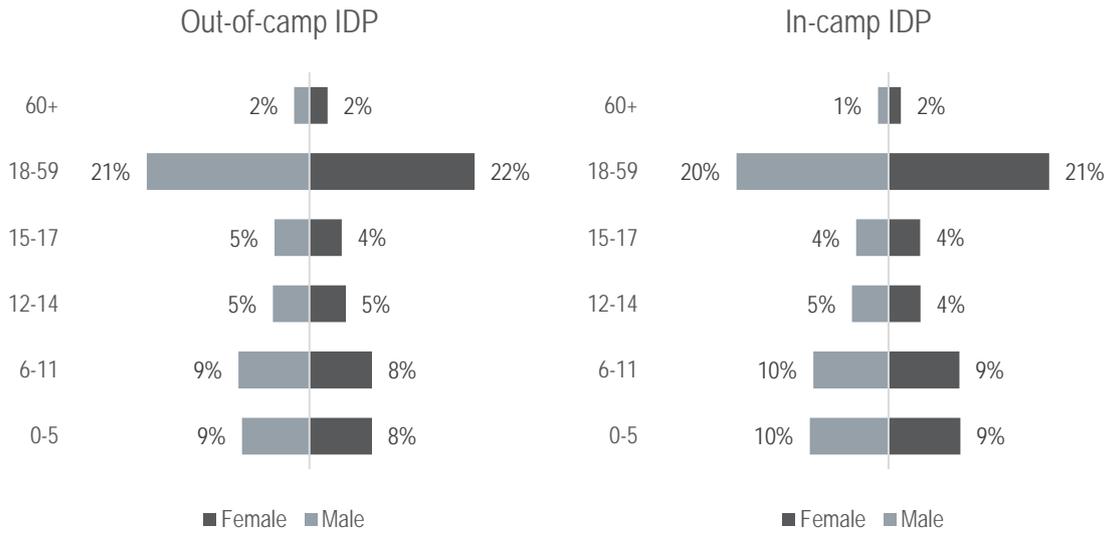
The graphs below show national level age distributions, disaggregated by population groups. In-camp IDP and returnee population groups have the greatest proportion of children, with 56% of people in each of these population groups under the age of 18.

Figure 1: Age and gender distribution, by population group<sup>30</sup>



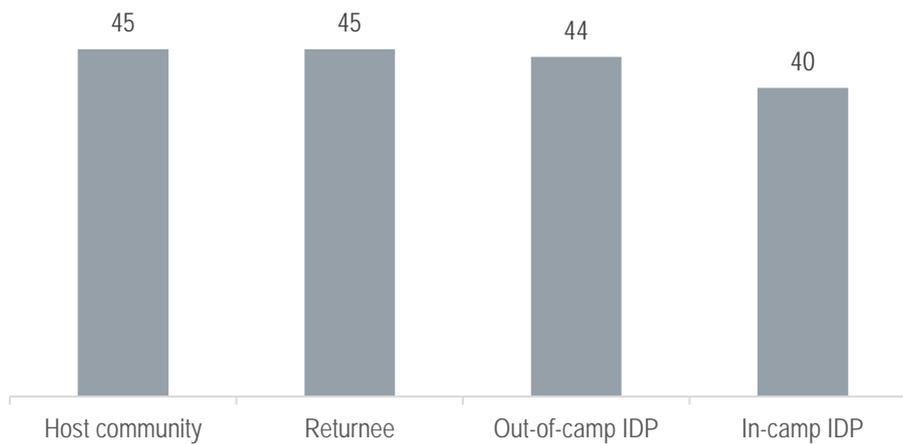
<sup>29</sup> Assessment of the non-displaced population group in recently retaken and conflict areas was conducted at community level only, and as such demographic information for this group is not available.

<sup>30</sup> ANOVA results: p value = 0.000. There is a statistically significant difference between groups.



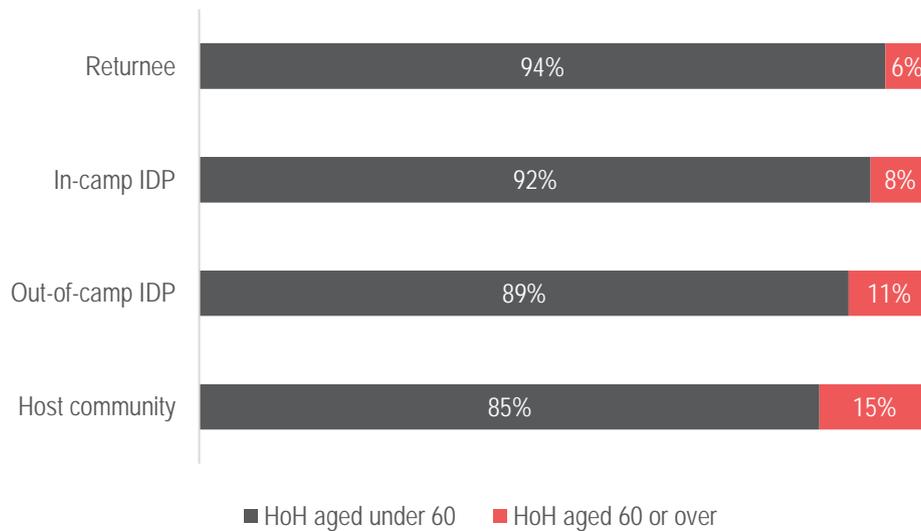
The population group with the lowest average age of head of household (HoH) is in-camp IDP households (age 40). Returnee households and host community households both reported an average head of household age of 45. Out-of-camp IDP households reported an average head of household age of 44.

Figure 2: Average age of head of household, by population group<sup>31</sup>



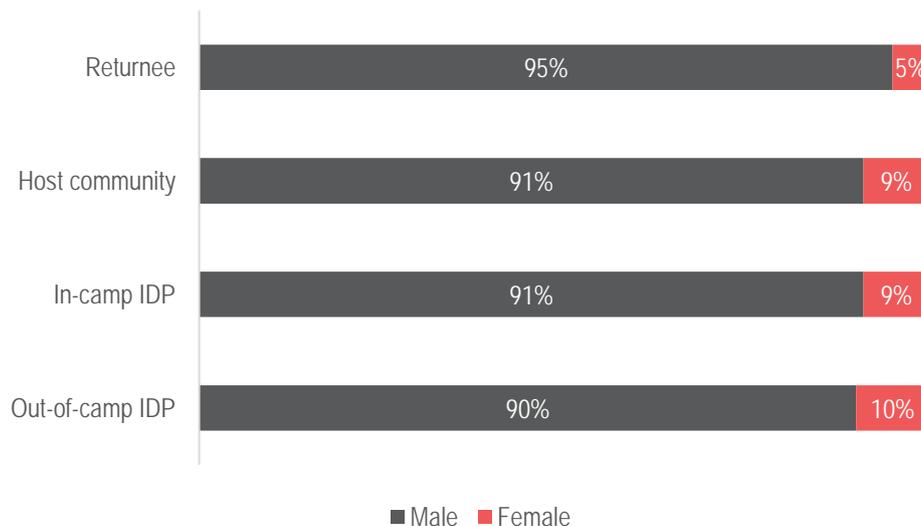
Households with elderly members can be more vulnerable, due to greater health concerns and because fewer members of the household may be able to work. To capture some of this risk, the proportion of households headed by persons over 60 years of age was calculated for each population group. Returnee households reported having a HoH aged 60 years or older, least frequently (6%) of the population groups, closely followed by in-camp IDP households at 8%. Out-of-camp IDP households reported this 11% of the time. Host community households reported having a HoH aged 60 years or older, 15% of the time. Across all population groups, less than 1% of households reported being headed by children under the age of 18. Vulnerable households were largely comprised of those with more elderly members.

<sup>31</sup> ANOVA results: p value = 0.000. There is a statistically significant difference between groups.

Figure 3: Percentage of heads of household aged 60 or over, by population group<sup>32</sup>

Across all groups, most households were headed by a male.<sup>33</sup> The results show similarity across host community households, in-camp IDP households and out-of-camp IDP households. Returnee households by comparison had fewer instances of female-headed households at 5% of households, compared to 9-10% for the other population groups. Female-headed households can be more vulnerable, and this appears to be most common within the out-of-camp IDP population group.

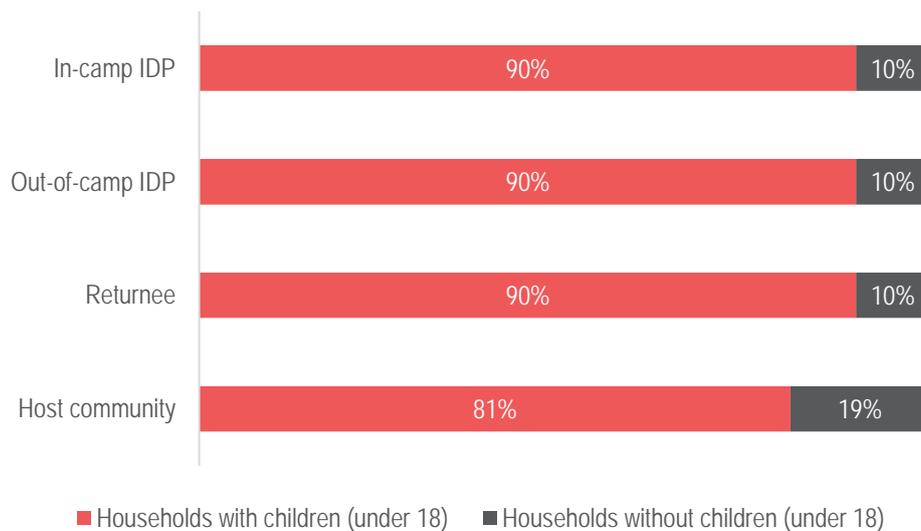
Figure 4: Head of household, by gender and population group



The majority of households reported having children under the age of 18 within the household. Ninety percent (90%) of returnee, in-camp IDP and out-of-camp IDP households reported having children within the household. By comparison, 81% of host community households reported having children within the household. Having children within a household means having dependent members which can cause strain on already limited resources, making households more vulnerable and placing them in a potentially higher need of aid and other types of support.

<sup>32</sup> There is a statistically significant association between population group and HoH aged 60 or over: Pearson's Chi-Square = 67.88. p value = 0.000.

<sup>33</sup> There is a statistically significant association between population groups and gender of head of household. Significance test results: Person's Chi-Square = 24.236. p value = 0.000.

Figure 5: Proportion of households with children (under age 18) within the household, by population group<sup>34</sup>

The number of vulnerable household members across each population group was assessed. Vulnerable members are separated minors, orphans and those who are chronically ill or have physical or mental disabilities, and also include pregnant or lactating women (PLW) and those who are widowed. Where households had vulnerable members, they were most often chronically ill. Out-of camp IDPs reported the highest proportion of households with at least one chronically ill household member (48%). Returnee households had the lowest proportion. Returnee households were significantly different from the other groups across all types of vulnerabilities, except for 'separated minor'.

Table 5: Households containing vulnerable members, by type of vulnerability and population group<sup>35</sup>

	Out-of-camp IDP	Host community	In-camp IDP	Returnee
Chronically ill	48%	45%	42%	22%
Disabled	21%	19%	21%	11%
PLW	18%	17%	0%	5%
Widow	11%	9%	9%	6%
Orphan	10%	4%	0%	4%
Separated minor	1%	0%	1%	0%

<sup>34</sup> There is a statistically significant association between population group and proportion of households with children under the age of 18: Pearson's Chi-Square = 53.474. p value = 0.000.

<sup>35</sup> Returnee households are statistically significantly different from the other population groups for presence of orphans, chronically ill, disabled, pregnant and lactating women, and widowed: t-test: p < 0.05. There is no statistically significant difference between population groups for separated minor members of households. Out-of-camp IDP households are statistically significantly different from in-camp IDP households for the presence of chronically ill within the household and of widows. Out-of-camp IDP households are also statistically significantly different from host community households for the presence of orphans within households.

## Cross-sectoral

This section outlines cross-sectoral findings, which include movement intentions in the 90 days following data collection, humanitarian assistance received during the course of the crisis, priority needs of households, and protection-related indicators. Findings are presented for both households in accessible areas and for communities in hard-to-reach areas.

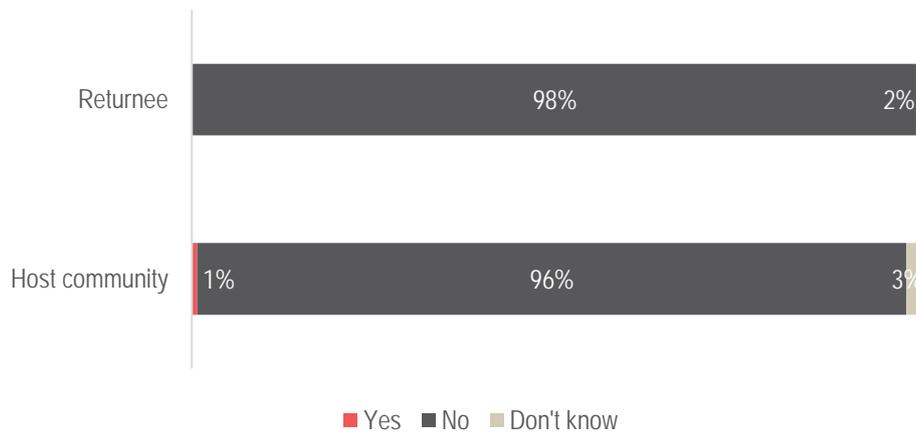
### Movement Intentions

#### Households in accessible areas

**Intention to move to a different location in the three months following data collection was low across all population groups in accessible areas.** Out-of-camp IDP households most frequently reported an intention to move, with 7% of households reporting so, compared with 2% of in-camp IDP households. No returnee households and only 1% of host community households reported an intention to move. In-camp and out-of-camp IDP households more frequently reported uncertainty about their intentions to move in the next three months, with 30% and 27%, respectively, indicating that most displaced households did not have clear movement intentions.

Data collection amongst displaced households was carried out in May 2017. At this time there remained areas of the country that had not yet changed control as well as ongoing military operations. This could have contributed to the greater ambivalence to moving to a new location amongst in-camp and out-of-camp IDPs.

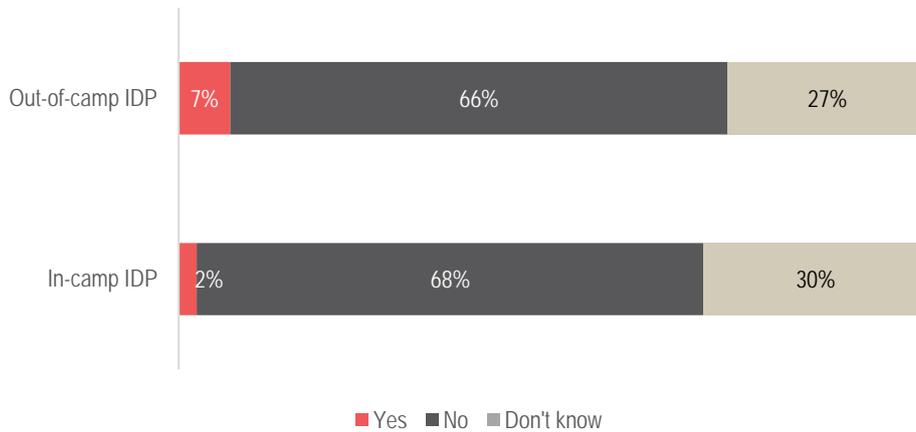
Figure 6: Intention to move to a different location in the three months following data collection, host community and returnee households<sup>36,37</sup>



<sup>36</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

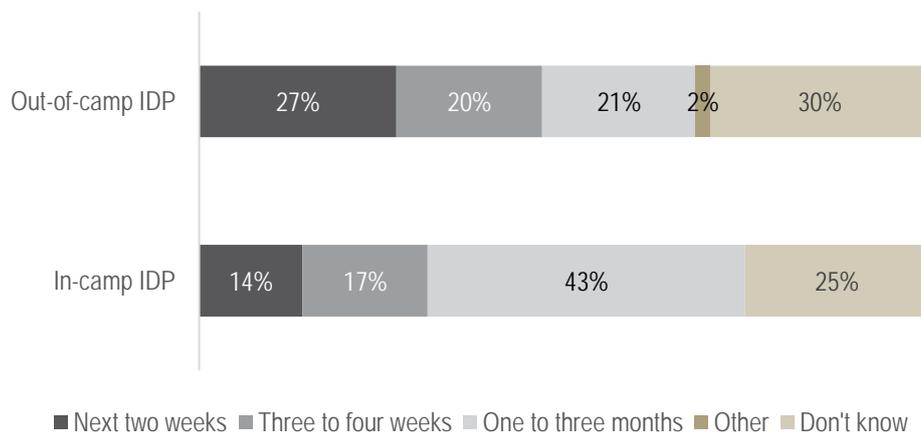
<sup>37</sup> There is no statistically significant association between population groups and intention to move to a different location in the next three months. Significance test results: Persons Chi-Square,  $p < 0.05$ .

Figure 7: Intention to move to a different location in the next three months, in-camp and out-of-camp IDP households<sup>38</sup>



Of the households in each population group that reported an intention to move, **out-of-camp IDP households reported most often an intention to move in the next two weeks following data collection (27%)**. An intention to move within one to three months was reported by 43% of in-camp IDP households and 21% of out-of-camp IDP households. Intention to move in the three months following data collection was so low for host community and returnee households that no statistically representative timescale findings were available.

Figure 8: Intention to move following data collection, in-camp and out-of-camp IDP households<sup>39</sup>

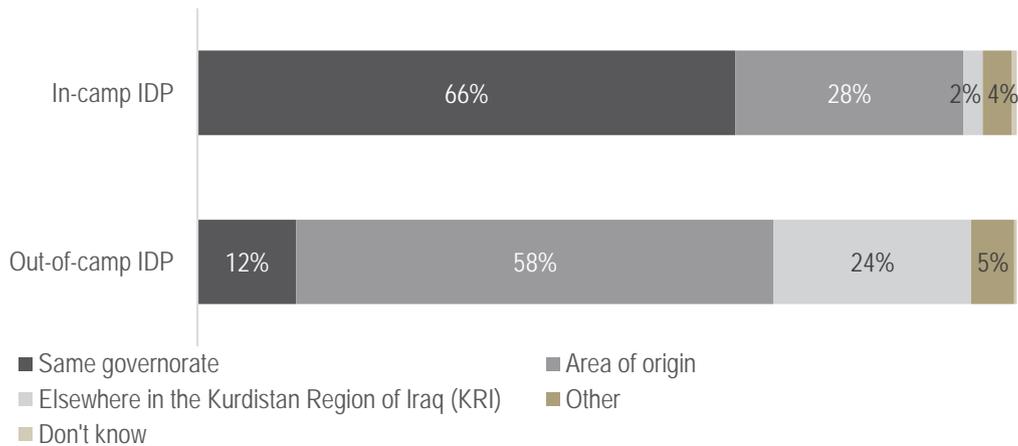


Sixty-five percent (65%) of in-camp IDP households reported the intention to return to their area of origin. Sixty-one percent (61%) of out-of-camp IDP households reported the intention to move within the same governorate.

<sup>38</sup> There is a statistically significant association between population groups and intention to move to a different location in the three months following data collection. Significance test results: Persons Chi-Square,  $p < 0.05$ .

<sup>39</sup> There is a statistically significant association between population groups and intention to move to a different location, timescales, following data collection. Significance test results: Persons Chi-Square,  $p < 0.05$ .

Figure 9: Intended destination reported by those with intention to move in the next three months, in-camp IDP and out-of-camp IDP households<sup>40</sup>



There were a broad range of push and pull factors behind the intention to move to a different location in the three months following data collection. For in-camp IDP households, the most reported reasons were: property ownership in location of intended move (39%), area of return being safe (30%) and better accommodation in location of intended move (30%). For out-of-camp IDP households: the building currently occupied is needed for its intended purpose (33%), move to better accommodation (21%), and overcrowding at current location (14%).

Table 6: Reasons reported for intending to move to a different location in the next three months, in-camp IDP and out-of-camp IDP households<sup>41;42</sup>

	In-camp IDP	Out-of-camp IDP
<b>Pull Factors</b>		
<i>Because area of return is safe</i>	30%	6%
<i>Because there is available aid</i>	11%	3%
<i>Because I own property there</i>	39%	11%
<i>To enrol children in school</i>	10%	2%
<i>Salary withheld in current area of displacement</i>	3%	0%
<i>Because I have friends and family in the intended move location</i>	14%	0%
<i>Better access to essential services</i>	12%	0%
<i>Livelihood opportunities in new location</i>	22%	0%
<i>Will move to better accommodation in new location</i>	30%	22%
<b>Push Factors</b>		
<i>Building is needed for intended purpose / service</i>	1%	33%
<i>No choice over move</i>	1%	3%
<i>Overcrowding in current location</i>	8%	14%
<i>Because the current area is not safe</i>	3%	1%
<i>Cost of living is too high in current location</i>	7%	2%

<sup>40</sup> There is a statistically significant association between population group and intended move destination. Pearson Chi-Square = 165.886,  $p = 0.000$ .

<sup>41</sup> There is no statistically significant association between population group and the following variables: 'because the area of return is not safe', 'no choice over move' and 'overcrowding in current location'. Pearson Chi-Square,  $p > 0.05$ . For all other variables,  $p < 0.05$ .

<sup>42</sup> Multiple response options could be selected.

Across all population groups, reported reasons for wanting to remain in their current location focused on safety in current location and the presence of family and friends. For host community and returnees, property ownership was also a significant factor. Livelihood opportunities were also noted as of importance to host community households.

Table 7: Reasons reported for wanting to remain in current location, in-camp IDP and out-of-camp IDP households<sup>43,44</sup>

	Host community	Returnee
Current location is safer than alternatives	40%	58%
Aid available in this location	2%	2%
Presence of family and friends	61%	47%
Property ownership in current location	65%	42%
Livelihood opportunities available in current location	47%	6%
Children are enrolled in school	9%	2%
No choice but to remain	0%	0%

Table 8: Reasons reported for wanting to remain in current location, host community and returnee households<sup>45</sup>

	In-camp IDP	Out-of-camp IDP
Current location is safer than alternatives	88%	57%
Aid available in this location	28%	3%
Presence of family and friends	21%	11%
Property ownership in current location	0%	0%
Livelihood opportunities available in current location	6%	6%
Children are enrolled in school	7%	5%
No choice but to remain	5%	3%

### Communities in hard-to-reach areas

Intention to move amongst assessed communities in hard-to-reach areas varied by district and population group. The majority of residents in assessed non-displaced populations in Hawiga reportedly intended to move to a different location.

Amongst assessed returnee populations in hard-to-reach areas, only in Kirkuk did the majority of the assessed returnee population intend to move, reportedly within the next three to four weeks and to a place elsewhere in Iraq (outside the KRI). In all other assessed districts, except Shirqat and Tooz where responses varied, the majority of the returnee population reportedly had no intention of moving to a new location in the following three months: Falluja, Haditha, Heet, Abu Ghraib, Hamdaniya, Mosul, Sinjar, Telafar, Tilkaif, Baiji, Balad, Daur, Samarra and Tikrit.

### Assistance received

#### Households in accessible areas

The majority of host community households reported receiving no assistance, closely followed by returnee households (88%, compared to 76%). Out-of-camp IDP households by comparison reported 22% having received no assistance; significantly lower than the other groups. The only type of assistance reportedly received

<sup>43</sup> There is no statistically significant association between population groups for 'property ownership in current location', 'children enrolled in school' and 'livelihood opportunities in current location': chi-squared  $p < 0.05$ . For all other indicators chi-squared  $p > 0.05$ .

<sup>44</sup> This question was multi-selection, so results do not sum to 100%.

<sup>45</sup> There is no statistically significant association between population groups for 'aid available in current location' and 'no choice but to remain': chi-squared  $p < 0.05$ . For all other indicators chi-squared  $p > 0.05$ .

by host community households was food assistance. Returnee households by comparison reported receiving cash, food, shelter and seasonal items. In-camp IDP households were not asked about assistance received.

Figure 10: Proportion of households having received assistance since beginning of crisis, host community and returnee households<sup>46;47</sup>

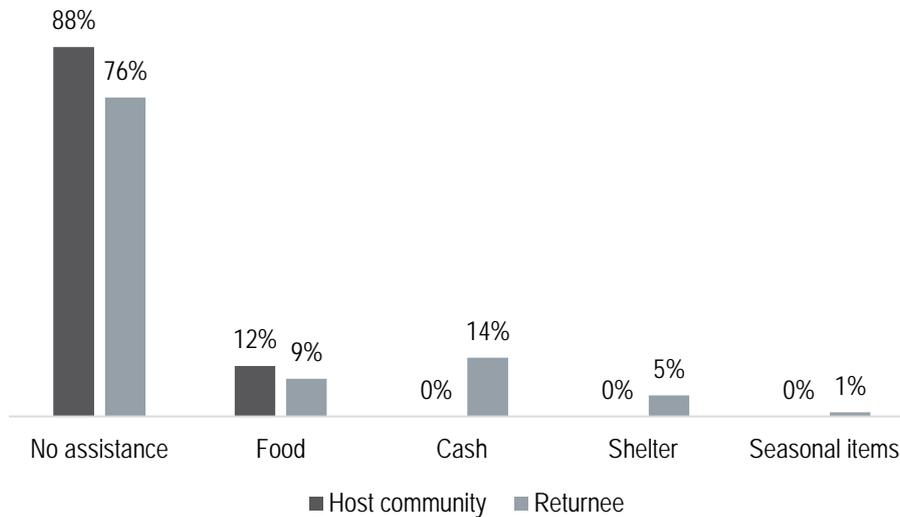
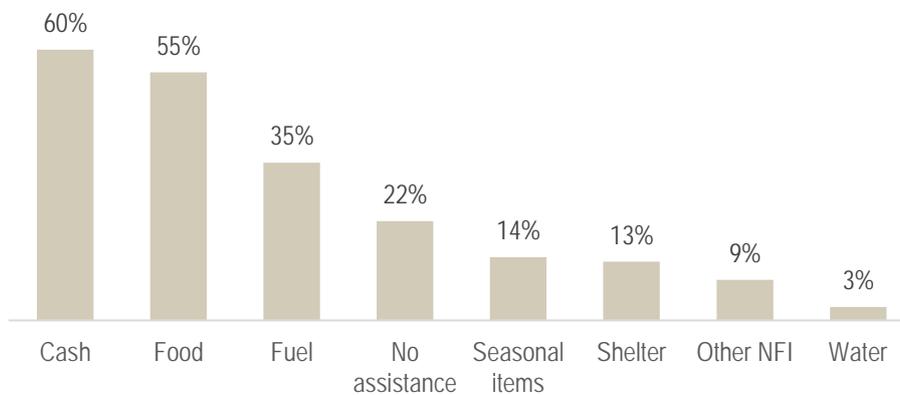


Figure 11: Proportion of households having received assistance since beginning of crisis, out-of-camp IDP households



The most commonly reported source of support across all population groups in accessible areas was the government. This was followed by international NGO support and local NGO support. **Of host community households having received support, 91% reported receiving government assistance on one more or more occasion. This compares to 74% of returnee households.** Out-of-camp IDP households received support from a wide range of sources, including government, UN, Red Cross, and national and international NGOs.

<sup>46</sup> Multiple response options could be selected by the respondent.

<sup>47</sup> There is a statistically significant association between population groups and reported assistance received since the beginning of the crisis for 'food', 'fuel' and 'seasonal items'. Significance test results: chi-squared p values > 0.05. For all other indicators chi-squared < 0.05.

Figure 12: One or more instances of support by source in the past three months prior to data collection, by proportion of those having received assistance, host community and returnee households<sup>48</sup>

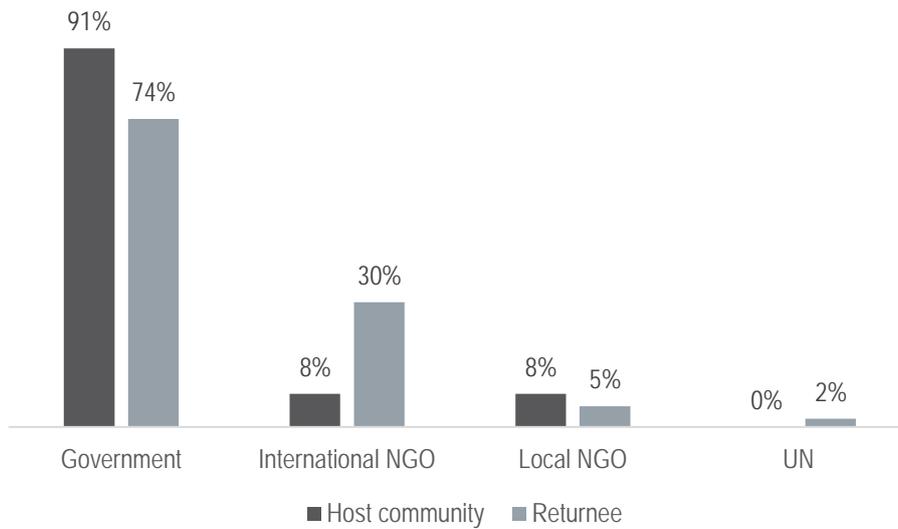
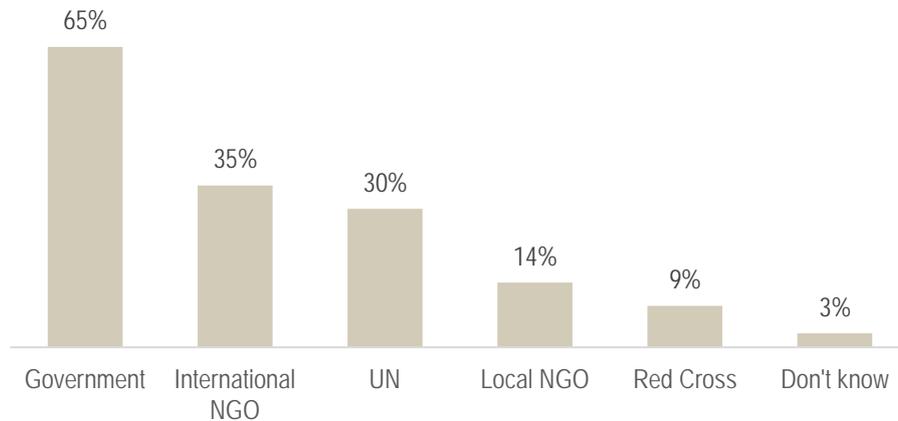


Figure 13: One or more instances of support by each source in the past three months prior to data collection, by proportion of those having received assistance, out-of-camp IDP households<sup>49</sup>



### Communities in hard-to-reach areas

None of the non-displaced populations assessed in Hawiga and Baaj districts were reported to have received any assistance. Reports of assistance for non-displaced varied in all districts in Salah al Din as well as in Haditha. Food assistance was reported in Haditha, Mosul, Telfar and Shirqat. Water assistance was reported only in Telfar and cash assistance only in Haditha.

For returnees assessed in hard-to-reach areas responses as to what type of assistance had been received varied across districts. This included reports of no assistance in Kirkuk. Food assistance was reported in all districts where returnees were assessed, except in Abu Ghraib and Kirkuk. Shelter assistance was reported in Falluja only and water assistance in Heet and Tikrit only.

<sup>48</sup> There is a statistically significant association between population groups and support from local NGOs. Significance test results: chi-squared p values > 0.05. For government and international NGO support p values < 0.05. No chi-squared results were calculated for the other support sources, because values were too small.

<sup>49</sup> Respondents could choose multiple response options.

## Priority needs

### Households in accessible areas

Food was consistently identified as a priority need across all population groups, as was medical care, employment and summerisation kit. A greater proportion of returnee households identified education as a priority need than other population groups. For in-camp IDP households, summerisation kit was reported more frequently, with 68% households identifying this as a priority need, compared to 39% of out-of-camp IDP households, 27% of host community households, and 17% of returnee households.

Table 9: Priority needs for households in accessible areas, by population group<sup>50,51</sup>

	Host community	Out-of-camp IDP	In-camp IDP	Returnee
<i>Documentation</i>	0%	3%	7%	1%
<i>Education</i>	9%	8%	12%	28%
<i>Employment</i>	41%	59%	53%	39%
<i>Food</i>	49%	68%	67%	56%
<i>Medical care</i>	56%	22%	42%	45%
<i>Psychosocial support</i>	21%	2%	6%	13%
<i>Shelter support</i>	6%	19%	13%	2%
<i>Water</i>	17%	6%	6%	19%
<i>Registration with authorities or NGOs</i>	2%	2%	7%	11%
<i>Sanitation</i>	7%	3%	3%	2%
<i>Vocational training</i>	9%	1%	1%	2%
<i>Footwear</i>	0%	1%	1%	1%
<i>Clothing</i>	3%	17%	13%	2%
<i>Summerisation kit</i>	27%	65%	39%	18%
<i>Winterisation kit</i>	16%	0%	0%	14%
<i>Other</i>	4%	4%	3%	1%

### Communities in hard-to-reach areas

For returnees in hard-to-reach areas, the need for food and employment was reported across all districts assessed. Similarly, education and medical care were also reported across all districts except Kirkuk. Water was reported as a priority need for returnees in all but five assessed districts (Samarra, Shirqat, Tikrit, Kirkuk and Tooz).

For non-displaced populations, access to vocational training, clothing and winterisation equipment were reported as priority needs in every district assessed. Other needs raised included access to water, medical care, food and employment. Education was also identified, but only in Hadiitha, Mosul and Telafar.

## Protection-related indicators

### Households in accessible areas<sup>52</sup>

In-camp IDP households most frequently reported that one or more household members were missing at least one form of civil documentation (13%), followed by 7% of out-of-camp IDP and 2% of returnee households. No host community households reported missing civil documentation amongst household members. Identification

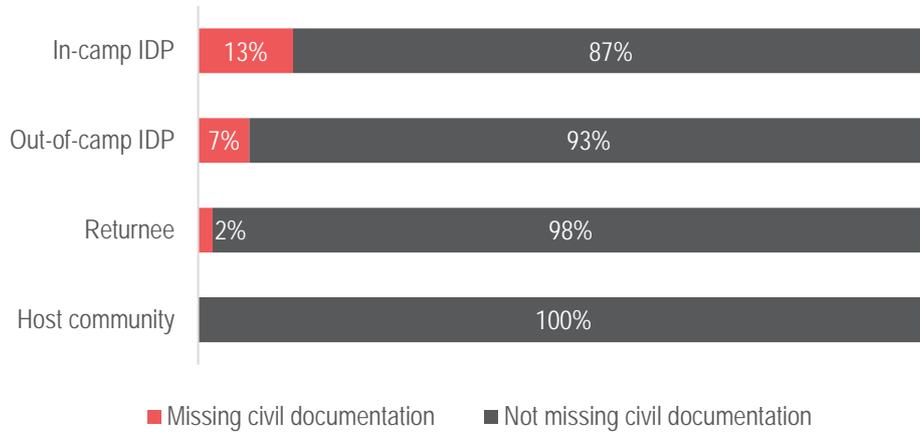
<sup>50</sup> There is no statistically significant association between population group and priority need ( $p < 0.05$ ) for all but winterization and footwear needs:  $p = 0.475$ ,  $p = 0.373$ .

<sup>51</sup> This question was multi-selection, so results do not sum to 100%.

<sup>52</sup> Results for in-camp IDP households regarding registration with the Ministry of Displacement and Migration (MODM), restrictions on movement, and access to a community leader are not available, due to lack of comparability of indicators between the Camp Profiling and MCNA V datasets.

cards were the most frequently reported form of documentation missing amongst in-camp IDP households (5%), followed by citizenship certificates (4%) and passports (3%).<sup>53</sup>

Figure 14: Proportion of households with one or more members missing one or more forms of civil documentation, by population group<sup>54</sup>

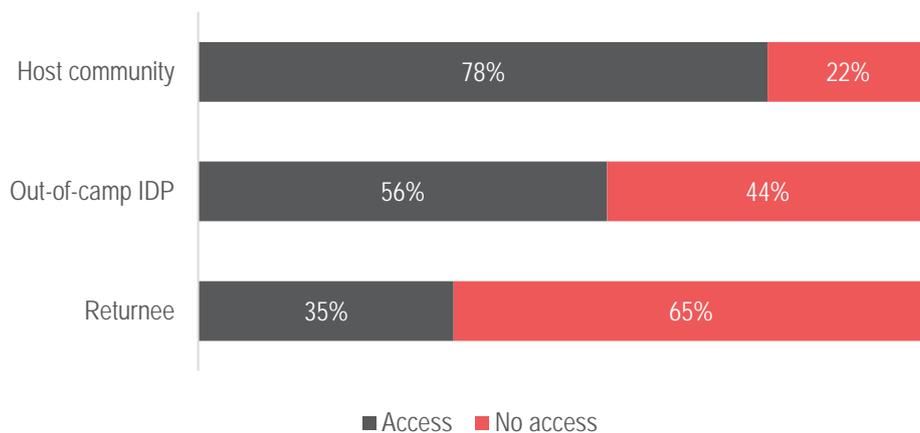


All population groups other than host community households were asked if they were registered with the Ministry of Displacement and Migration (MODM). Amongst returnee households, 92% reported that their returnee status was registered with MODM. For displaced households, 90% of out-of-camp IDP households reported that their displacement status was registered with MODM.

No returnee or host community households reported any restrictions on their movement in the 30 days preceding data collection. Only 1% of out-of-camp IDP households reported any movement restrictions in the 30 days prior. These findings are in line with the relatively high proportion of households reporting not to be missing any civil documentation, as well as the high proportion of returnee and out-of-camp IDP households who are formally registered with Iraqi authorities.

With respect to community engagement, **host community households most frequently reported having regular and personal access to a community leader (78%)**, compared with 56% of out-of-camp IDP and 35% of returnee households. Across all groups in accessible areas, perceived levels of trust in community leaders was high, as indicated by 97% of returnee, 96% of host community, and 91% of out-of-camp IDP households.<sup>55</sup>

Figure 15: Proportion of households reporting access to a community leader, by population group



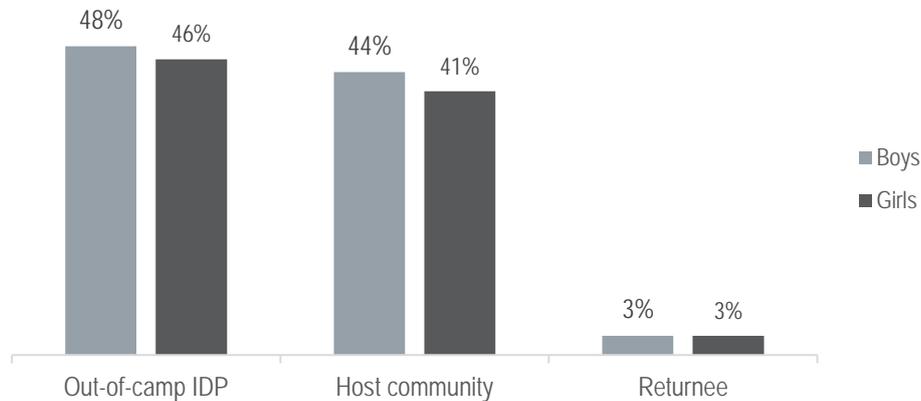
<sup>53</sup> The assessment included 13 different forms of civil documentation: birth certificate, citizenship certificate, death certificate, divorce certificate, driver's license, food ration card, graduation certificate, guardianship certificate, ID card, information card, marriage certificate, passport and trusteeship certificate. Respondents could select multiple forms of documentation during the interview.

<sup>54</sup> The association between missing civil documentation and population group was found to be statistically significant (Pearson's Chi-Square, p-value =0.00).

<sup>55</sup> The association between access to a community leader and population group, as well as perceived trust in community leader and population group was found to be statistically significant.

Across all population groups in accessible areas, less than half of households with children reported access to safe spaces outside of the home for boys and girls. This lack of access was highest amongst returnee households, where only 3% reported access to safe spaces for both boys and girls. In contrast, between 41% and 48% of out-of-camp IDP and host community households reported access to safe spaces for boys and for girls.

Figure 16: Proportion of households reporting access to safe spaces for boys and girls, by population group<sup>56</sup>



### Communities in hard-to-reach areas<sup>57</sup>

In all hard-to-reach districts where returnees were assessed, KI responses as to whether returnee households were missing any civil documentation varied. Only in the districts of Baiji, Balad, and Tilkaif did all KIs report that returnee households were not missing any civil documentation. In newly retaken and conflict areas, all KIs in Hawiga and Kirkuk reported that non-displaced households were missing at least one form of civil documentation.

In nearly all hard-to-reach districts where returnees were assessed, KIs reported that they did not experience any restrictions on their movements in the 30 days preceding data collection. However, within the districts of Samarra, Shirqat, Telafar, Tikrit, and Tooz, KI responses were mixed. For non-displaced populations in newly retaken and conflict areas, no restrictions on movement were reported in the 30 days preceding data collection in Mosul and Shirqat, while in the districts of Baaj, Haditha, Hawiga, and Telafar responses varied.

Regarding access to safe spaces for children, in 9 of 16 hard-to-reach districts where returnee populations were assessed, access was reportedly unavailable: Abu Ghraib, Baiji, Balad, Daur, Haditha, Heet, Mosul, Sinjar, and Tooz. In all remaining districts, responses were mixed. With respect to non-displaced populations assessed in newly retaken and conflict areas, access to safe spaces for children was reportedly unavailable in Baaj and Hawiga, while in the remaining four districts of Haditha, Mosul, Shirqat, and Telafar, responses were again mixed.

<sup>56</sup> The association between access to safe spaces and population group was found to be statistically significant between returnee households and the other population groups, but not between host community and out-of-camp IDP households.

<sup>57</sup> Questions regarding access to and trust in community leaders, as well as household registration with MODM, were not included in the community level portion of the assessment.

## Shelter

This section outlines findings regarding the types of settlements and shelters inhabited by conflict-affected populations, as well as their occupancy status, risk of eviction and adequacy of shelters. Additionally, this section looks more closely at the provision of both NFIs and shelter assistance, including in-kind repair items and cash for rent received in the six months preceding data collection. The specific NFIs included in the assessment consist of 15 basic household items. Where possible, these items have been grouped to show the level of seasonal need relevant to winterisation and summerisation.

### Settlement and shelter type

#### Households in accessible areas

The majority of households from all population groups live in residential housing, as reported by 95% of host community, 75% of returnee and 64% of out-of-camp IDP households.<sup>58</sup> However, around one-quarter of both returnee and out-of-camp IDP households live in collective centres, and 9% of out-of-camp IDP households live in informal sites, indicating a greater vulnerability with respect to settlement conditions amongst these population groups. In August 2017, the Government of Iraq Ministry of Planning and UN-Habitat identified over 3,000 informal sites hosting IDPs across 12 governorates,<sup>59</sup> which further highlights the comparatively higher shelter needs of displaced groups.

Table 10: Settlement type, by population group<sup>60</sup>

	Host community	Returnee	Out-of-camp IDP
Residential housing	95%	75%	64%
Collective centre	5%	25%	28%
Informal site	0%	0%	9%
Transit site	0%	0%	0%
Camp	0%	0%	0%

All returnee households and 97% of host community households reported living in houses, whereas only 66% of out-of-camp IDP households indicated so. The remaining one-third of out-of-camp IDP households live in apartments (12%), unfinished buildings (9%), religious buildings (6%) or other shelter types (7%) which include public buildings more generally, abandoned buildings, containers or tents. These findings again reveal the higher proportion of out-of-camp IDPs residing in shelters that are in critical condition, in particular unfinished buildings which can pose safety hazards.

Table 11: Shelter type, by population group<sup>61</sup>

	Host community	Returnee	Out-of-camp IDP
House	97%	100%	66%
Apartment	3%	0%	12%
Unfinished building	0%	0%	9%
Religious building	0%	0%	6%
Other	0%	0%	7%

<sup>58</sup> Settlement types were classified based on the Iraq Shelter cluster [2017 HRP settlement typologies](#) technical guidance document. **Residential housing** refers to settlement types that are intended for residential use and are normally occupied by host communities. These settlements typically consist of houses or apartments. **Collective centres** refer to pre-existing buildings and structures, both residential and non-residential, used for the collective and communal settlement of the displaced population and normally consisting of more than five families. These facilities are seldom fit for habitation and must be rehabilitated to meet the shelter and WASH needs of residents. **Transit sites** are very temporary settlements mostly used for screening during first-line response activities. The agreed upon standard is that IDPs should not stay longer than necessary at a transit site. **Informal sites** are normally located on the edge of urban or peri-urban areas, which may have already been saturated with IDPs in collective centres or hosted accommodation. Informal sites can consist of open air settlements or other forms such as unfinished, damaged and abandoned buildings.

<sup>59</sup> UN Human Settlements Programme, [The Ministry of Planning and the United Nations Human Settlements Programme \(UN-Habitat\) Launched the Results of the Identification of Informal Settlements in Iraq](#), August 2017.

<sup>60</sup> The difference in findings between population groups and settlement types was found to be statistically significant using the Chi-Square test: 2698.005 (P-value= 0.00).

<sup>61</sup> The difference in findings between population groups and shelter types was found to be statistically significant using the Chi-Square test: 2735.51 (P-value=0.00).

Shelter type varied significantly amongst out-of-camp IDPs at governorate level: only 12% of households in Anbar and 25% in Kerbala reside in houses, whereas 31% in Anbar live in non-camp tents and 73% in Kerbala live in religious buildings.<sup>62</sup> In contrast, 89% of out-of-camp IDP households in Babylon and all in Basrah reside in houses.

When disaggregated by whether households had a livelihood source, 73% of out-of-camp IDP households with a livelihood source reported living in a house, compared to 65% of out-of-camp IDP households without a livelihood source, showing a potential link between livelihood status and shelter type amongst some displaced households.

### Communities in hard-to-reach areas

In hard-to-reach areas, residential accommodation was reportedly the main settlement type for non-displaced populations assessed in Shirqat district (Salah al Din), as well as for returnees assessed in Falluja (Anbar), Abu Ghraib (Baghdad), Kirkuk (Kirkuk), Hamdaniya (Ninewa), Sinjar (Ninewa), Telafar (Ninewa), Tilkaif (Ninewa), Baiji, and Samarra districts (Salah al Din). While reports of other settlement types varied across hard-to-reach districts where non-displaced and returnees were assessed, only in Heet district (Anbar) were transit sites identified as one of the settlement types in use by returnees. Collective centres were reportedly in use by returnees assessed in Haditha (Anbar), Heet (Anbar), Mosul (Ninewa), Daur and Tikrit (Salah al Din), while informal sites were a main settlement type for returnees assessed in Haditha (Anbar), Heet (Anbar), Balad, Daur, Shirqat, Tikrit and in Tooz (Salah al Din).

Shelter type was also reported on by KIs, who were asked about the main shelter type for non-displaced and returnees in their community, neighbourhood or village. Houses were the main shelter type reported for both non-displaced and returnee populations across the majority of assessed hard-to-reach districts. Tents were also reported for non-displaced by KIs in Mosul and Telafar (Ninewa). For returnees, shelter in unfinished buildings was reported in Haditha and Heet (Anbar), while shelter in damaged buildings was also reported in Heet and Falluja (Anbar).

## Shelter occupancy

### Households in accessible areas

**The majority of returnee and host community households are residing in shelters that they own, as reported by 92% of returnee and 75% of host community households.** A minority of households – 21% of host community and 7% of returnee – are living in rented accommodation, and 3% of host community households are reportedly squatting. With respect to returnees living in rented accommodation or those being hosted by another family (1%), this could potentially reflect households who have returned to their area of origin but have found their prior homes significantly damaged or destroyed.

**In contrast to returnees and host community households, out-of-camp IDP households are primarily living in rented accommodation (69%) or are squatting (29%).** Due to the inherent impermanence of displacement, it is unsurprising that only 1% of out-of-camp IDP households reported living in owned accommodation. That being said, the fact that over two-thirds of out-of-camp IDP households are renting signals an additional financial burden for this population group in comparison with returnees and host community residents. Further, **of greatest concern is the nearly one-third of out-of-camp IDP households who are reportedly squatting**, signalling an especially vulnerable subset of IDPs living outside of camps who may not have the financial means to rent housing, and who are instead placing themselves at greater risk of eviction or other tenancy disputes.

<sup>62</sup> In the south of Iraq, and in Kerbala and Najaf specifically where important Shi'a religious sites are located, it is more commonly seen that IDPs are residing in religious buildings, referred to as Husseini.

Table 12: Occupancy arrangement, by population group<sup>63</sup>

	Returnee	Host community	Out-of-camp IDP
Owned	92%	75%	1%
Rented	7%	21%	69%
Squatting	0%	3%	29%
Hosted	1%	0%	1%
Other	0%	1%	0%

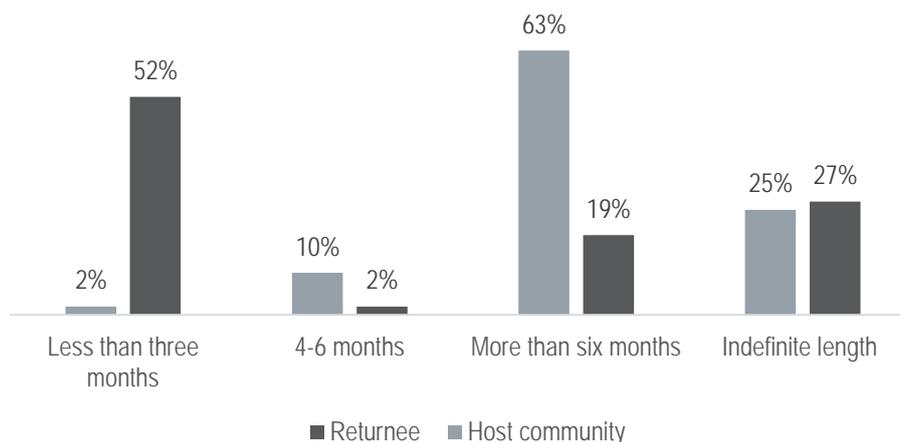
When disaggregated by the sex of the head of household, **11% of female-headed returnee households were reportedly squatting, compared with only 1% of male-headed returnee households.** Additionally, a higher proportion of male-headed returnee households owned their accommodation compared with female-headed returnee households – 90% versus 79%. Differences between male and female-headed households regarding occupancy arrangement were minimal amongst the other population groups.

Table 13: Occupancy arrangement, by sex of head of household and by population group<sup>64</sup>

	Returnee		Host community		Out-of-camp IDPs	
	Female	Male	Female	Male	Female	Male
Owned	79%	90%	70%	75%	0%	2%
Rented	8%	8%	23%	21%	68%	71%
Squatting	11%	1%	7%	3%	25%	26%
Other	2%	1%	0%	1%	7%	1%

**Of those households living in rented accommodation, just over one-third of returnee and host community households reported possessing a valid tenancy agreement – 37% and 35%, respectively.**<sup>65</sup> Of these households with a valid agreement, the majority of host community households reported the length of the agreement to be more than six months (63%), compared to returnee households where the majority reported an agreement of less than three months (52%). These findings indicate that returnee households may be less able to access long-term or stable types of accommodation.

Figure 17: Length of tenancy agreement, of those returnee and host community households living in rented accommodation



<sup>63</sup> The difference in findings between population groups and shelter occupation was found to be statistically significant using the Chi-Square test: 4.151 (p-value=0.00).

<sup>64</sup> The difference in findings between population groups, disaggregated by male and female-headed households and shelter occupation was found not to be statistically significant. Host community (Chi-Square: 4.151 with p-value= 0.656), Out-of-camp IDP (Chi-Square: 8.878 with p-value= 0.031) and returnee (Chi-Square 20.608 with p-value=0.000).

<sup>65</sup> Questions regarding the possession of a tenancy agreement were only asked to host community and returnee households, as these questions were not included in the prior MCNA IV questionnaire.

Of those households *not* living in owned accommodation, 4% of out-of-camp IDP households reported that they were under threat of eviction at the time of data collection, compared to 1% of host community households and less than 1% of returnee households.<sup>66</sup>

### Communities in hard-to-reach areas<sup>67</sup>

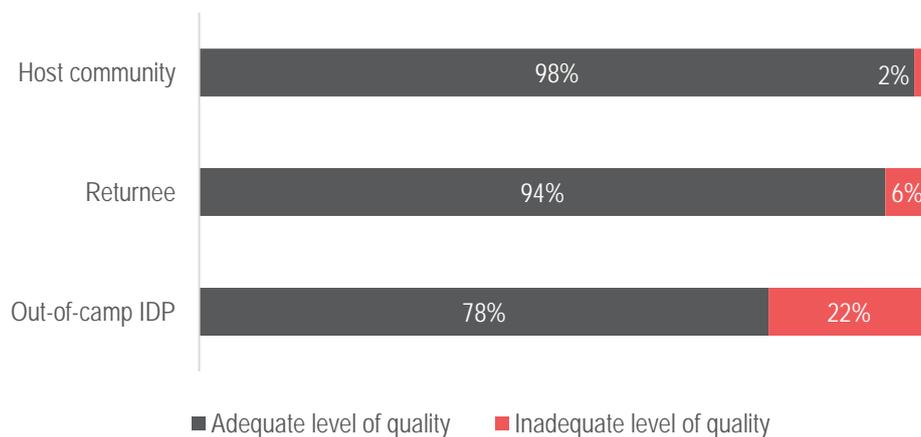
In hard-to-reach areas, the proportion of the non-displaced population estimated to be under threat of eviction varied across the assessed newly retaken and conflict districts. With regard to returnees in hard-to-reach areas, KIs estimated that less than 25% of the returnee population in their communities was at risk of eviction in all districts except Falluja (Anbar), Hadiitha (Anbar), Heet (Anbar), Kirkuk (Kirkuk), Hamdaniya (Ninewa), Sinjar (Ninewa), Samarra, Shirqat and Tooz (Salah al Din), where responses varied.

## Shelter quality

### Households in accessible areas

Across all population groups, the majority of households perceived the shelter they were inhabiting to be of an adequate level of quality. This was reported by 98% of host community, 94% of returnee and 78% of out-of-camp IDP households. These findings show that a larger proportion of out-of-camp IDP households found their shelter quality to be inadequate, in comparison with returnee and host community households.

Figure 18: Perceived quality of shelter, by population group<sup>68</sup>



Of those households who perceived their shelter quality to be inadequate, shelter issues and repair needs varied between population groups. Amongst out-of-camp IDP households, the two most frequently reported issues were **dampness (52%)** and **broken windows (42%)**. However, approximately one-third of out-of-camp IDP households also reported a **lack of privacy and that their shelters were too small, indicating problems with overcrowding**. A further 19% reported that their shelters contained unhygienic WASH facilities. The most frequently reported issues amongst returnee households were primarily **broken windows (81%)**, **leaking roofs (72%)** and **dampness (69%)**.

<sup>66</sup> The difference in findings between population groups and the threat of eviction was found to be statistically significant. Chi-square: 234.98 (P-value = 0.00).

<sup>67</sup> Questions regarding shelter occupancy arrangements were not asked at community level, as it was deemed that accurate information regarding this would be difficult for KIs to provide.

<sup>68</sup> The difference between population groups and quality was found to be statistically significant at the national level using the Pearson's and Rao & Scott adjustment test (p values for all options are less than 0.001).

Table 14: Primary shelter issues and repair needs, by population group<sup>69</sup>

	Returnee	Host community	Out-of-camp IDP
Broken windows	81%	40%	42%
Leaking roof	72%	50%	0%
Dampness	69%	20%	52%
Rats and/or cockroaches	15%	30%	36%
No electricity	12%	20%	0%
Lack of privacy	13%	20%	33%
Cracks	18%	10%	0%
Too small	1%	0%	35%
Lack of heating	5%	0%	31%
Unhygienic WASH facilities	3%	0%	19%
Other	0%	0%	3%

### Communities in hard-to-reach areas

In hard-to-reach areas, perceptions of shelter adequacy varied across districts and between non-displaced and returnee population groups. In Falluja (Anbar) and Abu Ghraib (Baghdad), and in the majority of districts in Salah al Din where returnees were assessed, the proportion of the returnee population estimated not to have access to adequate shelter (i.e. weatherproof, safe and secure, adequate space) varied, with some KIs reporting as high as 75% not having access to adequate shelter (Baiji, Balad, Daur, Shirqat).

In all assessed districts in Ninewa, up to half of the returnee population was estimated not to have access to adequate shelter. This was also reported for returnees assessed in Haditha and Heet (Anbar), Samarra (Salah al Din) and Tooz (Salah al Din), as well as for non-displaced assessed in Haditha (Anbar), Baaj (Ninewa) and Shirqat (Salah al Din).

In Kirkuk (Kirkuk) and Tikrit (Salah al Din), there were no reports of more than 25% of the assessed returnee population not having access to adequate shelter.

### Shelter assistance received

#### Households in accessible areas

The majority of households across all population groups reported that they had not received any shelter assistance in the six months preceding data collection, as indicated by 97% of host community, 91% of returnee and 79% of out-of-camp IDP households. However, these findings closely mirror the proportion of households in each population group who reported that their shelters were of an adequate quality (98%, 94% and 78%, respectively), which may indicate that assistance was not received because the majority of households living in accessible areas did not need it.

<sup>69</sup> Respondents could select multiple response options. Figures presented for returnee and host community groups are indicative rather than statistically representative, as they are based on responses from a small subset of the sample population who found their shelters to be inadequate (6% and 2%).

Table 15: Proportion of households having received shelter assistance in the six months preceding data collection, by population group<sup>70</sup>

	Host community	Returnee	Out-of-camp IDP
No assistance	97%	91%	79%
Rental support	2%	0%	9%
Tarpaulin	1%	5%	6%
Timber	0%	0%	3%
Door	0%	1%	3%
Window	0%	1%	3%
Other	1%	3%	7%

### Communities in hard-to-reach areas

In hard-to-reach areas, no shelter support was reported for non-displaced populations in Hawiga (Kirkuk) and Baaj (Ninewa) and for returnees in Kirkuk (Kirkuk). Reports of shelter support varied across the other hard-to-reach districts where non-displaced and returnee populations were assessed.

### Non-food items<sup>71;72</sup>

#### Households in accessible areas

The vast majority of households in all population groups reported possessing a number of basic NFIs at the time of data collection, such as cooking stoves, cooking fuel, kitchen sets and lighting. Only 67% of out-of-camp IDP households were in possession of fuel storage, and 75% were in possession of winter clothing. However, this may be explained by the timing of data collection, as out-of-camp IDP households were assessed in May and the other population groups in August 2017. As such, maintaining heating fuel and other winter NFIs may have been less of a priority for households during the spring and summer.

The assessment also asked households how many blankets, mattresses and water jerry cans they had. At the national level, each household had an average of 9 blankets, 8 mattresses and 2 water jerry cans.

Table 16: Proportion of households in possession of basic NFIs, by population group

	Winterisation items				Summerisation items		
	Winter clothes	Fuel canister	Heating fuel	Fan	Fridge	Air Water Cooler	Cool box
Returnee	97%	96%	90%	97%	95%	90%	79%
Host community	97%	90%	89%	95%	98%	96%	65%
Out-of-camp IDP	75%	67%	74%	72%	n/a	n/a	52%

### Communities in hard-to-reach areas

In newly retaken and conflict districts where non-displaced populations were assessed, reported access to blankets and water jerry cans varied. Access to mattresses also varied, except in Kirkuk where over 75% of the assessed non-displaced population reportedly had access to mattresses.

Most non-displaced households assessed in Hawiga, Mosul, Telafar and Shirqat reportedly had access to a cooking stove, while in Haditha and Baaj access varied. Access to other non-seasonal NFIs also varied across districts. Only a minority of non-displaced household assessed in Hawiga and Ba'aj reportedly had access to light after

<sup>70</sup> Respondents could select multiple response options.

<sup>71</sup> Seasonal NFIs were grouped by winter versus summer needs. Winterisation items included: heating fuel, fuel canisters, and winter clothes. Summerisation items included: fans, fridges, air water coolers, and cool boxes. Non-seasonal NFIs included blankets, mattresses, water jerry cans, cooking stoves, cooking fuel, kitchen sets, and lighting.

<sup>72</sup> Questions related to NFIs were not asked to in-camp IDPs.

nightfall. In Hawiga it was also reported that only a minority of the assessed non-displaced households had access to cooking fuel. Across all assessed non-displaced populations in Mosul, Telafar and Shirqat districts, most households reportedly had access to a kitchen set.

In all three hard-to-reach districts in Anbar governorate (Falluja, Haditha and Heet) where returnees were assessed, the proportion of the returnee population estimated not to have adequate access to blankets, mattresses and water jerry cans varied, with some KIs reporting as high as 75% not having access to either of these items. This was also reported for returnees assessed in Hamdaniya (Ninewa) and Balad (Salah al Din). Access to jerry cans in particular was most concerning in Samarra (Salah al Din) and Sinjar (Ninewa), where less than 25% and less than 50% of the assessed returnee population was estimated to have adequate access, respectively.

In Mosul, Telafar and Tilkaif (Ninewa), access to blankets, mattresses and water jerry cans varied, with more than half of the assessed returnee population estimated to have adequate access to blankets in Mosul and Telafar, and to both blankets and mattresses in Tilkaif. In Abu Ghraib, Baiji and Daur, more than half of the assessed returnee population was estimated to have access to blankets, mattresses and water jerry cans.

Access to these NFIs appeared to be relatively better in Kirkuk (Kirkuk governorate), Shirqat and Tikrit (Salah al Din), where more than 75% of the assessed returnee population was estimated to have adequate access to blankets and mattresses. In Tooz, more than 75% of the assessed returnee population was estimated to also have adequate access jerry cans, in addition to blankets and mattresses.

Across all hard-to-reach districts where returnees were assessed, most returnee households reportedly had access to a cooking stove. Access to cooking fuel was reported to be relatively lower in Kirkuk, where most returnee households reportedly did not have access. Most returnee households assessed in hard-to-reach areas reportedly had access to a kitchen set, except in Heet and Abu Ghraib where results varied. Access to light after nightfall also varied across assessed districts, with most returnee households assessed in Kirkuk reported not to have access.

Access to winter items (heating fuel, fuel storage and winter clothing) varied by population group and by district. In Hawiga and Baaj, most households in assessed non-displaced populations were reported not to have access to heating fuel, while in the remaining newly retaken and conflict districts where non-displaced were assessed, reported access varied.

For returnees assessed in hard-to-reach areas, no access to heating fuel was reported for most households in the returnee populations assessed in Kirkuk, Sinjar, Samarra and Shirqat, while most households were reported to have access in the assessed returnee populations in Fallujah, Abu Ghraib, Baiji and Balad. With regard to fuel storage, most households in assessed returnee populations were reported to have access in Abu Ghraib, Kirkuk and Baiji. In the majority of hard-to-reach districts where returnees were assessed, most returnee households were reported to have access to winter clothes, with a higher degree of variation in Heet, Hamdaniya, Mosul, Sinjar, Telafar, Tilkaif, Samarra and Shirqat.

Access to summerisation items (fans, air water coolers, fridges and summer clothing) also varied. While most households in assessed non-displaced populations in Hawiga and Ba'aj reportedly had no access to fans, air water coolers or fridges, they were reported to have access to coolboxes instead. Access to summer clothing was reported for most households in assessed returnee populations in Haditha.

KIs reported that most returnee households assessed in Kirkuk had no access to fans, air water coolers and fridges, while most returnee households in Samarra and Shirqat lacked access to air water coolers. In the majority of hard-to-reach districts where returnees were assessed, most returnee households were reported to have access to summer clothing, except in Abu Ghraib, Hamdaniya and Tilkaif where access reportedly varied.

## WASH

This section outlines findings related to WASH. First, access to improved and unimproved water sources<sup>73</sup> is discussed, including water sources, experiences with shortages, and the types of coping strategies used when access to sufficient and safe water is limited. Then, the types of latrines available and their adequacy is evaluated, looking at whether communal and public latrines are equipped with locks and lights, and if they are sex-segregated. Finally, this section explores the forms of solid waste management available.

### Primary sources of water

#### Households in accessible areas

For all population groups other than in-camp IDP households, the primary source of drinking water was through an internal private network, as indicated by 79% of host community, 60% of returnee and 59% of out-of-camp IDP households.<sup>74</sup> The majority of in-camp IDP households used an external communal water network (53%)<sup>75</sup>, and around one-fifth used an internal private network. The use of water trucking and dug wells as a primary water source was very minimal across all population groups.

One-third of returnee households use bottled water purchased from shops as a primary source, reflecting a lack of access to potable water sources inside the home amongst a significant portion of this population group. This was also the case for 16% of out-of-camp IDP households and 15% of host community households. According to an August 2017 Mosul Weekly Protection Update, the United Nations High Commissioner for Refugees (UNHCR) noted that returnees in Makhmur district were in need of water assistance due to infrastructure damage and destruction,<sup>76</sup> which likely also applies to other areas of Iraq that are seeing high levels of returns. Resorting to buying water from shops adds a financial burden to households, and leads to a reliance on markets, often lacking sufficient goods due to the breakdown of supply chains.<sup>77</sup>

Table 17: Most frequently cited primary source of drinking water, by population group<sup>78</sup>

	Internal private network	External communal network	Bottled water (shops)	Internal communal network	Water trucking	Dug well
Host community	79%	2%	15%	0%	1%	2%
In-camp IDP	22%	53%	3%	11%	0%	0%
Out-of-camp IDP	59%	19%	16%	0%	3%	2%
Returnee	60%	2%	33%	0%	2%	1%

With respect to all-purpose water usage such as for cooking, washing and bathing, the majority of households in accessible areas primarily used private water networks – again with the exception of in-camp IDP households. Ninety percent (90%) of both host community and returnee households used a private network, as well as 72% of out-of-camp IDP households and 25% of in-camp IDP households. Only a small proportion of households reported using surface water and unimproved water sources, such as the use of a river or spring by 5% of host community and 3% of returnee households. This could indicate that the difficulties faced in accessing water are primarily related to obtaining potable water, as reflected by the higher proportions of households buying bottled water for drinking purposes, across all population groups.

<sup>73</sup> Water types as classified by the [WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation \(JMP\)](#)

<sup>74</sup> "Internal private network" refers to a water entry point inside the shelter connected to a private water source (such as a water tank on top of the shelter).

<sup>75</sup> "Internal communal network" refers to a water entry point inside the shelter that is connected to a communal water source (such as a water tank for an entire neighbourhood). "External communal network" refers to a water entry point outside of the shelter that is connected to a communal water source (again, such as a neighbourhood tank).

<sup>76</sup> UNHCR, [Mosul Weekly Protection Update, 4-10 August 2017](#).

<sup>77</sup> Malteser International, [Rapid Needs Assessment, Ninewa governorate, June 2017](#).

<sup>78</sup> There is a statistically significant association between population groups and the sources of drinking water reported. Significance test results: Persons Chi-Square = 2396.02. p value = 0.000.

Table 18: Most frequently cited primary source of all-purpose water, by population group<sup>79</sup>

	Internal private network	Internal communal network	External communal network	River spring	Dug well	Water trucking	Bottled water (shops)
Host community	90%	2%	0%	5%	2%	1%	0%
In-camp IDP	25%	17%	57%	0%	0%	0%	0%
Out-of-camp IDP	72%	21%	0%	1%	3%	1%	1%
Returnee	90%	3%	0%	3%	1%	2%	1%

### Communities in hard-to-reach areas

Across all newly retaken and conflict districts where non-displaced populations were assessed, **KIs reported reliance on a variety of primary drinking water sources**, with the exception of Baaj (Ninewa) and Shirqat (Salah al Din) districts, where the assessed non-displaced population reportedly relied primarily on water trucking and communal networks respectively. **All returnee populations assessed in Kirkuk (Kirkuk) relied mainly on dug wells** while those in Hadiitha (Anbar) mainly relied on communal networks. In the remaining hard-to-reach districts where returnees were assessed, a variety of primary drinking water and general-purpose water sources were reported.

Findings were similar for the primary sources of all-purpose water reported. In the majority of newly retaken and conflict districts where non-displaced populations were assessed, KIs reported reliance on a variety of general-purpose water sources, whilst in Shirqat (Salah al Din), the assessed non-displaced population primarily used communal networks. Similarly to drinking water sources, the **returnee population assessed in Kirkuk (Kirkuk) was reportedly primarily relying on dug wells in order to access household water**. Private networks were reported to be the main source of household water for the returnee population assessed in Abu Ghraib (Baghdad) and Baiji (Salah al Din).

### Water usage and shortages<sup>80</sup>

#### Households in accessible areas

**Across all population groups, the vast majority of households reported having access to a sufficient amount of water during winter (20 litres), as indicated by 99% of host community, 97% of returnee and 96% of out-of-camp IDP households.**<sup>81</sup> These figures dropped slightly for returnee and host community households when reporting access to sufficient water during summer (50 litres) – 95% and 94% respectively.

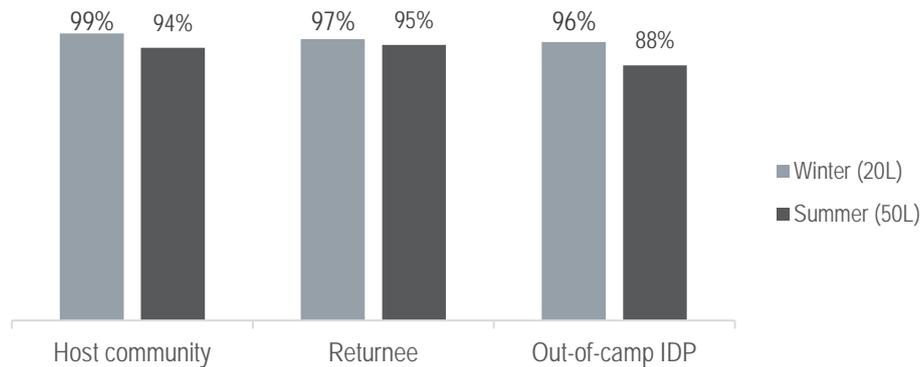
**However, only 88% of out-of-camp IDP households reported having access to a sufficient amount of water during summer, suggesting a comparatively higher water insecurity.** This could potentially be linked to a higher proportion of IDP households out of camps sourcing their water through communal networks (21%), whereas only 3% of returnee and 2% of host community households used communal networks.

<sup>79</sup> There is a statistically significant association between population groups and the sources of household water reported. Significance test results: Persons Chi-Square= 2487.87. p value = 0.000.

<sup>80</sup> The minimum amount of water sufficient for drinking, hygiene and cooking purposes is set at 20 litres per person per day during the winter and 50 litres per person per day during the summer, in accordance with [Sphere standards](#) and WASH Cluster Minimum Standard. The question was not asked to in-camp IDP households.

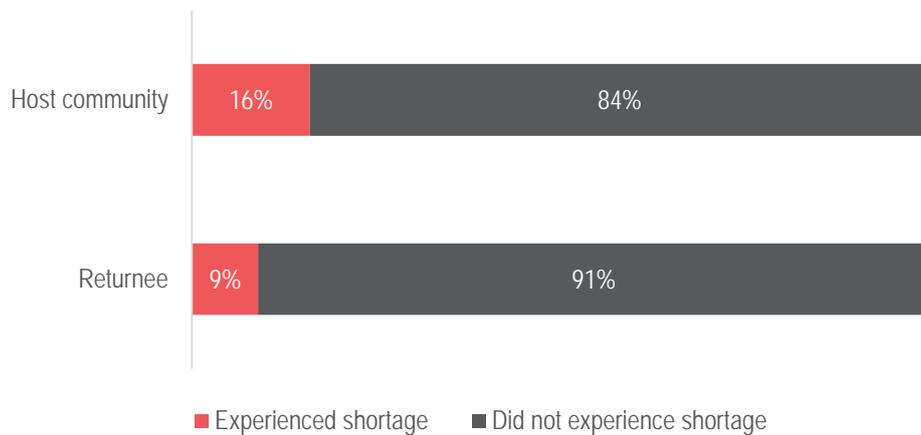
<sup>81</sup> These findings are reflective of the household's perception of their water needs. The actual amount of water used per household is not verified.

Figure 19: Proportion of households reporting having sufficient water during summer and winter, based on recommended number of litres, by population group<sup>82</sup>



A significant proportion of host community and returnee households reported experiencing water shortages lasting 24 hours or more in the 30 days preceding data collection – 18% and 11%, respectively. This reflects a lack of adequate and reliable sources of drinking water amongst these households, resulting in the use of water consumption coping strategies during shortages. With regards to host communities, this could be an indication that infrastructure and services are strained by the influx of IDPs in the previous months and years.<sup>83</sup>

Figure 20: Proportion of households that experienced water shortages lasting over 24 hours in the 30 days preceding data collection, by host community and returnee population groups<sup>84</sup>



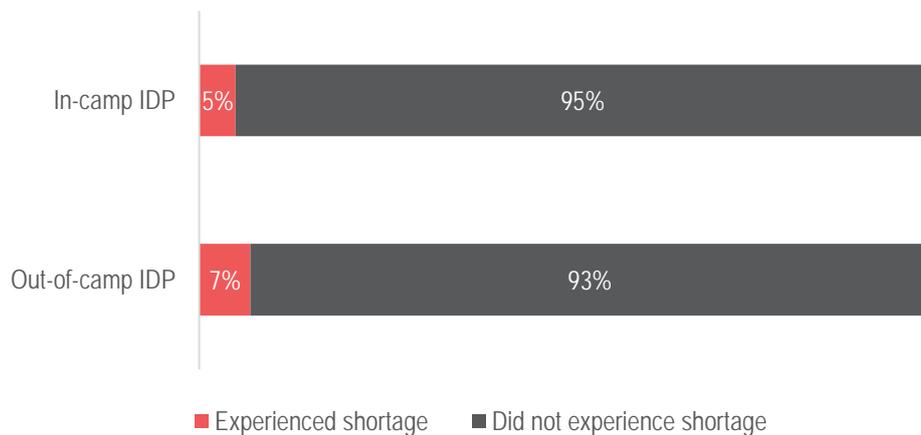
Relatively low proportions of in-camp and out-of-camp IDP households reported having experienced water shortages in the month preceding data collection. **Seven percent (7%) of out-of-camps IDP households reported so compared to 5% of in-camp IDP households.**

<sup>82</sup> There is a statistically significant association between the population groups and the sufficiency of water during summer and winter seasons, Significance test results using the Pearson's and Rao & Scott adjustment test (T-test 0.014).

<sup>83</sup> Thomson Reuters Foundation, [As climate threats grow, Iraq battles a new enemy: water shortages](#), 12 December 2017.

<sup>84</sup> There is a statistically significant association between population groups and support from local NGOs. Significance test results: chi-squared p values > 0.05. Significance test results: Persons Chi-Square= 0.48. p value = 0.000.

Figure 21: Proportion of households that experienced water shortages lasting over 24 hours in the 30 days preceding data collection, by in-camp and out-of-camp population groups<sup>85</sup>



### Communities in hard-to-reach areas

In Hawiga and Baaj districts, KIs reported that over 75% of the non-displaced population in their communities had sufficient access to water during the winter (20 litres per person per day). Hawiga was also the only district where over 75% of the assessed non-displaced population was reported to have sufficient access to water during the summer (50 litres per person per day).

Amongst returnees assessed in hard-to-reach areas, only in the district of Kirkuk was over 75% of the returnee population reported to have sufficient access to water, in either the winter or the summer season.

Reports of water shortages varied for both non-displaced and returnee populations in hard-to-reach areas, reflecting a lack of sufficient water infrastructure and service provision. In Hawiga district however, less than 25% of the non-displaced population assessed had reportedly experienced water shortages of 24 hours and more in the month preceding data collection. The same was reported for the returnee population assessed in Haditha (Anbar), Kirkuk (Kirkuk), Mosul (Ninewa), Telafar (Ninewa) and Tikrit (Salah al Din).

### Water shortage coping strategies

#### Households in accessible areas<sup>86</sup>

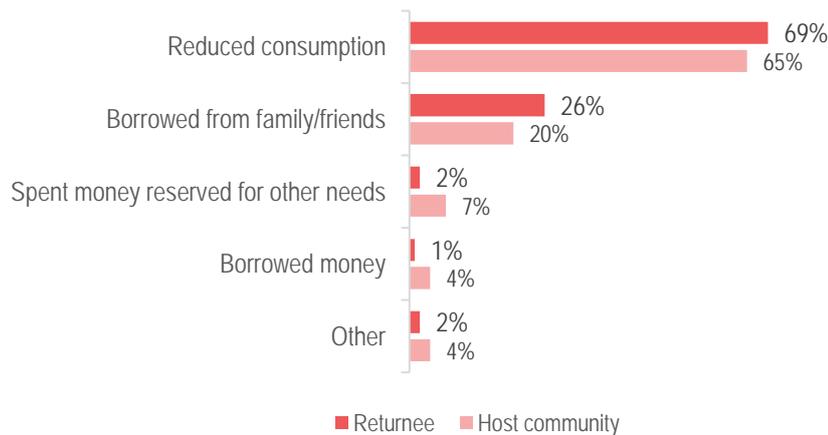
Households that reported water shortages in the 30 days preceding data collection were asked what coping strategies they used in the 30 days preceding data collection in order to deal with a lack of sufficient access to drinking water.

**Reducing the consumption of water was the most frequently reported coping strategy across host community and returnee households**, by 69% out of the returnee and 65% host community households who reported water shortages. A minority of host community households reported resorting to debt in order to be able to meet their water needs (4%).

<sup>85</sup> Findings for out-of-camp and in-camp IDP household are presented separately due to the specific time-frame of the question. There is a statistically significant association between population groups and support from local NGOs. Significance test results: chi-squared p values > 0.05. Significance test results Persons Chi-Square= 4.276. p value = 0.000.

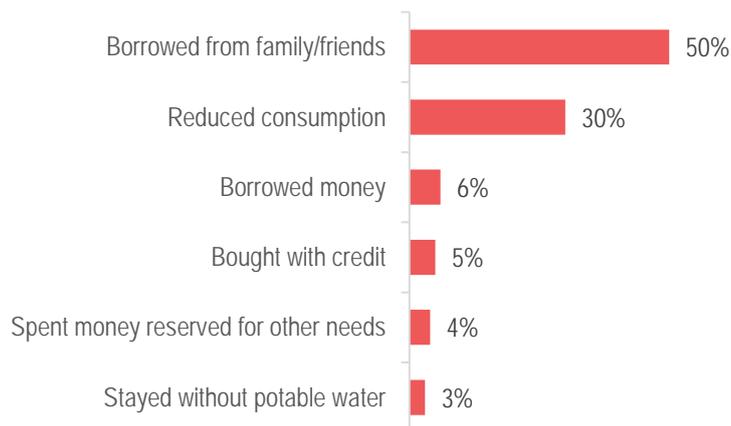
<sup>86</sup> Question not asked to in-camp IDP households.

Figure 22: Most frequently reported coping strategies when faced with a lack of safe drinking water, of households reporting drinking water shortages in the 30 days preceding data collection, host community and returnee<sup>87</sup>



Out-of-camp IDP households frequently borrowed water from friends and family in order to cope (50%). The second most common coping strategy reported was to reduce consumption (30%) while some **also resorted to financially damaging coping strategies such as taking on debt in order to afford safe drinking water (5%)**.

Figure 23: Most frequently reported coping strategies when faced with a lack of safe drinking water, of households reporting drinking water shortages in the 30 days preceding data collection, out-of-camp IDP



### Communities in hard-to-reach areas

In most hard-to-reach districts where non-displaced and returnee populations were assessed, **KIs reported reliance on a variety of coping strategies to deal with a lack of sufficient drinking water**. Reducing the consumption of water was a coping strategy reported in all hard-to-reach districts where non-displaced and returnee populations were assessed. All non-displaced populations assessed in Baaj (Ninewa) were reported to resort to reducing the consumption of water as a coping strategy to deal with the lack of water. This was also reported for all returnee populations assessed in Kirkuk (Kirkuk) and Tikrit (Salah al Din).

### Water quality and treatment

#### Households in accessible areas

When asked what method was used to treat water, **only 10% of returnee households responded that they did not need to treat their water, indicating a significant gap in returnee households' access to safe water**. This is also the case for 44% of out-of-camp IDP and 58% of host community households. Out of those who reported their water needing to be treated, using water filters was the most common method used, with 57% of returnee and 55% of host community households reporting so, followed by chlorination with 34% of returnee households. Finally,

<sup>87</sup> There is a statistically significant association between population group and the strategies to cope with a lack of access to water. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 236.5. p value = 0.000. Excluding N/A responses.

a significant minority of households reported not treating their water despite needing to do so, as was the case for 31% of host community and 25% of out-of-camp IDP households. This may indicate a greater lack of awareness regarding the need to treat water, lack of knowledge regarding how to do so, or the lack of means to apply a treatment method. This is supported by the findings from UNICEF's Rapid Response Mechanism (RRM) Rapid Multi-Cluster Assessment, where the lack of access to water treatment options is reported as a priority for needs related to WASH.<sup>88</sup>

Figure 24: Proportion of households reporting their water to be safe to drink, by population group<sup>89</sup>

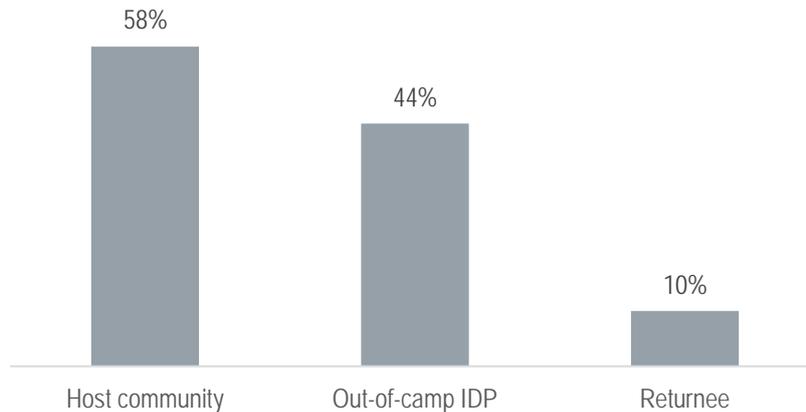


Table 19: Water treatment methods, if used, of households reporting their water to be unsafe to drink, by population group

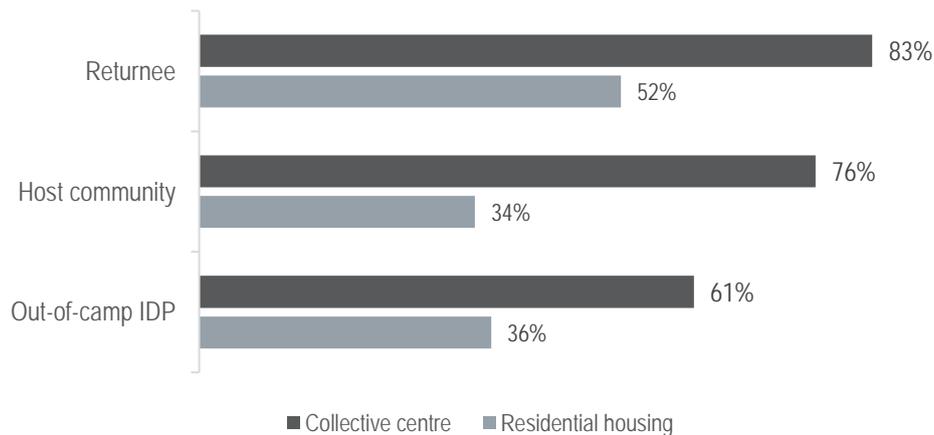
	Filter	Chlorination	Boiling	None
Host community	55%	14%	0%	31%
Out-of-camp IDP	23%	13%	13%	25%
Returnee	57%	34%	3%	6%

Findings show that the type of shelter occupied impacts the type of water sources available as well as the quality. Households living in residential housing less frequently reported that their water was not safe to drink, compared to those living in collective centres. This is most visible for host community households, where 76% of households in collective centres reported the water not being potable compared to 34% of households in residential housing.

<sup>88</sup> UNICEF, [RRM Rapid Multi-Cluster Assessment, August 2017](#).

<sup>89</sup> There is a statistically significant association between population groups for the following variables: filter, safe to drink, none, other. Chi-squared,  $p = 0.05$ . All other variables are statistically significantly different: Chi-squared,  $p = >0.05$ .

Figure 25: Proportion of households reporting that water is not safe to drink, by most frequently reported settlement types, by population groups in accessible areas<sup>90</sup>



### Communities in hard-to-reach areas

While the non-displaced populations assessed in Hawiga (Kirkuk) and Baaj (Ninewa) were reported not to treat their water before consumption, the non-displaced populations assessed in Haditha (Anbar), Mosul (Ninewa), Telafar (Ninewa) and Shirqat (Salah al Din) were reported to use several methods to treat their water, including boiling, chlorination and using a filter, with those in Shirqat reportedly using all three methods. This could be indicative of the water being of lesser quality.

For returnees in hard-to-reach areas, findings varied across districts. The returnees assessed in Heet (Anbar) were reported to treat their water, unlike those in Kirkuk (Kirkuk) who reportedly did not. The use of filters and chlorination were the most reported treatment types: filtering was reported for all returnee populations assessed in Baiji and Balad (Salah al Din) and chlorination for all in Samarra and Tooz (Salah al Din).

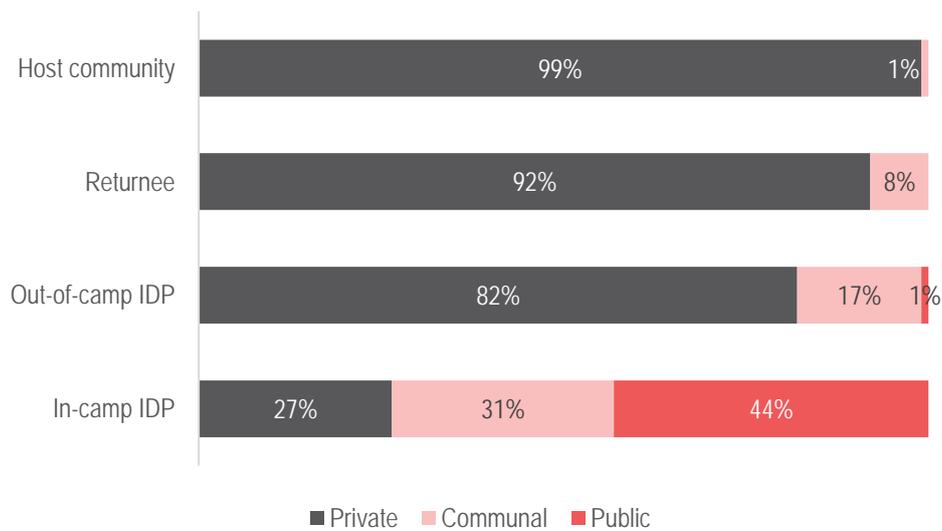
### Latrine types

#### Households in accessible areas

A large majority of host community, returnee and out-of-camp IDP households had access to private latrines: 99%, 92% and 82%, respectively. **IDP households living in camps most commonly used communal or public latrines,<sup>91</sup> due to the design of WASH infrastructure within most camps.** This is reflected in the 44% of households in camps using public latrines and 31% using communal latrines. This is also the case, to a lesser extent, for out-of-camp IDP households, with 17% reportedly using communal latrines.

<sup>90</sup> These findings are based on the responses of a subset of the sample population and therefore should be interpreted as indicative rather than statistically representative. Findings for this indicator were found to be statistically significant using a T-test.

<sup>91</sup> Communal latrines are defined as those which are shared between a defined group of people. This can be an area of the camp or a selection of shelters in non-camp settings. Public latrines are defined as those which are available for anyone to use.

Figure 26: Type of latrines used, by population group<sup>92</sup>

Of those in-camp IDP households using either public or communal latrines, **only 25% reported that the latrines they used had functioning lighting and 14% reported that the latrines were not sex-segregated**. Latrines that lack functional lighting and lockable doors from inside were not commonly reported, indicating a relatively safe use of non-private latrines – **with the exception of 25% of in-camp IDP households reporting a lack of lighting**. Of the out-of-camp and returnee households that reported using either communal or public latrines, **only 25% and 1%, respectively, reported the latrines to be sex-segregated**.<sup>93</sup>

Table 20: Suitability of latrines, of those households using communal or public latrines, by population group<sup>94</sup>

	Sex segregated	Lockable	Lighting
Host community	57%	100%	100%
In-camp IDP	86%	90%	25%
Out-of-camp IDP	25%	83%	82%
Returnee	1%	98%	99%

### Communities in hard-to-reach areas

In hard-to-reach areas, all non-displaced populations assessed in Hadiitha (Anbar), Hawiga (Kirkuk), Baaj (Ninewa) and Shirqat (Salah al Din) were reported to primarily use private latrines, whilst in Mosul and Telafar (Ninewa) both private and communal latrines were used. Similarly, in all hard-to-reach districts where returnees were assessed, all assessed returnee populations mainly used private latrines, with the exception of Hamdaniya (Ninewa), Mosul (Ninewa), Sinjar (Ninewa), Telafar (Ninewa) and Shirqat (Salah al Din) where various latrine types were reportedly used.

<sup>92</sup> There is a statistically significant association between population groups and the types of latrines reported: Chi-squared,  $p = 502.5$  and  $p$  value = 0.000.

<sup>93</sup> For all population groups except for in-camp IDPs, findings regarding the suitability of communal and public latrines are based on the responses of a small subset of the sample population who reported that they used these types of latrines. As such, these should be interpreted as indicative rather than statistically representative.

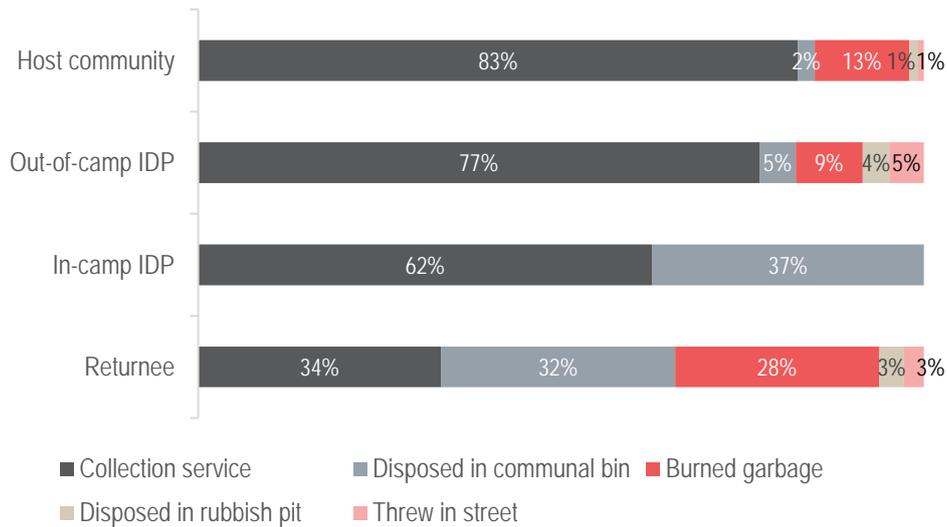
<sup>94</sup> There is a statistically significant association between population groups and the types of latrines used: sex-segregated, lockable and with lighting. This was tested using the Pearson's and Rao & Scott adjustment test,  $p$ -test=0.

## Solid waste management

### Households in accessible areas<sup>95</sup>

Across all population groups except for returnees, households most frequently used garbage collection services to dispose of solid waste, as indicated by 83% of host community, 77% of out-of-camp IDP and 62% of in-camp IDP households. Waste disposal methods amongst returnee households were roughly equally split between using collection services (34%), disposing of garbage in communal bins (32%) and burning garbage (28%).

Figure 27: Solid waste disposal method, by population group<sup>96</sup>



Of households whose solid waste was disposed of through collection services, the majority of in-camp IDP households reported daily collection (77%), whereas the majority of returnee households reported weekly collection (83%), as did host community households (71%). Out-of-camp IDP households were roughly divided between weekly (49%) and daily (45%) collection. These findings indicate that of those households who receive garbage collection services, for the overwhelming majority, the service was provided on a regular basis.

Table 21: Waste collection frequency, out of households who reported having their waste collected<sup>97</sup>

	Every day	Every week	Every month	Less than once a month	Never
Host community	27%	71%	2%	0%	0%
In-camp IDP	77%	17%	4%	2%	0%
Out-of-camp IDP	45%	49%	2%	1%	3%
Returnees	16%	83%	1%	0%	0%

No data was collected on garbage disposal methods for population groups assessed in hard-to-reach areas.

<sup>95</sup> Solid waste management indicators were not included in the qualitative portion of the assessment (i.e. hard-to-reach areas).

<sup>96</sup> There is a statistically significant association between population groups and the types of waste collection methods reported. This was tested using the Pearson's and Rao & Scott adjustment test, p-test=0.

<sup>97</sup> There is a statistically significant association between population groups and the frequency of waste collection. This was tested using the Pearson's and Rao & Scott adjustment test, p-test=0.

## Health

This section outlines findings related to the most prevalent health conditions and healthcare needs across population groups, including vaccination of children under five years old, followed by levels of access and most frequent barriers to accessing healthcare services. Barriers for women in accessing specialised care are also discussed here.

### Healthcare needs

#### Households in accessible areas<sup>98</sup>

Out-of-camp IDP households were most frequently affected by health events, as nearly one-quarter (24%) reported that one or more members of their households had experienced at least one health event in the two weeks preceding data collection.<sup>99</sup> This is followed to a lesser extent by returnee households and host community households (13% respectively).

Figure 28: Proportion of households where one or more members experienced a health event in the two weeks preceding data collection, host community and returnee population groups<sup>100</sup>

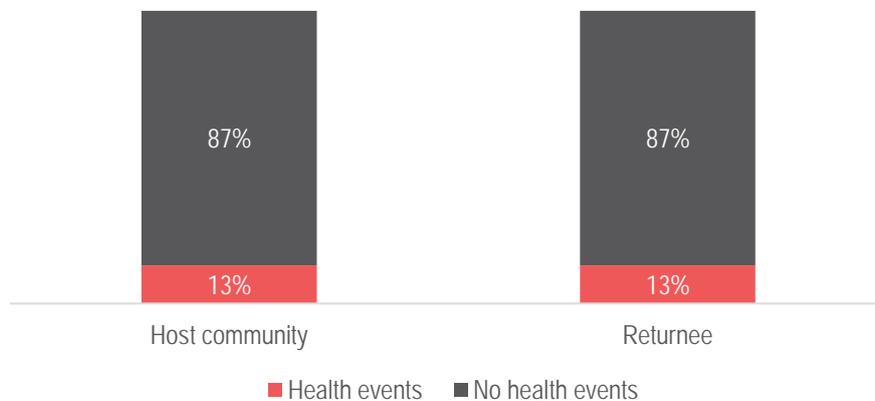
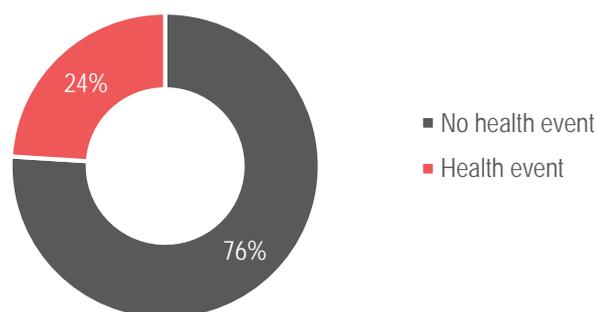


Figure 29: Proportion of households where one or more members experienced a health event in the two weeks preceding data collection, out-of-camp IDP population group<sup>101</sup>



Findings regarding the type of health events reported vary considerably across population groups, suggesting that living conditions and context are affecting populations in different ways. Most of the **returnee households** who reported one or more members experiencing a health event in the two weeks preceding data collection **had one or more members who suffered from diarrhoea (37%) or minor injuries (32%)**. High levels of diarrhoea are

<sup>98</sup> Questions not asked to in-camp IDP households.

<sup>99</sup> Respondents were asked if one or more members of their household had suffered from any health events within the two weeks preceding the interview. Health events were defined as the following: child birth, diarrhoea, symptoms of hypertension, symptoms of malnutrition, minor injury, respiratory issues, serious injury, skin disease, extreme stress reaction, asthma, or other events.

<sup>100</sup> Differences between these two population groups are not statistically representative.

<sup>101</sup> Findings for out-of-camp IDP households are presented separately because data was collection at a different time than host community and returnees.

most often related to unsafe drinking water sources, and only 5% of returnee households reported not treating their water before consumption, the lack of efficient means to treat drinking water could explain the high levels of diarrhoea experiences by returnee households.<sup>102</sup> **Respiratory issues were most common in out-of-camp IDP households (43%), followed by host community households (31%).**

That being said, **extreme stress reactions<sup>103</sup> were common across all population groups: 44% of host community, 35% of out-of-camp IDP, and 30% of returnee households.** These findings indicate that all conflict-affected population groups have to some extent been impacted by extreme stress, which is also noted in OCHA's August 2017 Situation Report. Looking particularly at Mosul and surrounding areas, the report identified mental health and psychological support as priority health needs, as large proportions of the conflict-affected population suffer from some form of trauma.<sup>104</sup>

Table 22: Most frequently reported health events, of households that reported at least one member experiencing a health event in the two weeks preceding data collection, returnee and host community<sup>105</sup>

	Returnee	Host community
Extreme stress reactions	30%	44%
Diarrhoea	37%	10%
Minor injury	32%	10%
Respiratory issues	8%	31%
Serious injury	12%	2%
Skin issues	3%	4%

Table 23: Most frequently reported health events, of households that reported at least one member experiencing a health event in the two weeks preceding data collection, out-of-camp IDP

	Out-of-camp IDP
Respiratory issues	43%
Extreme stress reactions	35%
Skin issues	16%
Diarrhoea	15%
Minor injury	7%
Serious injury	7%

Nineteen percent (19%) of in-camp IDP households with at least one child had one or more children experience diarrhoea in the two weeks preceding data collection, followed by 12% of returnee, 11% of out-of-camp IDP, and 9% of host community households.

<sup>102</sup> Please see the WASH section of the report for additional findings and more detailed analysis of access to potable water.

<sup>103</sup> Extreme stress reaction: depression, violence, sleeplessness, inactive, refusal of food, poor self-care.

<sup>104</sup> OCHA, [Mosul Humanitarian Response Situation Report N.41](#), July-August 2017.

<sup>105</sup> These findings are based on a subset of the sample population; therefore, the findings do not have the same level of representativeness. Respondents are able to select several options for this question. There is a statistical relation between host community, returnee households and the health events reported, each option presented is statistically significant as the chi-square is above 0.05.

Figure 30: Proportion of households with one or more children having diarrhoea in the two weeks preceding data collection, by returnee and host community households<sup>106</sup>

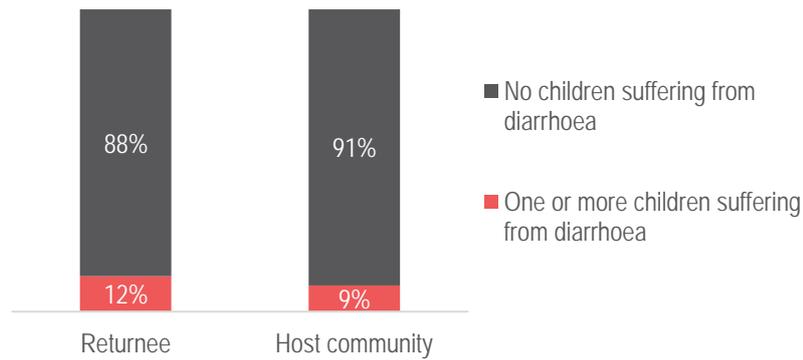
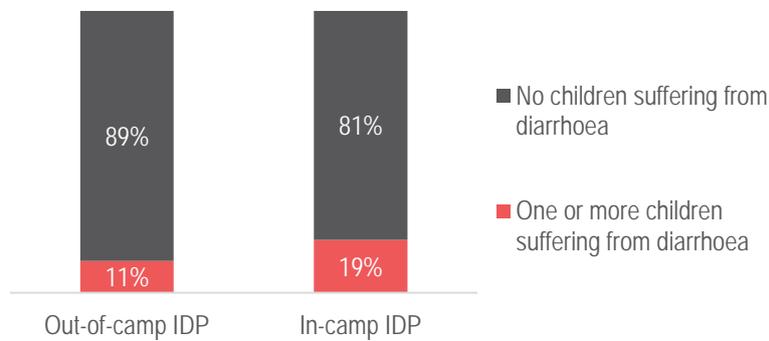


Figure 31: Proportion of households with one or more children having diarrhoea in the two weeks preceding data collection, by out-of-camp IDP households<sup>107</sup>

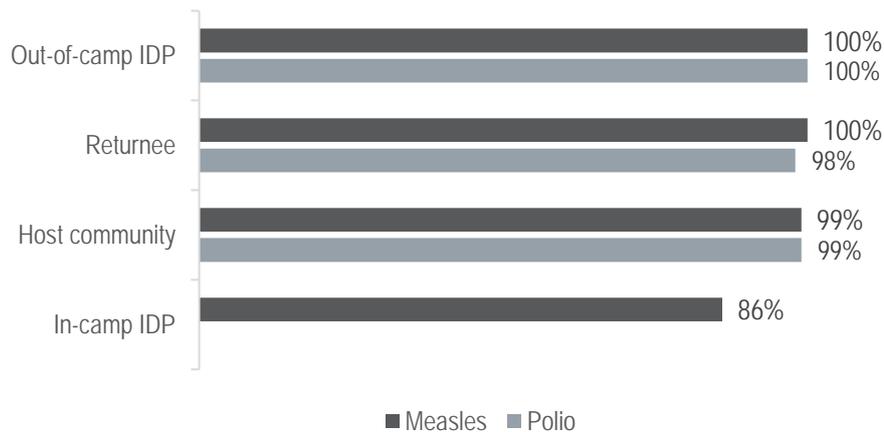


Households with children were asked about the vaccination history of children living in the household, specifically for polio and measles. Across all population groups the rate of vaccination was high, the lowest being for IDP households in camps where 86% of households with children reported that one or more of their children have been vaccinated for measles.

<sup>106</sup> There is a statistically significant association between population group and the frequency of children with diarrhoea. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 4.556. p value = 0.000

<sup>107</sup> There is a statistically significant association between population group and the frequency of children with diarrhoea. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 24.587. p value = 0.000.

Figure 32: Proportion of households with children who reported that at least one of their children had been vaccinated for measles and polio, by population group<sup>108</sup>



### Communities in hard-to-reach areas

In hard-to-reach areas, there were reports of households experiencing health events in the two weeks preceding data collection in all returnee populations assessed in Kirkuk (Kirkuk). **Skin issues were reportedly present in all assessed returnee populations in Kirkuk.** In all other hard-to-reach districts where returnees and non-displaced were assessed, reported incidence and type of health events varied.

Less than 25% of the non-displaced households with children assessed in Hawiga, Baaj, Mosul and Shirqat were estimated to have one or more children suffering from diarrhoea in the two weeks preceding data collection. This was also reported for returnees assessed in Falluja, Haditha, Kirkuk, Tilkaif, Shirqat and Tikrit. Regarding vaccines against measles, polio and Penta 3, **less than 25% of non-displaced households with children assessed in Hawiga and Baaj were estimated to have one or more children under five years old vaccinated against measles, polio and Penta 3. The same was reported for returnees assessed in Kirkuk.** The situation was relatively better in Samarra where between 25% and 50% of returnee households with children were estimated to have one or more children vaccinated against measles, polio and Penta 3. Over 75% of returnees households with children assessed in Heet were estimated to have one or more children under five years old vaccinated for polio and Penta 3.

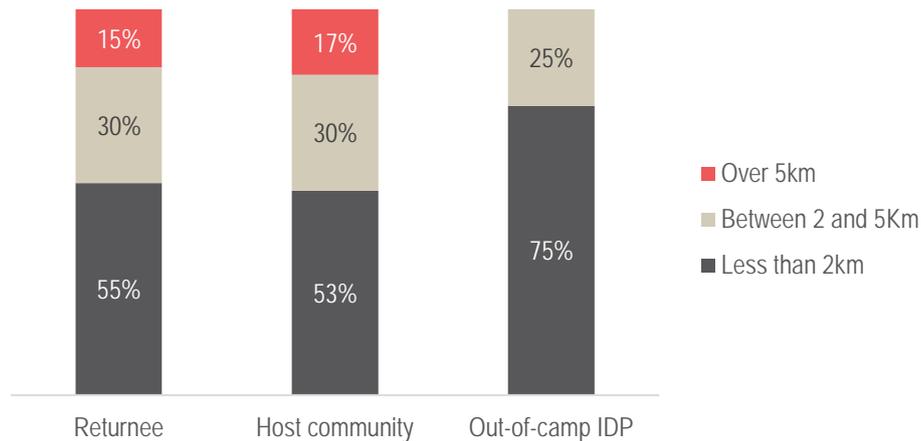
### Access to healthcare services

#### Households in accessible areas

All populations groups assessed were affected by a lack of functional healthcare facilities near their location, to varying extents. **Forty-five percent (45%) of host community households and 47% of returnee households reported having to travel over two kilometres in order to access a healthcare facilities.** This was also the case for 25% of out-of-camp IDP households.

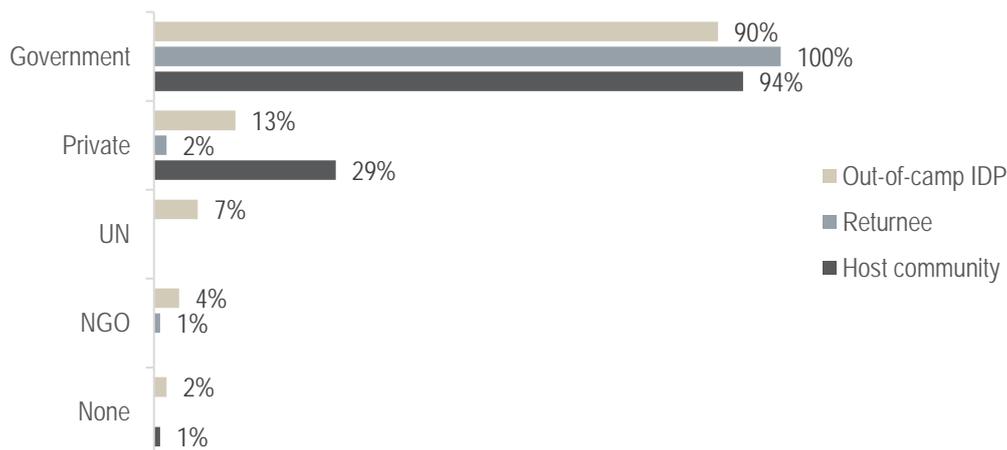
<sup>108</sup> The question about polio vaccination was not asked to IDP households in camps.

Figure 33: Distance to a functioning healthcare facility, by population group



Access to healthcare facilities also varied depending on the shelter type occupied. This was particularly significant for IDP households out of camps, a higher proportion of which occupied non-residential shelter types. **Over half of households living in abandoned buildings, tents and schools had no access to healthcare facilities within five kilometres of where they lived (between 61% and 70% of households living in abandoned buildings had no healthcare center within five kilometres);** this was much lower for those living in damaged and unfinished buildings (21% and 35%). This may indicate that households living in critical shelter conditions also are more vulnerable to living at greater distances from healthcare facilities.

Public health services were the most frequently cited source of healthcare across all population groups – as indicated by 100% of returnee, 94% of host community and 90% of out-of-camp IDP households. When households can afford it, private healthcare is supplementing public healthcare, which is most common in host community (29%) and out-of-camp IDP households (13%). **Unique to out-of-camp IDP households, findings show that 7% used UN and 4% used NGO services as a healthcare provider for primary care.** Further, host community households most frequently reported using more than one healthcare provider: 94% used public healthcare and 29% private healthcare.

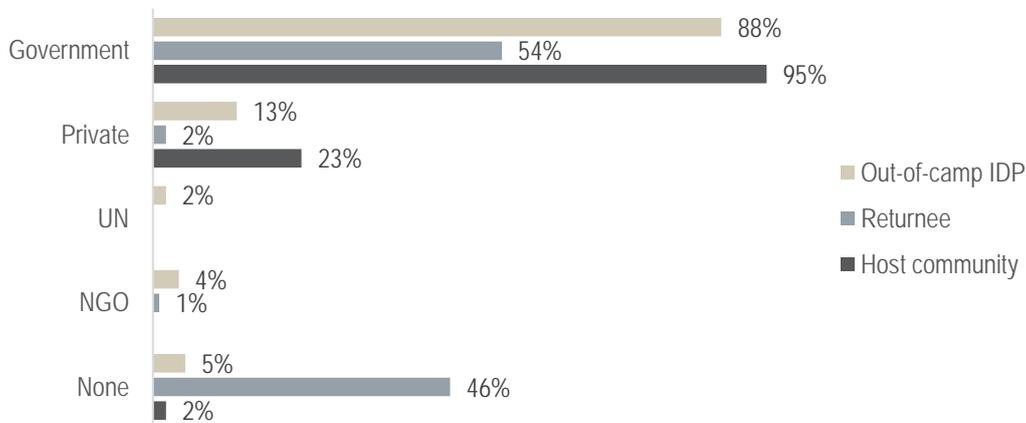
Figure 34: Most frequently reported healthcare provider for primary care, by population group<sup>109</sup>

Access to healthcare services for ante-natal and post-natal care was more limited than primary care. Ninety-five percent (95%) of host community households reported using government healthcare for pregnant and lactating women (PLW), however only 88% out-of-camp IDP households reported so and used various providers instead (13% private, 6% UN and NGOs). Access to healthcare services for ante-natal and post-natal care is more limited

<sup>109</sup> Interviewees could choose up to three options for this question, therefore the findings do not add up to 100%.

than primary care; this is most significant for returnee households as 46% reported not having a healthcare provider for PLW.

Figure 35: Most frequently reported healthcare provider for ante-natal and post-natal care, by population group<sup>110</sup>



### Communities in hard-to-reach areas

In hard-to-reach areas, the non-displaced population assessed in Baaj (Ninewa) was reported to be over five kilometres away from the nearest functioning healthcare facility. The same was reported for the assessed returnee population in Kirkuk (Kirkuk). In all other hard-to-reach districts where non-displaced and returnee populations were assessed, distance to the nearest functioning healthcare facility varied.

In hard-to-reach areas, the non-displaced population assessed in Shirqat district (Salah al Din) was reported to primarily rely on public healthcare services. In all other newly retaken and conflict districts where non-displaced populations were assessed, a variety of healthcare providers were reportedly used. Returnees assessed in hard-to-reach areas were reported to primarily rely on public healthcare services in the majority of assessed districts, while the returnee population assessed in Kirkuk (Kirkuk) reportedly primarily relied on private healthcare services.<sup>111</sup>

### Barriers to accessing healthcare

#### Households in accessible areas

A higher proportion of host community households reported that one or more household members required medical care in the two weeks preceding data collection, in comparison to returnee households (47% and 37% respectively). Out-of-camp IDP households were more frequently in need of healthcare assistance in comparison with in-camp IDP households: 76% compared to 41% reported requiring healthcare assistance.

<sup>110</sup> Interviewees could choose up to three options for this question, therefore the findings do not add up to 100%.

<sup>111</sup> Hard-to-reach districts where public healthcare was reported to be the primary healthcare provider for assessed returnee populations: Falluja, Haditha, Heet, Abu Ghraib, Mosul, Telafar, Baiji, Balad, Daur, Shirqat and Tooz.

Figure 36: Proportion of households where one or more members needed healthcare assistance in the two weeks preceding data collection, host community and returnee households<sup>112</sup>

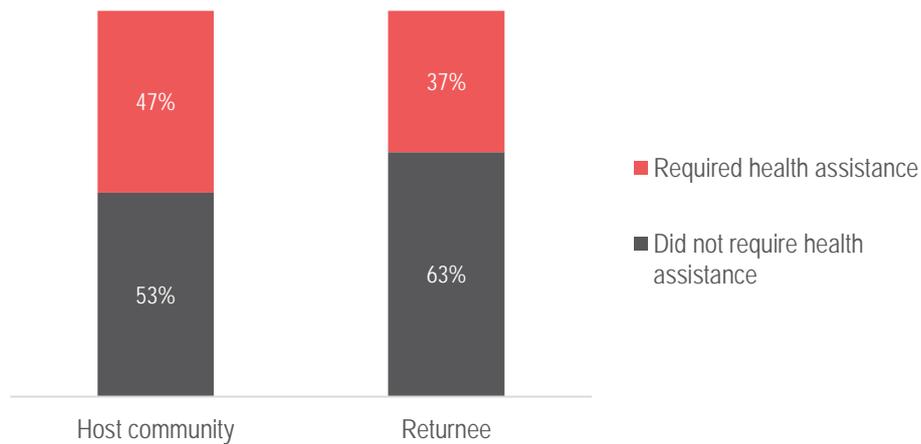
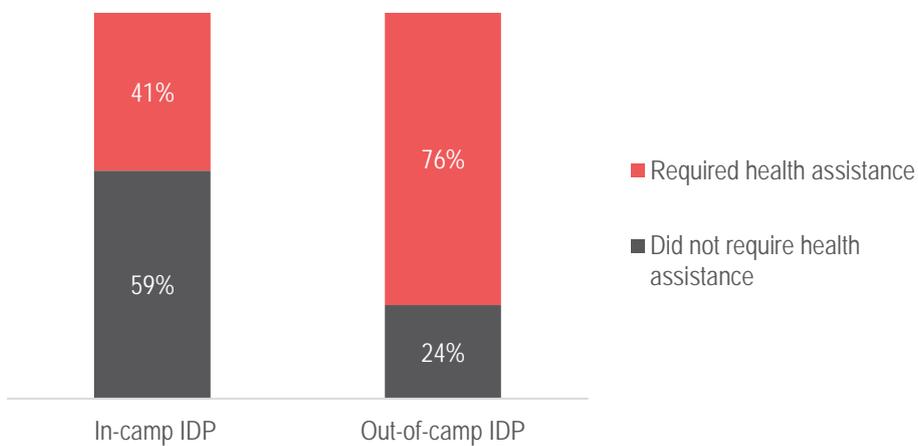


Figure 37: Proportion of households where one or more members needed healthcare assistance in the two weeks preceding data collection, out-of-camp and in-camp IDP households<sup>113</sup>



Out of those who reported needing medical assistance, a large majority of households sought medical assistance: 92% of returnees and 87% of host community households. Assessed at a different period, 90% of out-of-camp IDP households reported seeking medical assistance when needed.

<sup>112</sup> There is a statistically significant association between the population groups and the proportion of household requiring healthcare assistance. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 3.603. p value = 0.000.

<sup>113</sup> There is a statistically significant association between the population groups and the proportion of household requiring healthcare assistance. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 1146.245. p value = 0.000.

Figure 38: Proportion of households that sought medical treatment, of those who reported a health event in the two weeks preceding data collection, host community and returnee households<sup>114</sup>

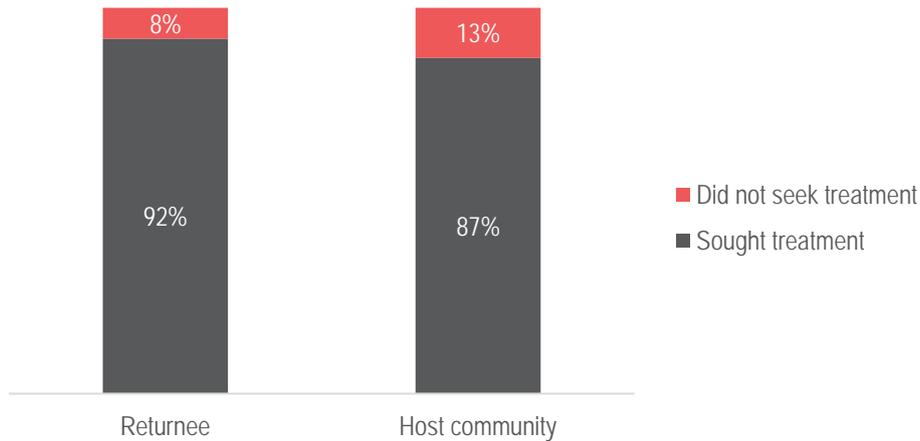
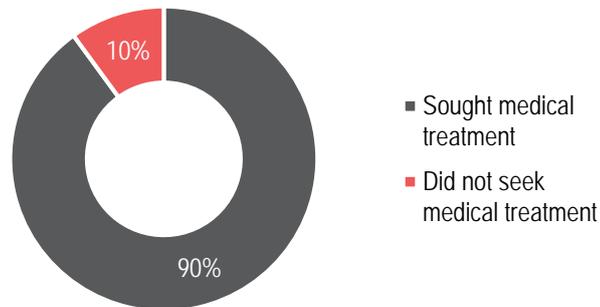


Figure 39: Proportion of households that sought medical treatment, of those who reported a health event in the two weeks preceding data collection, out-of-camp IDP households<sup>115</sup>



Out of the households that reported seeking healthcare, the proportion of households that reportedly faced barriers was comparable between host community and returnee households (49% and 46%, respectively). The majority of IDP households both in and out-of-camps reported facing barriers to accessing care (55% and 51%, respectively).

<sup>114</sup> There is a statistically significant association between the population groups and the proportion of household seeking healthcare assistance. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 4.481. p value = 0.000.

<sup>115</sup> Question was not asked to IDP households in camps.

Figure 40: Proportion of households that reported facing barriers when seeking healthcare assistance in the two weeks preceding data collection, host community and returnee households<sup>116</sup>

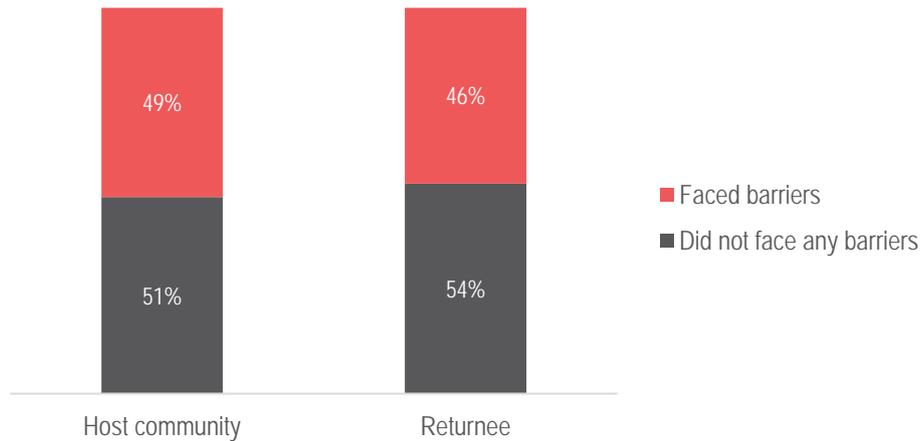
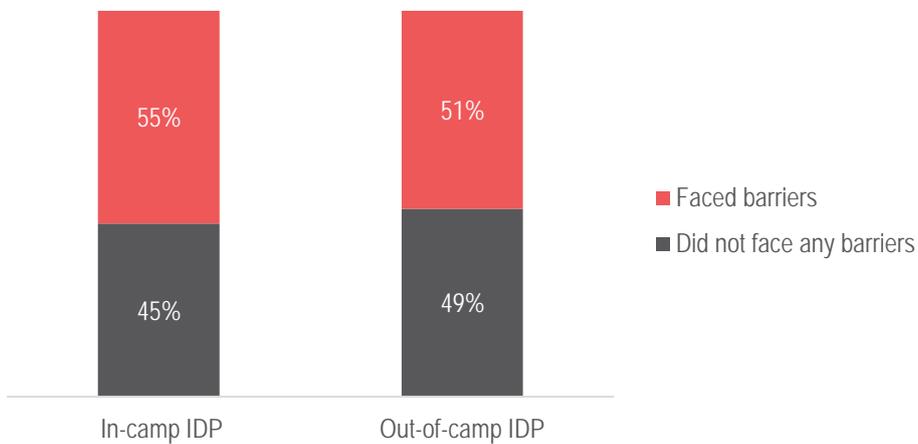


Figure 41: Proportion of households that reported facing barriers when seeking healthcare assistance in the two weeks preceding data collection, in-camp and out-of-camp IDP households<sup>117</sup>



The cost of services and medicines was the most frequently cited barrier to accessing healthcare for host community and returnee households. Returnees in particular faced this challenge, with 96% of households who sought healthcare facing challenges related to cost. This is followed by 80% of host community households, who reported requiring healthcare, seeking it and facing cost specifically as a barrier.

IDP households living in and out-of-camp suffered most from the inability to afford the cost of healthcare: 61% and 77% reported so, respectively. The inability to afford medicine was the second most reported barrier to healthcare (40% of in-camp and 57% of out-of-camp IDP households). Finally, the lack of medicines available in hospitals was also a common barrier (28% and 32%, respectively). This could reflect a lack of response capacity or a lack of government resources and functioning services with regards to these population groups' healthcare needs. The large distances to reach a functioning healthcare center from their shelter is an issue for 10% of IDP households living in camps who sought healthcare assistance. This could reflect a lack of sufficient healthcare services within the camp, requiring residents to seek healthcare assistance outside the camp or a lack of awareness of available services in camps.

<sup>116</sup> There is a statistically significant association between the population groups and the proportion of household seeking healthcare assistance. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 1.629. p value = 0.000.

<sup>117</sup> There is a statistically significant association between population groups and the proportion of household requiring healthcare assistance. Significance test results: chi-squared p values > 0.05. Persons Chi-Square = 190.334. p value = 0.000.

Table 24: Most frequently reported barriers to accessing healthcare, host community and returnee households<sup>118</sup>

	Host community	Returns
Cost of healthcare	80%	96%
Unable to afford medicines at pharmacy	47%	25%
No medicine available in hospital	30%	6%
Distance to healthcare facility	2%	1%
Unqualified staff in hospital	6%	0%
No medicine available in healthcare centre	5%	1%
Not offered treatment in hospital	6%	1%
Unqualified staff in healthcare centre	2%	0%
No medicine available in pharmacy	1%	0%

Table 25: Most frequently reported barriers to accessing healthcare, in-camp and out-of-camp IDP households

	In-camp IDP	Out-of-camp IDP
Cost of healthcare	61%	77%
Unable to afford medicines at pharmacy	40%	57%
No medicine available in hospital	28%	32%
Distance to healthcare facility	10%	10%
Unqualified staff in hospital	8%	4%
No medicine available in healthcare centre	7%	3%
Not offered treatment in hospital	3%	4%
Unqualified staff in healthcare centre	2%	2%
No medicine available in pharmacy	7%	3%

### Communities in hard-to-reach areas

In hard-to-reach areas, over 75% of the non-displaced population assessed in Hawiga (Kirkuk) had reportedly faced barriers accessing healthcare. This was also reported for returnees assessed in Kirkuk district (Kirkuk). In all other hard-to-reach districts where non-displaced and returnee populations were assessed, responses varied.

In terms of barriers to accessing healthcare, the inability to afford the cost of healthcare and medicines, and the lack of medicines in hospitals or pharmacies were reported in all districts where non-displaced were assessed. The inability to afford the cost of healthcare and/or medicines was also reported to be a barrier to accessing healthcare in all hard-to-reach districts where returnees were assessed.

<sup>118</sup> Multiple response options could be selected by respondents for this question so the findings do not add to 100%. There is a statistically significant association between host community and returnee groups and the proportion of household facing each barrier to healthcare. Significance test results: chi-squared p values > 0.05. There is also a statistically significant association between out-of-camp and in-camp IDP households and the proportion of household facing each barrier to healthcare for each option presented. Significance test results: chi-squared p values > 0.05

## Food security

This section outlines findings regarding food consumption levels and consumption-based coping strategies, primary sources of food, access to markets, and access to the Iraqi Public Distribution System (PDS), which provides government-subsidized food and fuel assistance. Household food consumption is assessed by calculating a Food Consumption Score, a global WFP indicator which measures both the quality and frequency of consumption of various food groups during a seven-day recall period. To measure the short-term behaviours of households when they do not have sufficient access to food, the assessment examined the frequency with which consumption-based coping strategies were utilized during a seven-day recall period.

### Access to food

#### Households in accessible areas

Nearly all host community and returnee households reported an acceptable food consumption score.<sup>119</sup> The majority of IDP households also reported an acceptable score, although to a lesser extent, as indicated by 95% of out-of-camp and 87% of in-camp IDP households. Furthermore, 96% of households at the national level reported eating three meals per day, on average, with minimal variation between population groups. **Taken together, these findings indicate that most households in accessible areas across Iraq have adequate access to food.** That being said, displaced populations appear to have relatively lower access to food, as evidenced by 14% of in-camp and 5% of out-of-camp IDP households reporting borderline or poor food consumption scores.

The WFP mobile Vulnerability Analysis and Mapping (mVAM) team's assessment of newly retaken areas in Ninewa governorate in February 2017 found that the proportion of households with poor or borderline food consumption scores was higher amongst IDP households when compared with returnee and host community households. The mVAM report attributes this disparity to returnees having higher access to staples and protein-rich foods. Although the mVAM study focuses exclusively on Ninewa, the findings may be applicable to other areas across Iraq where mixed conflict-affected population groups reside.

Figure 42: Food consumption score, host community and returnee households<sup>120</sup>

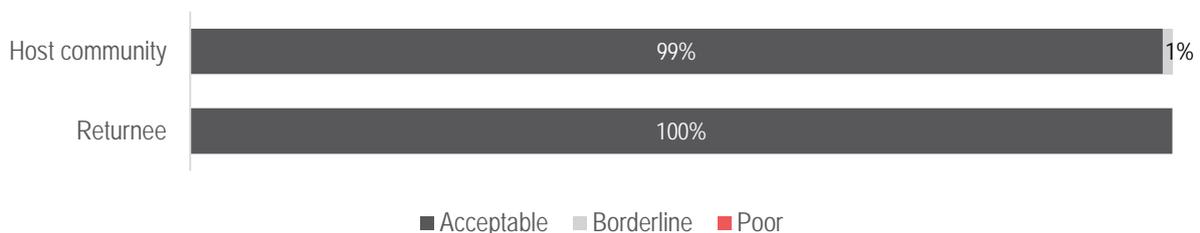
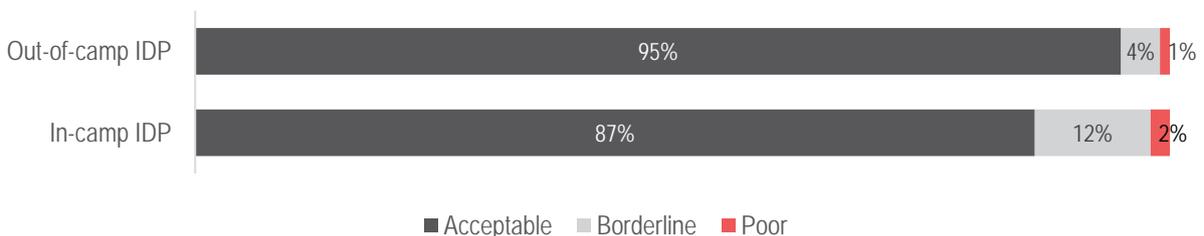


Figure 43: Food consumption score, in-camp and out-of-camp IDP households



Access to food is underscored by the primary ways in which households are able to obtain food items. **Amongst returnee and host community households, purchasing food with cash was the most frequently used method in the seven days preceding data collection, as indicated by 87% and 82% of households,**

<sup>119</sup> The food consumption score was calculated using WFP's Consolidated Approach to Reporting Indicators of Food Security (CARI), and measures households' current status of food consumption based on the number of days per week a household is able to eat items from nine standard food groups weighted for their nutritional value.

<sup>120</sup> A pairwise design-based T-test was carried out for these findings. Food consumption score is calculated by asking how many days certain food groups were consumed in the last seven days. A test was carried out for each food type, while findings for vegetables, spices, eggs and milk and dairy were statistically significant, findings for cereal, pulses (inclusive of nuts and seeds), fruits, meat, oil/fats and spices/condiments were not.

respectively. The second most frequent source of food was purchasing with credit – although this source was only reported by 17% of returnee and 12% of host community households.<sup>121</sup>

Table 26: Primary source of food in the seven days preceding data collection, host community and returnee<sup>122</sup>

	Host community	Returnee
Bought with cash	87%	82%
Bought on credit	12%	17%
UN assistance	1%	0%
Own production	0%	0%
Gift	0%	1%
Government assistance	0%	0%
Local assistance	0%	0%

Purchasing with cash was also the most frequently reported means of obtaining food amongst out-of-camp IDP households in the seven days preceding data collection, as indicated by 63% of households. The second most common source was purchasing with credit (29%). Again the WFP mVAM study notes that the use of credit to source food is normally a last resort, once cash from earnings or savings have been spent,<sup>123</sup> and as such can highlight households at risk of food insecurity.

Table 27: Primary source of food in the seven days preceding data collection, out-of-camp IDP

	Out-of-camp IDP
Bought with cash	63%
Bought on credit	29%
UN assistance	3%
Own production	2%
Gift	1%
Government assistance	1%
Local assistance	1%

Female-headed households more frequently reported purchasing with credit as a primary means of obtaining food; for example, amongst out-of-camp IDPs, 32% of female-headed households reported using credit, in comparison to 24% of male-headed households.<sup>124</sup> Female-headed households also more frequently reported sources of income that were less stable and indicated comparatively lower incomes than male-headed households, which may also impact how they are able to access food.<sup>125</sup>

At governorate level, the proportion of out-of-camp IDP households using credit as a primary means to obtain food varies considerably. Seventy-three percent (73%) of households in Salah al Din reported purchasing food with credit in the seven days preceding, and within the governorate, over 90% of households in the districts of Tikrit and Samarra reported so. In contrast, the use of credit as a primary means was used by less than 5% of households in nine governorates – Baghdad, Basrah, Kerbala, Missan, Muthanna, Najaf, Qadissiya, Thi-Qar and Wassit.<sup>126</sup>

<sup>121</sup> Findings for this indicator were found to be statistically significant using the Pearsons and Rao & Scott adjustment test.

<sup>122</sup> This question was not included in the Camp Profiling assessment and therefore results for in-camp IDP households are not available.

<sup>123</sup> WFP, [Iraq mVAM bulletin no. 25](#), February 2017.

<sup>124</sup> There is no statistically significant association male and female-headed households and the use of credit to source food.

<sup>125</sup> Please see the subsequent Livelihoods section of the report for more detailed findings and analysis regarding average household income and sources.

<sup>126</sup> There is a statistically significant association between population group at governorate level (out-of-camp IDPS) and main food sources. Significance test results: Persons Chi-Square =855.031 p value = 0.000.

Figure 44: Primary source of food in the seven days preceding data collection, by sex of head of household, host community and returnee households

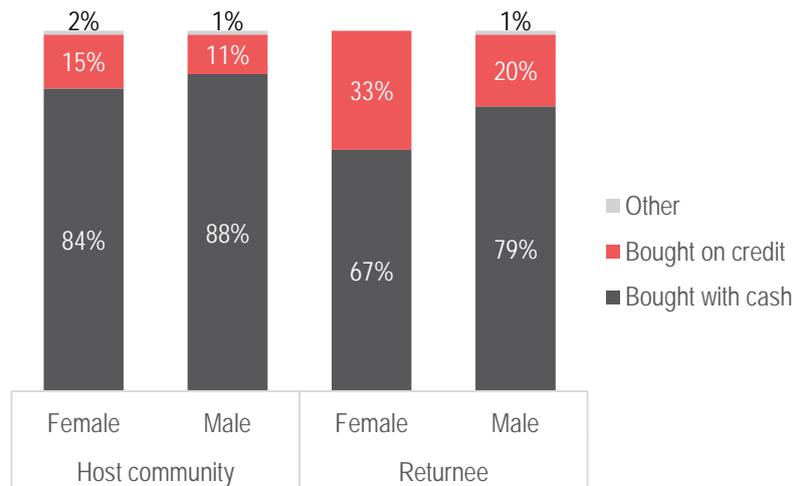
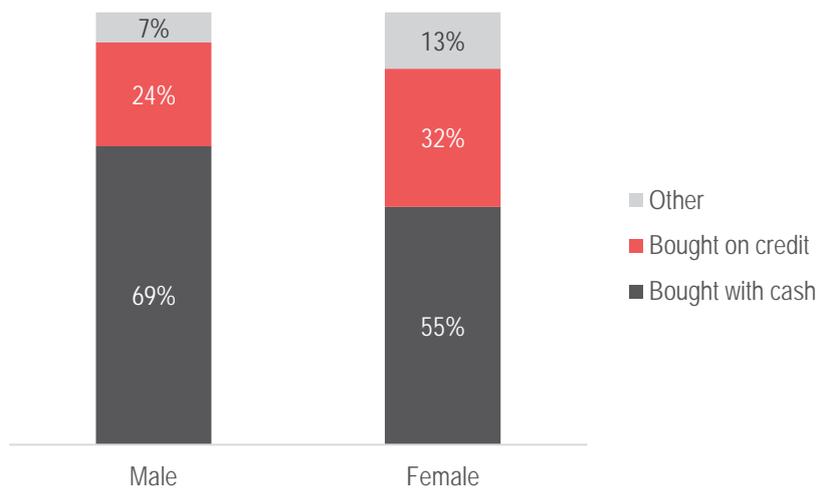


Figure 45: Primary source of food in the seven days preceding data collection, by sex of head of household, out-of-camp IDP households



### Communities in hard-to-reach areas

Because the food consumption score is a household-level indicator, in hard-to-reach areas, KIs were instead asked to estimate the proportion of the non-displaced or returnee population without sufficient access to food using the following categories: less than 25%, 26-50%, 51-75% and over 75%.

More than half of the non-displaced population assessed in Hawiga (Kirkuk) reportedly did not have sufficient access to food in the seven days preceding data collection. Findings in other newly retaken and conflict districts where non-displaced were assessed varied, with KIs in Mosul (Ninewa) and Shirqat (Salah al Din) reporting that the majority of the non-displaced population had sufficient access to food in the seven days preceding data collection.

For returnees assessed in hard-to-reach areas, access to food was a particular concern in Kirkuk (Kirkuk), where over 75% of the returnee population reportedly did not have sufficient access to food in the seven days preceding data collection. Findings in other hard-to-reach districts where returnees were assessed varied, with the majority of the returnee population assessed in Falluja (Anbar), Heet (Anbar), Hamdaniya (Ninewa), Tilkaif (Ninewa) and Samarra (Salah al Din) reported to have had sufficient access to food in the seven days preceding data collection.

In all hard-to-reach districts where returnees were assessed, a primary means of obtaining food was purchasing with cash. Returnees assessed in hard-to-reach districts were also reported to purchase food on credit, except in Abu Ghraib, Baiji, Balad, Daur, Falluja, and Tooz. Self-production was also reported to be a primary source of food for some returnees assessed in Falluja, Hadiitha, and Samarra.

Purchasing with cash was reportedly a primary source of food in all newly retaken and conflict districts where non-displaced were assessed except for Telafar, where purchasing on credit and receiving food assistance were reported instead. Purchasing food on credit was also reported to a primary source of food in all other districts where non-displaced were assessed except for Shirqat. In Baaj and Hawiga, cultivation of food was also reported as a primary source of food.

There was variation in the average number of meals reportedly consumed per day in the seven days preceding data collection, across hard-to-reach districts where returnees and non-displaced were assessed. In all newly retaken and conflict districts where non-displaced were assessed except for Hawiga, the non-displaced population reportedly consumed an average of two to three meals per day in the seven days preceding data collection, while in Hawiga there were some reports of non-displaced populations consuming as little as one meal per day on average.

In all hard-to-reach districts where returnees were assessed, the returnee population reportedly consumed an average of two to three meals per day in the seven days preceding data collection. This indicates that non-displaced populations may be more food insecure than returnee populations assessed in hard-to-reach areas.

### Consumption-based coping strategies

#### Households in accessible areas<sup>127</sup>

The majority of returnee and host community households reported that they did not use any coping strategies in the seven days preceding data collection as a means to maintain food consumption levels – **80% and 61% of households, respectively**. Consuming less expensive food was the most frequently reported coping strategy amongst host community and returnee households, as indicated by 35% and 17% of households, respectively. While 16% of host community households relied upon reduced portions as a consumption-based strategy, only 3% of returnee households reported this.

Table 28: Most frequently reported consumption-based coping strategies used in the seven days preceding data collection, host community and returnee households<sup>128</sup>

	Host community	Returnee
Consume less expensive food	35%	17%
Reduce portion sizes	16%	3%
Reduce meals per day	6%	1%
Send children (under 18) to work <sup>129</sup>	1%	4%
Borrow food	1%	1%

Amongst displaced population groups, 54% of in-camp and 36% of out-of-camp IDP households reported that they did not use any food consumption coping strategies during the recall period. **The consumption of less expensive food was the most frequently reported coping strategy in the seven days preceding data collection, as indicated by 57% of out-of-camp and 40% of in-camp IDP households.** The second most used strategy was to reduce portion sizes, reported by 30% of out-of-camp and 22% of in-camp IDP households.

<sup>127</sup> The results presented here reflect the percentage of households who reported using the coping strategy for *one or more days* in the seven days preceding their interview. Respondents were asked to report all coping strategies used, meaning that multiple response options could be selected.

<sup>128</sup> There is a statistically significant association between population group and coping strategies used. Significance test results: Persons Chi-Square =156.723 (less expensive food) 124.307 (reduced portions) 108.719 (reduce meals per day) 84.663 (borrow food) 56.550 (reduced food consumption for males) 59.569 (reduced food consumption for females) 118.472 (sending children to work) 2499.825 (exchange and barter for diversity) p value = 0.000.

<sup>129</sup> As a consumption-based coping strategy, the implication is that a minor in the household is sent to work, either to obtain food directly, or to obtain income in order to purchase food.

Table 29: Most frequently reported consumption-based coping strategies used in the seven days preceding data collection, out-of-camp and in-camp IDP households<sup>130</sup>

	Out-of-camp IDP	In-camp IDP
Consume less expensive food	57%	40%
Reduce portion sizes	30%	22%
Reduce meals per day	20%	20%
Borrow food	12%	13%
Exchange/barter for diversity <sup>131</sup>	9%	n/a
Reduce food consumption for males	3%	4%
Reduce food consumption for females	3%	4%
Send children (under 18) to work <sup>132</sup>	6%	0%

In both returnee and host community population groups, a higher proportion of female-headed households reported using at least one consumption-based coping strategy for one or more days during the seven days preceding data collection, in comparison with male-headed households. **Returnee households indicated a larger difference, with 42% of female-headed compared with 19% of male-headed households reporting the use of at least one coping strategy.** Amongst host community households, 52% of female-headed compared to 38% of male-headed households reported the use of at least one coping strategy.<sup>133</sup> These findings reflect a greater vulnerability amongst female-headed households with respect to accessing food and maintaining food consumption levels.

Moreover, female-headed households more frequently reported the use of specific coping strategies in comparison to male-headed households, such as sending children to work. The use of this coping mechanism was highest amongst female-headed households in host communities (42%), compared with 18% of their male counterparts.

Table 30: Most frequently reported consumption-based coping strategies used in the seven days preceding data collection, host community and returnee, by sex of head of household

	Host community		Returnee	
	Female	Male	Female	Male
Consume less expensive food	44%	35%	39%	15%
Reduce portion sizes	34%	14%	6%	3%
Sending children (under 18) to work <sup>134</sup>	42%	18%	21%	14%

Differences between female and male-headed households were also reported amongst displaced population groups. Nearly three-quarters (73%) of female-headed out-of-camp IDP households reported the use of at least one coping strategy in the preceding seven days, compared with 63% of male-headed out-of-camp IDP households.<sup>135</sup> Female-headed out-of-camp IDP households also more frequently reported eating less expensive food, reducing portion sizes, and sending children to work. With respect to in-camp IDP households, differences were fewer; however, 20% of female-headed in-camp IDP households reported sending children to work compared with only 9% of their male counterparts.

<sup>130</sup> Respondents were asked to report all coping strategies used, meaning that multiple response options could be selected.

<sup>131</sup> This coping strategy refers to households swapping or exchanging food with friends/neighbours to obtain a more varied diet.

<sup>132</sup> As a consumption-based coping strategy, the implication is that a minor in the household is sent to work, either to obtain food directly, or to obtain income in order to purchase food.

<sup>133</sup> The association between sex of the head of household and use of at least one consumption-based coping strategy is statistically significant within each population group (Pearson Chi-squared test, returnee p-value = 0.00; host community p-value = .037).

<sup>134</sup> As a consumption-based coping strategy, the implication is that a minor in the household is sent to work, either to obtain food directly, or to obtain income in order to purchase food.

<sup>135</sup> The association between sex of the head of household and use of at least one consumption-based coping strategy is statistically significant within the out-of-camp IDP population group (Pearson Chi-squared test, p-value = 0.00). No statistically significant difference was found between sex of head of household and use of at least one consumption-based coping strategy within the in-camp IDP population group.

Table 31: Most frequently reported consumption-based coping strategies used in the seven days preceding data collection, out-of-camp and in-camp IDPs, by sex of head of household

	Out-of-camp IDP		In-camp IDP	
	Female	Male	Female	Male
Consume less expensive food	64%	57%	40%	40%
Reduce portion sizes	43%	29%	23%	22%
Sending children (under 18) to work <sup>136</sup>	27%	14%	20%	9%

### Communities in hard-to-reach areas

In all newly retaken and conflict districts where non-displaced populations were assessed, a variety of consumption-based coping strategies were reported. Sending children (under 18) to work was reported as a coping strategy in Haditha (Anbar) and Telafar (Ninewa), while consuming cheaper food, limiting portions and/or reducing the number of meals per day were reported across all districts where non-displaced populations were assessed.

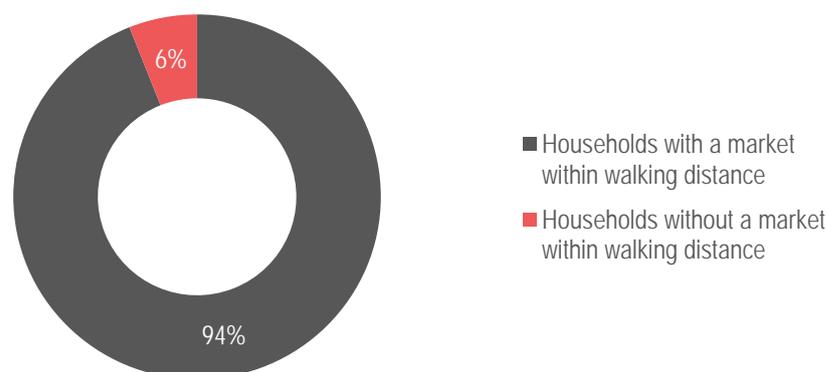
For returnees assessed in hard-to-reach areas, sending children (under 18) to work was reportedly a coping strategy in all districts except for Kirkuk (Kirkuk) and Hamdaniya (Ninewa). The assessed returnee population in Kirkuk reportedly resorted to borrowing food in addition to eating less expensive food. Reliance on less expensive food was reported as a coping strategy in all other hard-to-reach districts where returnees were assessed.

### Access to markets

#### Households in accessible areas

Nationwide, the vast majority of households (94%) resided within walking distance of a market, with minimal variation across population groups. This finding indicates that distance itself is not a barrier to obtaining food for those living in accessible areas. Findings disaggregated by type of settlement reveal that over half (54%) of returnee households residing in collective centres did not have access to a market within walking distance; this is a higher proportion than out-of-camp IDP (31%) and host community households (11%) also living in collective centres. Moreover, the Regional Food Security Analysis Network (RFSAN) Iraq Food Security Report, identified that in many conflict affected areas, while markets and access to them may have improved, livelihoods have not improved to the same extent.<sup>137</sup>

Figure 46: Proportion of households living within walking distance of a market, national level



<sup>136</sup> As a consumption-based coping strategy, the implication is that a minor in the household is sent to work, either to obtain food directly, or to obtain income in order to purchase food.

<sup>137</sup> RFSAN, [Iraq Food Security Quarterly Update](#), April-June 2017.

### Communities in hard-to-reach areas

In hard-to-reach areas, all assessed non-displaced populations in Haditha (Anbar) and Mosul (Ninewa) were reported to have access to a functional market within walking distance. Meanwhile, none of the assessed non-displaced populations in Hawiga (Kirkuk) and Baaj (Ninewa) were reported to have access to a functional market nearby.

In the majority of hard-to-reach districts where returnees were assessed, all assessed returnee populations were reported to have a functional market within walking distance. At the opposite end of the spectrum, none of the assessed returnee populations in Kirkuk district (Kirkuk) were reported to have access to a functional market nearby, while returnee populations in the districts of Shirqat and Samarra (Salah al Din) had varying degrees of access.

### Public Distribution System assistance

#### Households in accessible areas

The PDS in Iraq is a government-subsidised food and fuel assistance programme administered nationwide. Although PDS rations are not a sufficient means of addressing all household food needs, the assistance supplements food consumption by providing a supply of staple food items.<sup>138</sup>

Sixty-eight percent (68%) of in-camp IDP households and one-third of out-of-camp IDP households reported having received PDS assistance within the same month as data collection, in contrast with returnee and host community households, where only 16% and 19% respectively had reportedly received assistance within the same month as data collection. This indicates that in-camp IDPs may access assistance more regularly than out-of-camp IDPs or returnee and host community households.

Table 32: Last time PDS assistance was received, by population group<sup>139</sup>

	In-camp IDP	Out-of-camp IDP	Returnee	Host community
Within the last week	19%	0%	0%	0%
This month	49%	33%	16%	19%
Last month	19%	45%	72%	64%
Over two months ago	13%	22%	12%	17%

At governorate level, for out-of-camp IDPs there was considerable variation amongst households who had received PDS assistance in the current month of data collection – ranging from 9% of households in Salah al Din to 100% of households in Najaf. In Thi-Qar and Anbar governorates, 68% and 44% of households, respectively, reported last receiving assistance over two months preceding data collection, indicating that consistent access to PDS distributions can vary quite significantly across governorates.

Regardless of when last received, the large majority of households in all groups reported that they received a half-ration of PDS assistance as opposed to a full ration.<sup>140</sup> This was reported by 99% of returnee, 97% of host community, 91% of in-camp IDP and 90% of out-of-camp IDP households.<sup>141</sup>

### Communities in hard-to-reach areas

In hard-to-reach areas, the majority of the non-displaced population assessed in Hawiga (Kirkuk) reportedly did not have access to PDS assistance, while the majority of the non-displaced population assessed in Telafar (Ninewa) reportedly had access.

<sup>138</sup> REACH, [Multi-Cluster Needs Assessment \(III\) of Internally Displaced Persons Outside of Camps](#), June 2016.

<sup>139</sup> There is a statistically significant association between population group and the last time PDS was received. Significance test results: Persons Chi-Square = 1239.055 p value = 0.000.

<sup>140</sup> A half ration is defined as receipt of 1-2 items from the PDS list, and a full ration is defined as receipt of all PDS items at once.

<sup>141</sup> There is a statistically significant association between population groups and type of PDS received (half or full). Significance test results: Persons Chi-Square = 537.176. p value = 0.000.

Amongst returnees in hard-to-reach areas, the majority of the returnee population assessed in Ninewa governorate (Hamdaniya, Mosul, Sinjar, Telafar and Tilkaif) reportedly had access to PDS assistance; this was also reported for returnees in Heet (Anbar) as well as Tikrit and Tooz (Salah al Din). While returnees assessed in other hard-to-reach districts were reported to have varying degrees of access to PDS, Kirkuk (Kirkuk governorate) was the only district where the majority of the returnee population was reportedly not receiving PDS assistance

## Livelihoods & social cohesion

This section provides findings relevant to livelihoods at both the household level in accessible areas and at the community level in hard-to-reach areas. Income levels and the extent to which employment is a challenge, provides insight into how the livelihoods of conflict-affected population groups are impacted. The section also assesses vulnerability further by analysing livelihood sources by four main types of income sources: seasonal/short term, safety net, stable income and those without livelihoods. Further comparing income with expenditure, the findings also look at the gaps across population groups in fulfilling basic needs such as food, water, health and shelter. In response to these gaps, livelihood-based consumption strategies are also assessed to understand where negative strategies such as taking on debt are more prevalent. The chapter also includes findings on the perception of population groups regarding social cohesion including hospitality, crime levels as well as access and barriers to basic necessities and services (inclusive of access to internet).

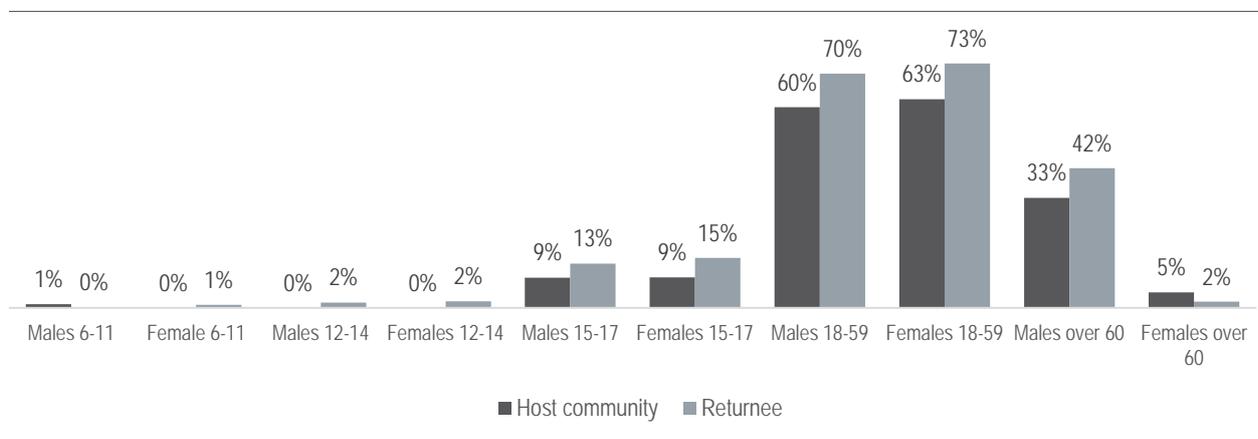
### Income and employment

#### Households in accessible areas

Nationwide, the average monthly household income reported by population groups (using the preceding 30 days of the assessment as the recall period) demonstrates that out-of-camp IDP households earn relatively low incomes (529,968 Iraqi Dinar (IQD)<sup>142</sup>). Returnee households earned more (653,832 IQD<sup>143</sup>) in comparison with host community households (627,255 IQD<sup>144</sup>).

For out-of-camp IDP households, income figures varied importantly in Baghdad governorate: the highest average monthly household income amount was reported in Adhama district (1,156,533 IQD<sup>145</sup>); the district with the lowest recorded average monthly household income was Shirqat in Salah al Din governorate (141,544 IQD<sup>146</sup>), followed by Najaf district (Najaf governorate) (IQD 305,572<sup>147</sup>).

Figure 47: Proportion of household members in employment in the 30 days preceding data collection, by age and sex, host community and returnee households<sup>148</sup>



<sup>142</sup> Equivalent to 460 USD (this has been calculated using the last date of data collection for out-of-camp IDP households: 17 May 2017). Currency exchange has been calculated using [Qanda](#).

<sup>143</sup> Using the pairwise design based t-test results were found to be statistically significant.

<sup>144</sup> Equivalent to 541 USD (this has been calculated using the last date of data collection for host community households: 31 August 2017). Currency exchange has been calculated using [Qanda](#).

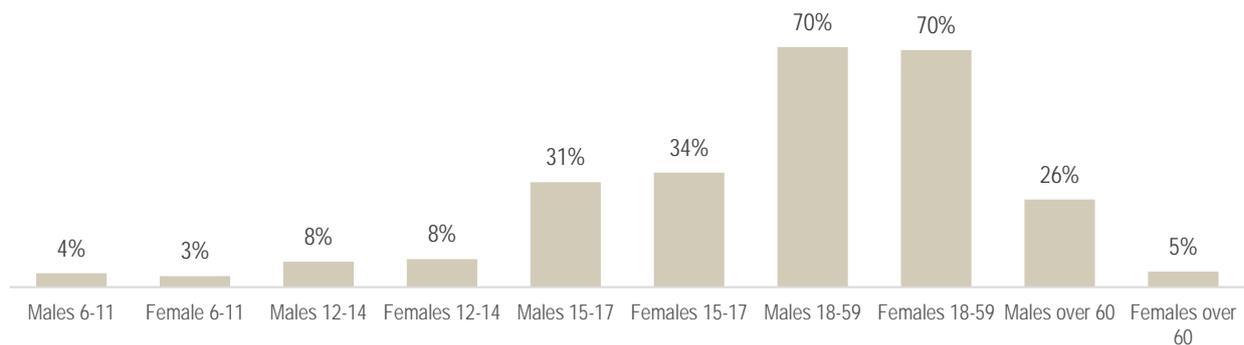
<sup>145</sup> Equivalent to 972 USD.

<sup>146</sup> Equivalent to 119 USD.

<sup>147</sup> Equivalent to 257 USD.

<sup>148</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

Figure 48: Proportion of household members in employment in the 30 days preceding data collection, by age and sex, out-of-camp IDP households



A higher proportion of out-of-camp IDP households have unemployed household members actively seeking employment, this is evidenced by 46% reporting so, a much higher proportion when compared to the other population groups (22% for host community and 19% for returnee households). Further, analysis for working household members under the age of 18 highlights a stark contrast between out-of-camp IDP households – 31% of all males aged 15-17 assessed reported being in employment – and other population groups – 13% of returnee households and 9% host community households.

This trend also holds when analysing females aged 15-17, with 34% of all out-of-camp IDP household members assessed in this category reporting being employed, in contrast to 15% of returnee households and 9% of host community households. For the 6-11 and 12-14 age categories assessed, for both sexes, less than 5% were in employment, except for out-of-camp IDP households who reported 8% for the 12-14 category (for both males and females in this group).

When cross-referenced with findings from the food coping strategy section, other findings suggest that more out-of-camp IDP households are reportedly sending children to work in order to overcome food shortages. This is indicative of alarmingly negative coping strategies for vulnerable households. While specific employment information could not be gathered for hard-to-reach areas, assessments carried out by other organisations confirm that in Tilkaif district children are being sent to work to supplement household income.<sup>149</sup>

Among households who reported having at least a member actively seeking employment, 90% of host community households reported the main obstacle to finding work to be an increase in competition. This was also reported by 86% for returnee households and 37% for out-of-camp IDP households. Although the findings for this question are not statistically significant it does highlight the perception by vulnerable host communities in terms of barriers to employment.

<sup>149</sup> ACTED, [Qawsiyat Needs Assessment](#), Tilkaif district (February 5, 2017).

Figure 49: Reported obstacles to finding work, host community and returnee (for those households reporting members actively seeking work)<sup>150:151</sup>

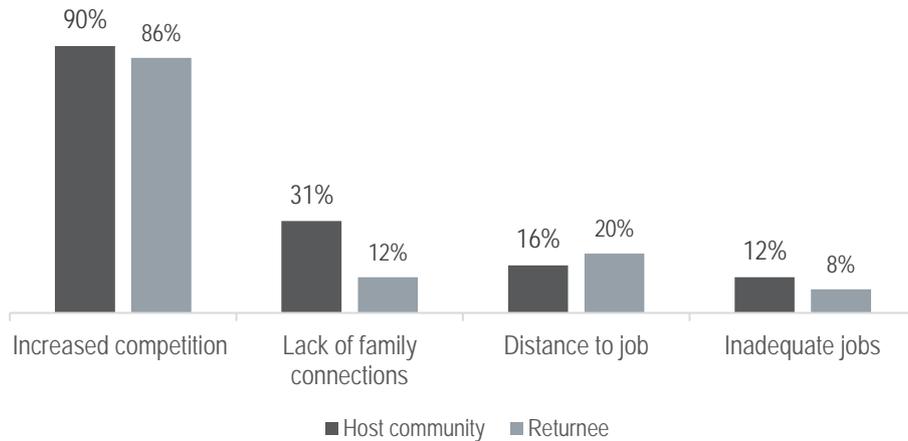
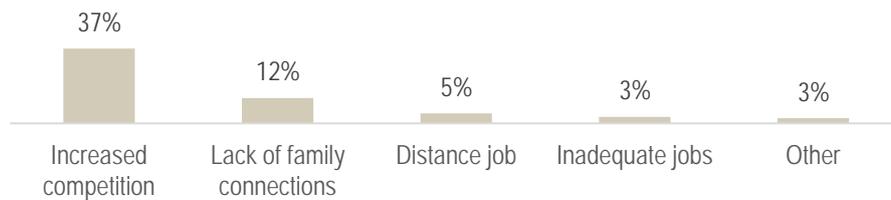


Figure 50: Reported obstacles to finding work, out-of-camp IDP (for those households reporting members actively seeking work)



### Communities in hard-to-reach areas

Across all hard-to-reach districts, KI reports of the level of stable income sources available to non-displaced and returnee population varied. In Shirqat (Salah al Din), the proportion of the assessed non-displaced population estimated to have access to a stable source of income was no more than half. Findings in other newly retaken and conflict districts where non-displaced were assessed varied more widely.

For returnees assessed in Kirkuk (Kirkuk), less than 25% of the population was estimated to have access to a stable income source. In Haditha and Shirqat, the proportion of the assessed returnee population estimated to have access to a stable source of income was no more than half.

Assessments undertaken in Al-Tahrir and Al-Karamah neighbourhoods (Mosul City) by ACTED, reveal that despite one or more family members ready to work<sup>152</sup> a high proportion remain unemployed. These assessments conclude that households have been spending their savings in order to meet their basic needs<sup>153</sup> and many are reducing their food intake or taking loans. While these findings are specific to Mosul City, these snapshots provide an understanding of issues and challenges that may be common to non-displaced and returning communities more generally in Iraq.

<sup>150</sup> There is no statistically significant association between population groups and obstacles to finding employment. Competition (significance test results: Persons Chi-Square = 0.26, p value = 0.872); distance (significance test results: Persons Chi-Square = 0.27, p value = 0.869); inadequate jobs (significance test results: Persons Chi-Square = 0.549, p value = 0.459) and family connections (significance test results: Persons Chi-Square = 3.027, p value = 0.82).

<sup>151</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%.

<sup>152</sup> [Mosul Neighbourhood Snapshot: AL TAHRIR](#) (ACTED, February 9, 2017). Case study conducted in Al-Tahrir neighbourhood (Mosul city) by ACTED reveals that "90% of households are reported to have 1 or more household members able and willing to work, but 55% of households report all such family members are currently unemployed".

<sup>153</sup> [Mosul Neighbourhood Snapshot: AL KARAMAH](#) (ACTED, February 9, 2017).

## Primary livelihood sources

### Households in accessible areas

Looking at livelihood sources reported in the 30 days preceding data collection, this section measures the extent to which households are vulnerable by analysing livelihood sources using four typologies: seasonal/short term, safety net, stable income and unemployment.<sup>154</sup> **Out-of-camp IDP households are less likely to have stable income sources compared to the other population groups and are more likely to engage in seasonal or short-term employment.** Aggregate findings show that less than half of out-of-camp IDP households source their primary livelihood from stable livelihood sources, compared to 56% for returnee households and 68% of host community households.

Only 6% of out-of-camp IDP households source their primary livelihoods from small business ownership which is significantly lower than the other two population groups (16% for host community households and 15% for returnee households), likely due to their displacement status. While a lower proportion of host community households reported skilled waged labour (9%) compared to other population groups, this could be indicative of less reliance on waged labour and a larger proportion sourcing livelihoods as civil servants through government pensions (24%).

Table 33: Primary livelihood sources in the 30 days preceding data collection, returnee and host community households<sup>155;156</sup>

	Returnee	Host community
<b>Seasonal / short term</b>	<b>46%</b>	<b>39%</b>
Agricultural waged labour	25%	19%
Skilled service labour	20%	15%
Low skill service	1%	5%
<b>Safety net</b>	<b>14%</b>	<b>18%</b>
Retirement fund	9%	14%
Social care	5%	4%
<b>Stable income</b>	<b>56%</b>	<b>68%</b>
Civil servant	16%	24%
Skilled waged labour	12%	9%
Small business owner	15%	16%
Trade vocation	6%	3%
Transportation	6%	11%
<b>No livelihood source</b>	<b>1%</b>	<b>2%</b>

<sup>154</sup> There is no statistically significant association between population groups and primary livelihood source. This was tested using the Chi-Square test.

<sup>155</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%.

<sup>156</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

Table 34: Primary livelihood sources in the 30 days preceding data collection, out-of-camp IDP households

	Out-of-camp IDP
<b>Seasonal / short term</b>	<b>48%</b>
Agricultural waged labour	32%
Skilled service labour	10%
Low skill service	6%
<b>Safety net</b>	<b>15%</b>
Retirement fund	9%
Social care	6%
<b>Stable income</b>	<b>46%</b>
Civil servant	14%
Skilled waged labour	11%
Small business owner	6%
Trade vocation	3%
Transportation	6%
<b>No livelihood source</b>	<b>5%</b>

Households sourcing livelihoods through seasonal or short-term labour often relied on agricultural waged labour, this was the case for 32% of out-of-camp IDP households, 25% of returnee households and 19% of host community households. **Twenty percent (20%) and 15% of returnee and host community households respectively, reported sourcing livelihoods through skilled service labour**, a much higher proportion when compared with out-of-camp IDP households (10%). Five percent (5%) of out-of-camp IDPs reported having no source of livelihood, which is higher when compared with 2% of returnee households and 1% of host community households.

Of the categories under the safety net typology, access to retirement fund as a primary livelihood source is marginally higher for host community households (14%) in contrast to 9% for both out-of-camp IDP households and returnee households. Female-headed households are more likely to source their main livelihoods using safety net income sources, this is evidenced by 27% of female-headed host community households reporting retirement fund as a primary livelihood source compared with 13% of male-headed host community households.

### Communities in hard-to-reach areas

In hard-to-reach areas, working as a civil servant was reportedly the primary source of income for the assessed non-displaced population in Shirqat, while agricultural waged labour was the primary source of income for the returnee population assessed in Kirkuk. In all other hard-to-reach districts where non-displaced and returnee populations were assessed, primary income sources reportedly varied.

### Monthly expenditure versus income and basic needs

#### Households in accessible areas

The survey also asked households about their average monthly household expenditures in the 30 days preceding data collection. Out-of-camp IDP households reported high expenditure averages per month on household expenditures: 502,883 IQD<sup>157</sup>. Host community and returnee households reported 463,550 IQD<sup>158</sup> and 419,141 IQD<sup>159</sup> respectively. **The higher average monthly household expenditure for out-of-camp IDP households can be attributed to a higher proportion being spent on rent (28%); an additional expense in comparison to those not displaced, as seen previously, or residing in camps.**

<sup>157</sup> Equivalent to 423 USD.

<sup>158</sup> Equivalent to 388 USD.

<sup>159</sup> Equivalent to 351 USD.

Across population groups the main household expenditure was food; ranging between 251,785 – 292,893 IQD<sup>160</sup> and amounting to an average of 266,906 IQD.<sup>161</sup> Host community households spent 63% of their average monthly household expenditures on food, compared with 61% for returnee households and 56% for out-of-camp IDP households. After food, across population groups the second and third most frequently reported household expenditures were rent and shelter, which showed significant variations across population groups.

Table 35: Breakdown of monthly expenditure on average (30 days preceding data collection), for host community and returnee households, in Iraqi Dinar (IQD) <sup>162</sup>

	Host community		Returnee	
	Amount	Percentage	Amount	Percentage
Food	292,893	63%	256,039	61%
Rent	53,178	11%	17,514	4%
Medical care	47,288	10%	30,042	7%
Electricity	41,356	9%	32,513	8%
Shelter	12,741	3%	58,639	14%
Education	11,382	2%	10,999	3%
Debt repayment	4,712	1%	13,395	3%

Table 36: Breakdown of monthly expenditure on average (30 days preceding data collection), for out-of-camp IDP households, in Iraqi Dinar (IQD)

	Out-of-camp IDP	
	Amount	Percentage
Food	251,785	50%
Rent	139,290	28%
Medical care	41,403	8%
Electricity	19,153	4%
Shelter	9,408	2%
Education	28,233	6%
Debt repayment	13,611	3%

For out-of-camp IDP households, the average monthly amount paid toward rent in the preceding 30 days of the assessment amounted to 139,290 IQD<sup>163</sup>; an equivalent of 28% of the total average monthly household expenditure and more than seven times the average monthly amount paid by returnees (4% of the total average monthly household expenditure) and more than double the average monthly amount paid by host community households (11% of the total average monthly household expenditure). When comparing the figures across population groups it is apparent that out-of-camp IDP households have more of a financial burden which could prevent access to other basic services as a result.

When compared to the other groups, returnee households spend more on shelter costs (not including rent) on average per month (58,639 IQD<sup>164</sup>, a much higher proportion than host community households who reported

<sup>160</sup> Equivalent to 211- 245 USD.

<sup>161</sup> Equivalent to 224 USD.

<sup>162</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

<sup>163</sup> Equivalent to 117 USD.

<sup>164</sup> Equivalent to 49 USD.

spending an average monthly amount of 12,741 IQD.<sup>165</sup> Although data was collected at different times, the average monthly amount paid toward shelter by out-of-camp IDP households is much lower than for both returnee and host community households (9,408 IQD<sup>166</sup>). For returnee households, this is believed to be a short-term cost as returnees resettle back in their original homes. A study carried out in al-Karamah neighbourhood in Mosul city highlights that returning populations were faced with damage to their homes which would require repairs; while specific to Mosul City this type of damage to homes could be common to returnee populations elsewhere in Iraq.<sup>167</sup>

Table 37: Average monthly income vs expenditure (30 days preceding data collection) at the household level, for host community and returnee (national level)<sup>168</sup>

	Host community	Returnee
Income (IQD)	627,255	653,832
Expenditure (IQD)	463,550	419,141
Income after expenditure (IQD)	163,705	234,691

Table 38: Average income vs monthly expenditure (30 days preceding data collection) at the household level, for out-of-camp IDP (national level)

	Out-of-camp IDP
Income (IQD)	529,968
Expenditure (IQD)	502,883
Income after expenditure (IQD)	27,085

Although none of the population groups at the national level reported a monthly deficit (both income and expenditure values were asked using the same recall period), out-of-camp IDP households had the smallest remaining amount on average (27,085 IQD<sup>169</sup>), compared to host community households (163,705 IQD<sup>170</sup>) and returnee households on average (234,691 IQD<sup>171</sup>). This shows that out-of-camp IDPs are faced with a smaller surplus or contingency amount for savings or for unforeseen costs.

When comparing the variance between income and expenditure at the governorate level, similar to the income section, out-of-camp IDP households show a wider range, 106,389 - 199,820 IQD<sup>172</sup> compared with returnee households (54,608 - 182,723 IQD<sup>173</sup>) but there are also five governorates reporting a deficit for out-of-camp IDP households on average (Anbar, Dahuk, Erbil, Ninewa and Salah al Din).

<sup>165</sup> Equivalent to 11 USD.

<sup>166</sup> Equivalent to 8 USD.

<sup>167</sup> [Mosul Neighbourhood Snapshot: AL KARAMAH](#)(ACTED, February 9, 2017).

<sup>168</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

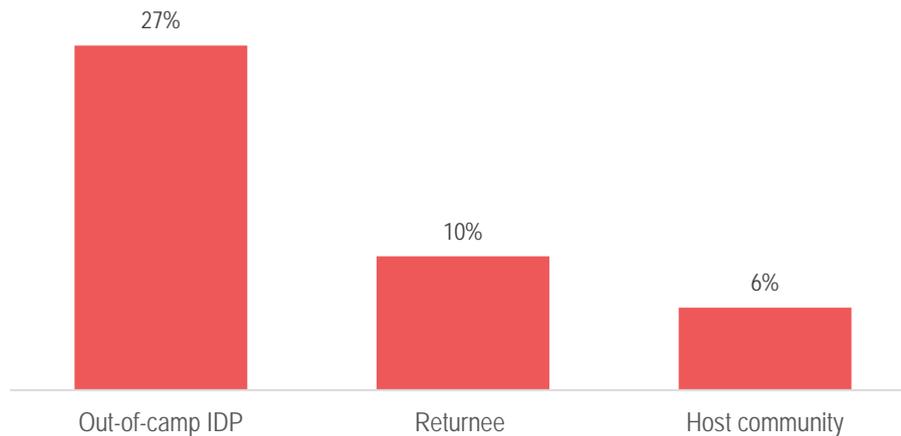
<sup>169</sup> Equivalent to 23 USD.

<sup>170</sup> Equivalent to 137 USD.

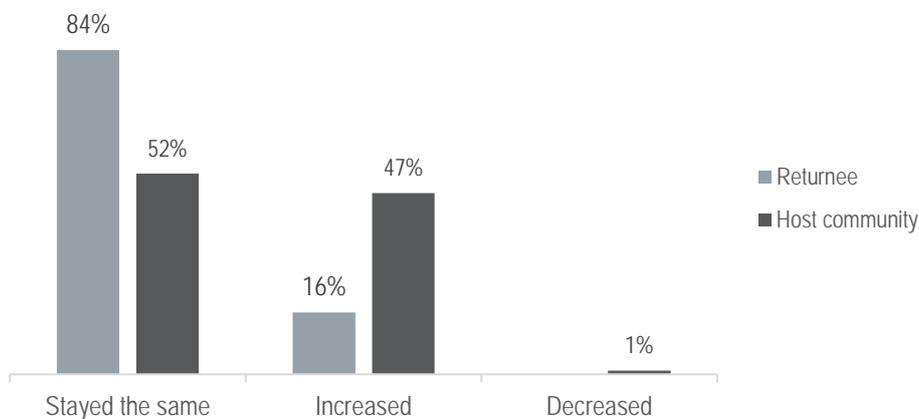
<sup>171</sup> Equivalent to 197 USD.

<sup>172</sup> Equivalent to 89 - 168 USD.

<sup>173</sup> Equivalent to 46 - 153 USD.

Figure 51: Proportion of households unable to meet basic needs, by population group<sup>174</sup>

Highlighting the comparative higher vulnerability of out-of-camp IDP households, **27% reported that they were unable to cover the cost of basic needs such as food, water, shelter and health in the preceding 30 days.**<sup>175</sup> This is much higher when contrasted with the 10% of returnee households and 6% of host community households and further explains the vulnerability of out-of-camp IDPs to the use of negative coping mechanisms (see sub-section on coping mechanisms).

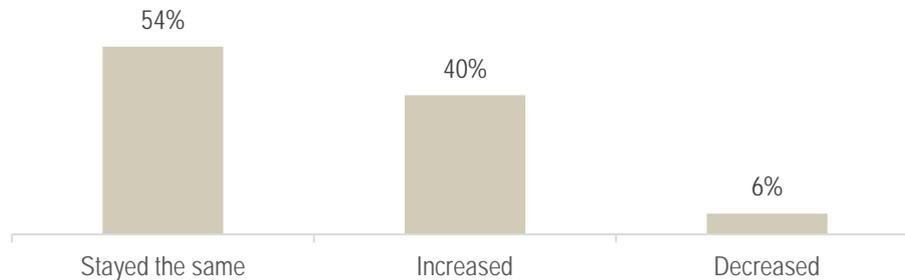
Figure 52: Proportion of households reporting change in the cost of basic needs over the three months preceding data collection, returnee and host community<sup>176</sup>

<sup>174</sup> There is a statistically significant association between population groups and the inability to furnish basic needs. Chi-square: 2518.91. P-value=0.000.

<sup>175</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%.

<sup>176</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

Figure 53: Proportion of households reporting change in the cost of basic needs over the preceding three months before data collection, out-of-camp IDP<sup>177</sup>



Across population groups, a significant proportion of households reported a rise in price of basic needs 47% of host community households reported an increase in the three months preceding data collection, followed by 41% of out-of-camp IDP and 16% of returnee households.

## Coping strategies and debt

### Households in accessible areas

This section looks at the ways in which households cope with limited or lack of livelihood sources to meet their basic needs, using the 30 days preceding data collection as the recall period. This is especially noteworthy where the household income is lower than the monthly expenditure needed to survive.

A much larger proportion of displaced population groups use coping strategies than non-displaced households. This is evidenced by 83% of in-camp IDP households and 60% out-of-camp households reporting use of coping strategies; a significantly lower proportion when compared to returnee and host community households (29% and 33% respectively). Forty percent (40%) of in-camp IDP households are selling the assistance they receive – the most frequently reported coping strategy across the assessed population group. This could be indicative of limited financial means but could also reflect the comparatively higher likelihood of in-camp IDP households to receive assistance in-kind. Further, over 25% of in-camp IDPs are using the following coping strategies: selling of assets, relying on charitable donations, spending of savings and taking on debt.

Table 39: Proportion of households using each coping strategy, by population group<sup>178</sup>

	Host community	Returnee
None	67%	71%
Sold assistance	0%	0%
Sold assets	4%	11%
Received charitable donations	3%	2%
Spent savings	14%	21%
Borrowed money (debt)	12%	2%
Received support from friends/ relatives	9%	6%
Reduced spending	8%	0%
Received humanitarian aid	1%	1%
Accessed previous income	4%	1%

<sup>177</sup> There is a statistically significant association between population groups and the inability to furnish basic needs. Chi-square: 32.204. P-value=0.000.

<sup>178</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%. IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

Table 40: Proportion of households using each coping strategy, by population group<sup>179</sup>

	In-camp IDP	Out-of-camp IDP
None	17%	40%
Sold assistance	40%	2%
Sold assets	31%	11%
Received charitable donations	27%	6%
Spent savings	25%	17%
Borrowed money (debt)	25%	24%
Received support from friends/relatives	18%	20%
Reduced spending	16%	10%
Received humanitarian aid	n/a <sup>180</sup>	17%
Accessed previous income	6%	5%
Received government aid	n/a <sup>181</sup>	8%

In terms of selling assets, in most cases these items consist of non-productive assets such as valuables or household items to fulfil basic needs. In-camp IDP households more frequently relied on spending savings as a coping strategy (25%), this was followed to a lesser extent by returnees, out-of-camp IDP and host community households (21%, 17% and 14% respectively).<sup>182</sup> However, of most concern is the utilisation of debt - a negative coping mechanism - as a temporary solution vis-à-vis unstable sources of income or where households have no source of livelihood at all.<sup>183</sup> **Around a quarter of both IDPs in and out-of-camps are currently in debt and are borrowing money as a coping strategy (25% and 24% respectively), which is more than double the percentage when compared to host community households, while returnee households reported this lowest at 2%. This finding highlights how debt is used to help cope with limited financial means.**

Across population groups, the average amount of debt is highest amongst host community households (IQD 4,487,267<sup>184</sup>) followed by out-of-camp IDPs (IQD 2,505,757<sup>185</sup>) and returnee households (IQD 1,312,172<sup>186</sup>). Furthermore, across population groups, borrowing from friends and families was the most frequently reported option to take on debt (94% by returnee households, followed by 93% and 22% for host community and out-of-camp households respectively).

Further analysis indicates that there is a slight variation between female and male-headed households in terms of taking on debt, with males more likely to do so across assessed population groups. For in-camp IDP households, 20% of female-headed households reported using debt as a coping strategy compared to 26% of male-headed ones.<sup>187</sup>

Disaggregated findings reveal displaced populations are still frequently taking on debt as a negative coping strategy (between 24% and 27% for both in and out-of-camp IDP households). The level of debt for both returnee and community households is significantly lower in comparison across both male and female-headed households; ranging between 10-12% for host community households and between 2-6% for returnee households.

When disaggregating findings on debt by households with and without a livelihood source, displaced populations appear more vulnerable to a lack of income, **48% of out-of-camps IDP households without a livelihood are**

<sup>179</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%.

<sup>180</sup> "n/a" indicates that these response options were not included in the Camp Profiling questionnaire used to assess in-camp IDP households.

<sup>181</sup> Ibid.

<sup>182</sup> [Access to Durable Solutions Among IDPs in Iraq \(April, 2017\).](#)

<sup>183</sup> [Access to Durable Solutions Among IDPs in Iraq \(April, 2017\).](#)

<sup>184</sup> Corresponds to USD 3,791 USD.

<sup>185</sup> Corresponds to USD 2,117 USD.

<sup>186</sup> Corresponds to USD 1,109 USD.

<sup>187</sup> There is a statistically significant association between the sex of the head of household and the use of debt as a coping strategy for in-camp IDP households only, this relationship is not significant for other population groups. Significance test results: Pearson Chi-Squared, p values > 0.05.

currently in debt, compared with 25% with a livelihood. For in-camp IDP households only 25% without an income source are in debt while 35% with a source of livelihood are in debt. While it is unclear why IDP households in camps are in less debt, the absence of rent to pay and the availability of assistance could explain this (further data could be gathered to look at whether short-term debt or loans are available to those enrolled in cash for work programmes) than those IDP households who do not reside in camp settings, findings suggest that out-of-camp IDPs have high monthly outgoings but are using debt when they have no source of income in order to cope.

Figure 54: Proportion of households reporting each reason for taking on debt, host community and returnee<sup>188</sup>

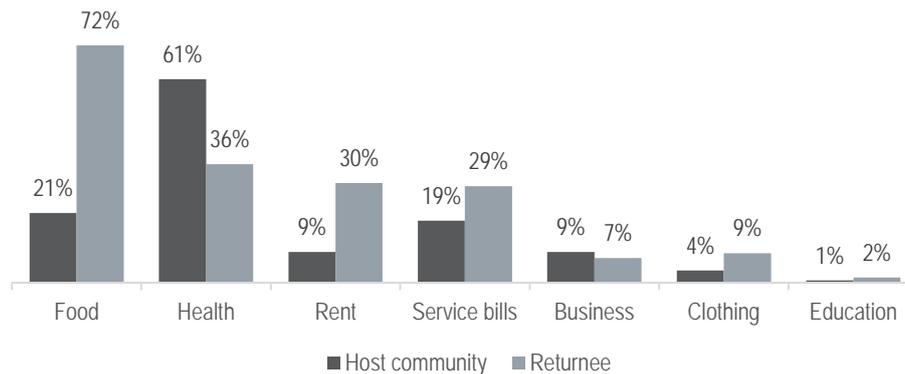
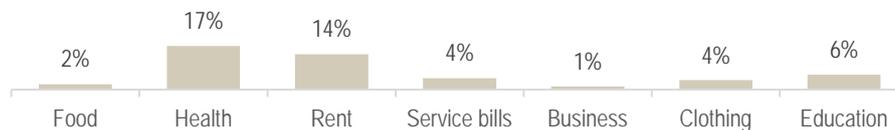


Figure 55: Proportion of households reporting each reason for taking on debt, out-of-camp IDP



As shown in figures 51 and 52, the reported reasons for taking on debt differ across the assessed groups. Whereas 72% of returnee households reported food as the main reason, a much lower proportion of host community and out-of-camp IDP households reported this (21% and 2% respectively).

### Communities in hard-to-reach areas

Across all hard-to-reach districts where non-displaced populations were assessed, taking on debt, spending savings and relying on support from family and friends were all reported as coping strategies used to deal with the lack of access to livelihood opportunities. Taking on debt was also reported as a coping strategy used in all hard-to-reach districts where returnees were assessed except for Abu Ghraib (Baghdad), Kirkuk (Kirkuk), Baiji and Shirqat (Salah al Din). In Kirkuk district, spending savings was reportedly a coping strategy across all assessed returnee populations.

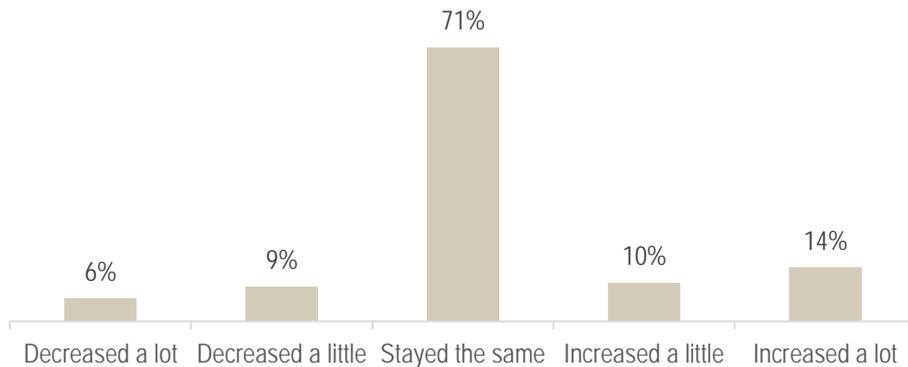
<sup>188</sup> Respondents were given the option to select more than one option when answering the question. As such, findings per population group add up to more than 100%. IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

## Perceived hospitality and crime levels

### Households in accessible areas

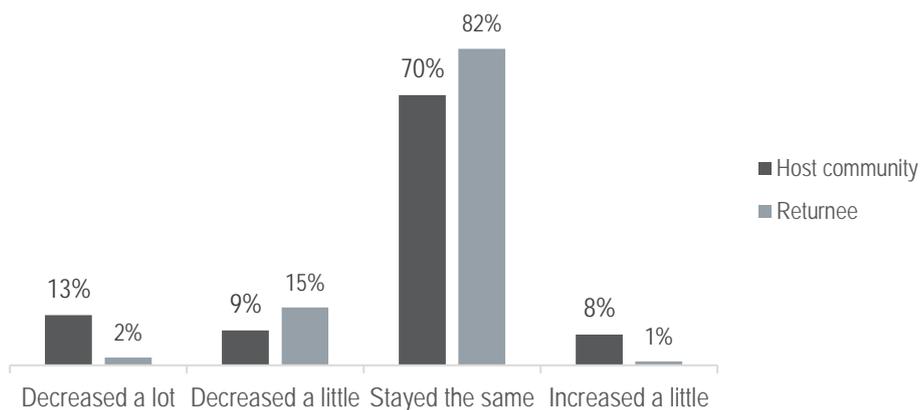
The majority of out-of-camp IDP households perceived hospitality levels in their areas to have stayed the same in the 30 days preceding data collection, as indicated by 71% of households. A similar proportion of households considered hospitality levels to have either increased or decreased, with 15% reporting they had decreased either a little or a lot, and 14% reporting they had increased either a little or a lot.

Figure 56: Perceived change in hospitality in the 30 days preceding data collection, out-of-camp IDP households



Across all population groups assessed crime levels had stayed the same over the 30 days preceding data collection. Unpacking this further, 16% of out-of-camp IDP households and 13% of host community households reported that crime levels had decreased a lot over the month preceding data collection. Only a relatively small proportion of households reported that the crime level has increased: 8% of host community households and 4% of out-of-camps IDP households, and less than 1% of returnee households reported crime levels to have increased a lot.

Figure 57: Perceived change in crime level in the 30 days preceding data collection, host community and returnee households<sup>189</sup>



### Communities in hard-to-reach areas

Of the six newly retaken and conflict districts where non-displaced populations were assessed, Baaj was the only district where perceived hospitality levels had reportedly decreased, while in the remaining five assessed districts perceptions regarding the change in hospitality levels amongst the non-displaced population were mixed.

<sup>189</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

For returnees assessed in hard-to-reach areas, hospitality levels had reportedly either increased or stayed the same in most districts (Abu Ghraib, Falluja, Heet, Balad, Daur, Tikrit and all hard-to-reach districts in Ninewa governorate where returnees were assessed), while they had reportedly decreased a lot in Kirkuk.

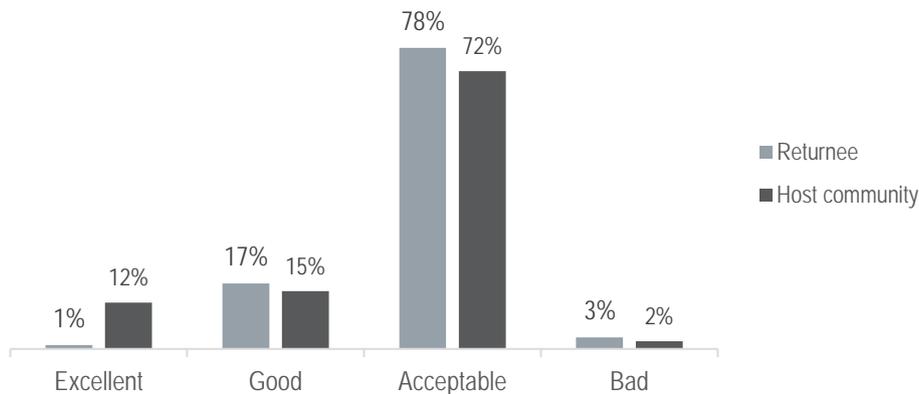
In hard-to-reach areas, petty crime had reportedly not increased among non-displaced populations in Haditha, while in all other newly retaken and conflict districts where non-displaced were assessed perceptions of petty crime levels varied. In almost all hard-to-reach districts where returnees were assessed, petty crime among returnee populations had reportedly not increased. The exceptions were Tilkaif (Ninewa) and Tooz (Salah al Din), where perceptions of petty crime levels varied.

## Access to services and communication<sup>190</sup>

### Households in accessible areas

The access to public services was mainly reported as acceptable across all population groups, **78% of returnee, 72% of host community and 61% of out-of-camp IDP households reported having an acceptable access to basic services in their communities.** Only 8% of out-of-camp IDP households reported having a bad access to basic services in their communities, followed by 3% of returnee and 2% of host community households. **Out of the 8% of out-of-camps IDP households that reported having bad access, the main issues faced to access services were the lack of sufficient funds to afford them (66%), and a lack of quality and efficiency of public services (54%).**

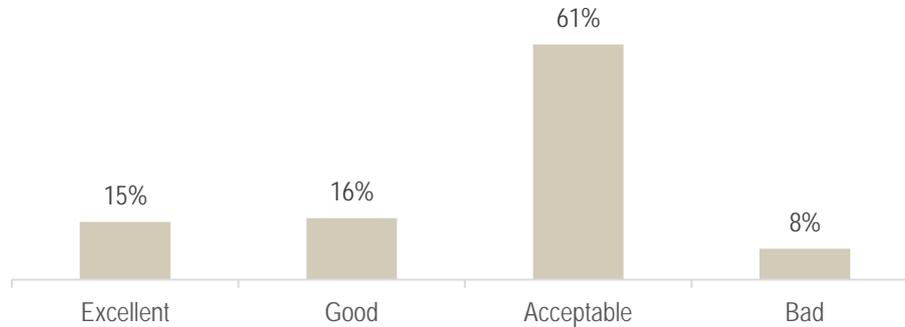
Figure 58: Perceptions regarding access to public services in the 30 days preceding data collection, host community and returnee households<sup>191</sup>



<sup>190</sup> Public services refer to education, health, shelter and other services.

<sup>191</sup> The findings were found not to be statistically significant using a Chi-square analysis.

Figure 59: Perceptions regarding access to public services in the 30 days preceding data collection, out-of-camp IDP households



Returnee households were most affected by a lack of access to internet, with 2% of returnee households reporting not having access to internet in the 30 days preceding data collection. This was the case for 41% of out-of-camp IDP households and 16% of host community households. This could prevent the access to up-to-date information on available assistance as well as the situation in their area of origin for displaced populations.

Figure 60: Access to internet in the 30 days preceding data collection, host community and returnee<sup>192,193</sup>

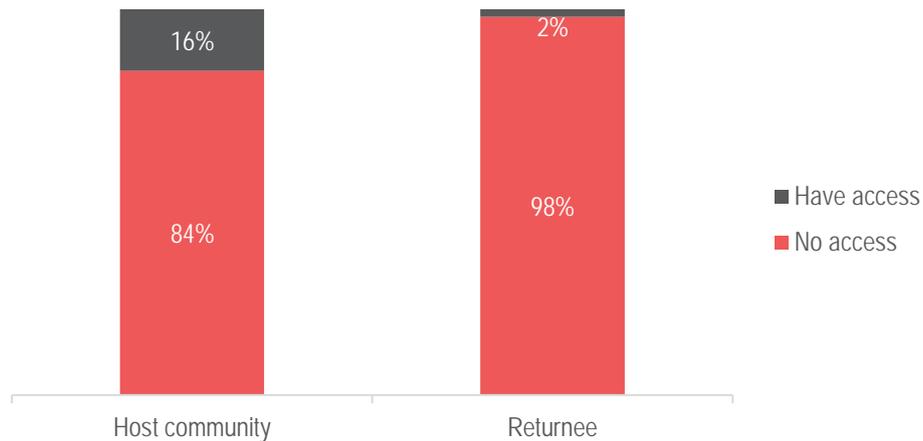
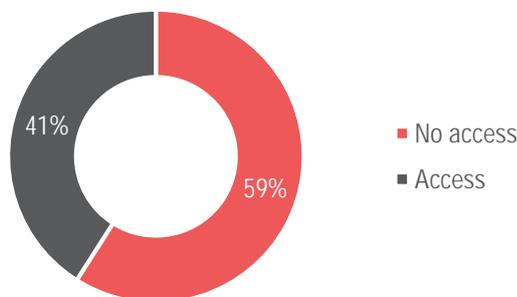


Figure 61: Access to internet in the 30 days preceding data collection, out-of-camp IDP households



<sup>192</sup> There is a statistically significant association between population groups and access to internet. Chi-square: 11.406. P-value=0.001.

<sup>193</sup> IDP population groups are presented separately from returnees and host communities for this indicator due to the difference in data collection timeframes and the use of a specific time-bound recall period for this indicator. Therefore, respondents in these population groups provided responses based on different time periods.

### Communities in hard-to-reach areas

Across all newly retaken and conflict districts assessed, the non-displaced population was reported to have varying levels of access to services, with the exception of Hawiga (Kirkuk) where KIs reported access to be very bad. The same was reported for returnees assessed in Kirkuk (Kirkuk). Perceptions of the level of access to services in all other hard-to-reach districts where returnees were assessed varied, except in Balad, where KIs reported access to be acceptable.

## Education

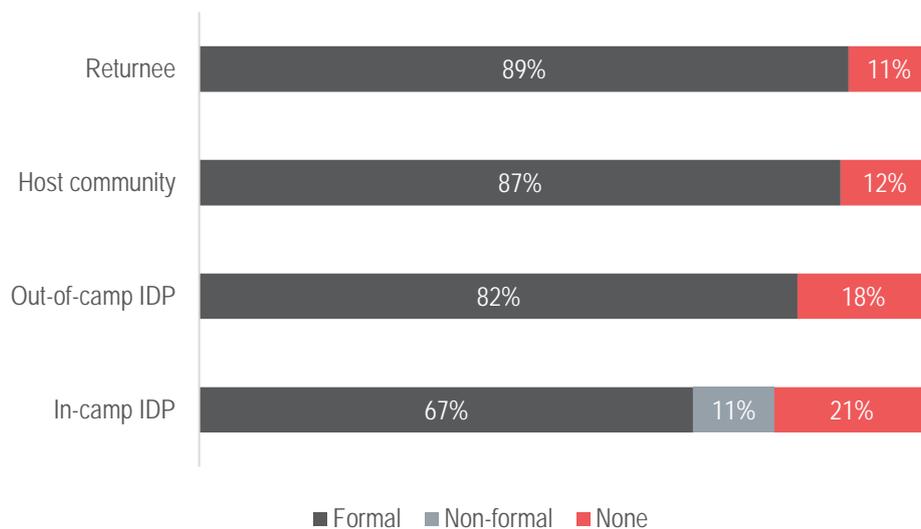
This section outlines findings regarding attendance of education, including both formal schooling and informal services. Findings regarding attendance are disaggregated by age and sex for all school-aged children (6-17 years) for the households in accessible areas population groups. Key barriers to accessing educational services are also provided. For communities in hard-to-reach areas an overview is presented based on findings reported by KIs.

### Access to formal and informal education<sup>194</sup>

#### Households in accessible areas

Across all population groups, the majority of households with school-aged children reported that their children were receiving formal education. Returnee and host community households indicated similar levels of access to formal education – 89% and 87%, respectively – whereas **82% of out-of-camp IDP households and only 67% of in-camp IDP households reported that their children were receiving formal education**. This could reflect a lesser ability amongst displaced populations to access formal education for their school-aged children. Access to informal educational services was reported by less than 0.5% of households in all groups except for in-camp IDP households, of whom 11% reported their children were accessing non-formal services. This could potentially be explained by greater accessibility of these services within a camp context, where humanitarian actors are providing informal education directly in the camp.

Figure 62: Households with school-aged children, reported type of education received, by population group<sup>195</sup>



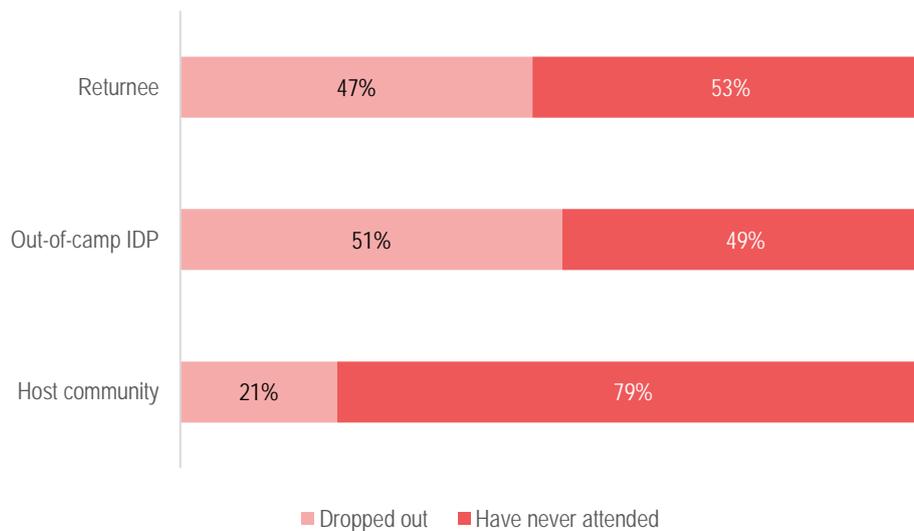
Of those households reporting that their school-aged children were receiving no education, 79% of host community households indicated that their children had never attended any schooling, whereas 21% indicated that their children had dropped out. This was more evenly divided for both out-of-camp IDPs and for returnees, with 55% of returnee households and 43% of out-of-camp IDP households reporting that their children had dropped out.<sup>196</sup> These differences could again be attributed to the impact of displacement on the ability of children to remain in school – both for those groups who are still displaced, and for those who have recently returned from displacement. Ongoing conflict throughout the country has also likely disrupted the ability to attend school.

<sup>194</sup> Data collection for all population groups occurred in either May or August 2017, when formal schools may have been closed for summer recess. In these cases, enumerators asked households to respond based on the most recent school term that was in session.

<sup>195</sup> There is a statistically significant association between population group and type of education received. Chi-squared p value < 0.05.

<sup>196</sup> Results for in-camp IDPs are not available, as this indicator was not included in the Camp Profiling questionnaire.

Figure 63: Proportion of households with school-aged children not in education: never attended versus dropped out of school, by population group<sup>197,198,199</sup>



### Communities in hard-to-reach areas

For the non-displaced population assessed in Haditha (Anbar), Mosul (Ninewa) and Shirqat (Salah al Din) it was reported that less than 25% of school-aged children had never attended school, while in the remaining newly retaken and conflict districts where non-displaced were assessed KI responses varied.

For returnees assessed in hard-to-reach areas it was reported that less than 25% of school-aged children had never attended education in Haditha (Anbar), Hamdaniya (Ninewa), Mosul (Ninewa), Tilkaif (Ninewa) and Tooz (Salah al Din), while KI responses in other districts varied. The only hard-to-reach district where a dropout rate of over 75% was reported for returnees was Kirkuk; reported dropout rates across the rest of the hard-to-reach districts where returnees were assessed varied.

### Attendance at formal and informal education

#### Households in accessible areas

Across all population groups, there is a consistent trend of younger children (6-11) attending formal education at a higher rate than those in the 12-14 age group and 15-17 age group. Male children were also more frequently reported to be in school than their female counterparts across all groups. In-camp IDP households showed the lowest attendance in formal education across all age groups. In particular, only one-third of households reported their female children in the 15-17 age category were attending formal education. Host community rates were highest for children up to age 14, but then drop for girls in the 15-17 category: 55% of households with children reported their girls in attendance in the 15-17 age category, down from 74% in the 12-14 age category. Particularly in older age groups, the high drop-out rate for girls could be related to high child marriage rates. UNICEF reports that 24% of girls in Iraq marry before the age of 18. The same report notes that 5% of children in Iraq partake in child labour,<sup>200</sup> which also impacts the ability of older children to attend school.

In-camp IDP households reported the lowest level of formal education attendance. Of households with children, only 54% of households reported their children in the 6-11 age category attending school. In the highest age group, this fell to only 34% for and 38% in the oldest male age group.

<sup>197</sup> UNICEF, [The Costs and Benefits of Education in Iraq](#), 2017.

<sup>198</sup> There is a statistically significant association between population group and having dropped out, versus having never attended. Chi-squared p value < 0.05.

<sup>199</sup> Results for in-camp IDPs are not available, as this indicator was not included in the Camp Profiling questionnaire.

<sup>200</sup> UNICEF, [The State of the World's Children](#), 2016.

Table 41: Proportion of households with school-aged children reporting that their children were attending formal education, by age group, sex, and population group<sup>201</sup>

	Male 6-11	Female 6-11	Male 12-14	Female 12-14	Male 15-17	Female 15-17
Host community	84%	81%	83%	74%	78%	55%
In-camp IDP	52%	49%	49%	43%	38%	34%
Out-of-camp IDP	73%	72%	78%	67%	64%	51%
Returnee	80%	67%	77%	71%	79%	65%

### Communities in hard-to-reach areas

In hard-to-reach areas, in all assessed non-displaced populations in Hawiga (Kirkuk) and Baaj (Ninewa), no more than 25% of school-aged children were reportedly attending either formal or informal education. The same was reported for the assessed returnee population in Kirkuk, while in other hard-to-reach districts where returnees were assessed responses varied.

### Barriers to accessing education

#### Households in accessible areas

The most common reason identified by host community households with school aged children for non-attendance at school was cost (16%) followed by the school being too far away (8%). For returnees, notably 28% of households reported the poor condition of facilities, reflecting the impact of the conflict on school buildings, and 13% reported cost. The most often reported type of cost preventing school attendance across all population groups was transportation, followed by uniform costs.<sup>202</sup> In-camp IDP household and out-of-camp IDP household findings were not statistically representative.

Table 42: Most frequently reported reasons for children not attending school, host community and returnee households<sup>203; 204; 205</sup>

	Host community	Returnee
<i>Cost</i>	16%	12%
<i>No space in school, or school did not answer or allow registration</i>	2%	7%
<i>School in bad condition</i>	0%	28%
<i>Poor quality schooling</i>	0%	7%
<i>Children need to work</i>	0%	1%
<i>Early marriage</i>	3%	1%
<i>Recent or continuous movement</i>	2%	2%
<i>Security concerns</i>	0%	1%
<i>Missed too much school</i>	0%	3%
<i>School too far away</i>	8%	2%
<i>No transport available</i>	2%	4%
<i>Too young to enrol</i>	69%	51%

<sup>201</sup> There is a statistically significant difference between groups when accessing formal education. Tukey Anova p value < 0.05.

<sup>202</sup> The data used is taken from a subset of MCNA. The sample size is too small to be statistically representative. Chi-squared results are unreliable.

<sup>203</sup> There is no statistically significant association between the space, disabled and population group. Chi-squared p value > 0.05. For all other variables there was a statistically significant association between them and population group: chi-squared p value < 0.05.

<sup>204</sup> Respondents could select multiple response options.

<sup>205</sup> 'Too young' variable was assessed in error, but has been included for completeness of results.

### Communities in hard-to-reach areas

In hard-to-reach areas, the quality of the curriculum was identified as a barrier to accessing education in all districts where non-displaced populations were assessed. Distance to school was also identified as a barrier in all districts where non-displaced were assessed except for Hawiga (Kirkuk) and Shirqat (Salah al Din), while security was noted as a barrier in Hawiga (Kirkuk), Ba'aj (Ninewa) and Shirqat (Salah al Din).

Similarly to non-displaced, the quality of the curriculum was identified as a barrier to accessing education in all hard-to-reach districts where returnees were assessed, except in Sinjar (Ninewa), Baiji (Salah al Din) and Samarra (Salah al Din). Distance to school was also identified as a barrier in all assessed districts except Kirkuk (Kirkuk) and Tooz (Salah al Din). By contrast, all returnee populations assessed in Kirkuk (Kirkuk) reported that security was an issue, thus preventing children from accessing education even if there was a school nearby. The cost associated with sending children to school was reportedly a barrier in all hard-to-reach districts in Ninewa governorate where returnees were assessed.

## CONCLUSION

The humanitarian response in Iraq has evolved over the course of 2017, shifting from a primary focus on new and protracted displacement to a broader scope that encompasses new forms of conflict-affected populations. In particular, the needs of returnees, IDP host communities, and non-displaced communities previously under the control of so-called ISIL are of increasing concern, in addition to displaced groups who are unable to return to their areas of origin.

In light of this context, the primary aim of this assessment was to provide nationwide, multi-sectoral information regarding the needs of all conflict-affected population groups. Through a mixed-methods approach, the assessment was able to capture the needs of households in areas that could be directly accessed, as well as gain a greater understanding of the situation in hard-to-reach areas that have likely been most impacted by conflict. As a result, the findings presented in this report also allow for varying extents of comparability between groups, governorates and districts, in order to highlight particularly vulnerable subsets of the conflict-affected population in Iraq.

**Findings from the assessment reveal that the priority needs of all population groups remain centred on improved access to basic necessities such as food and healthcare services.** The majority of out-of-camp IDP, in-camp IDP and returnee households in accessible areas reported food as a priority need, in addition to nearly half of host community households. Medical care is another key need, as indicated by the majority of host community households, as well as nearly half of returnee and out-of-camp IDP households, and 22% of in-camp IDP households. A further 21% of host community and 12% of returnee households cited psychosocial support specifically as a top need. The priority needs of non-displaced and returnee populations in hard-to-reach areas echo these findings, with an even greater emphasis on basic needs – all KIs from either group reported clothing as a priority, in addition to all non-displaced KIs noting a need for winterisation items and all returnee KIs reporting a need for footwear.

In addition to meeting basic needs, the cessation of major conflict also signals a need for aid actors to shift towards stabilisation and recovery. As returns increase in 2018, conflict-affected populations will also be looking to revive income generation and livelihood activities, which is again reflected in the findings: around half of IDP as well as approximately 40% of host community and returnee households in accessible areas reported employment as a primary need. Moreover, half of out-of-camp IDP households, followed by 38% of returnee and one-third of host community households, cited a form of seasonal or short-term employment as their primary livelihood source, such as agricultural wage, skilled wage or low-skilled service labour, in the month preceding data collection. Similarly, in hard-to-reach areas, both non-displaced and returnee populations assessed reported agricultural wage labour as a primary livelihood source. **These findings confirm that greater access to sustained livelihoods sources is a key need; in areas where agriculture is the predominant source of employment, particular attention should be paid to the impact of land contamination and other effects of the conflict on the capacity for agricultural work.**

Assessment findings have also shown how the last few years of conflict have impacted the state of critical infrastructure, especially in newly retaken and conflict areas. **In particular, non-displaced communities previously held by ISIL have seen damage to water infrastructure**, as evidenced by communities in these areas reporting water trucking as a primary source of drinking water. Both non-displaced and returnee KI also cited communal water points as a primary drinking water source. A minority of KIs from either population group also indicated that some households are digging wells and using river water for drinking and for washing, further highlighting a lack of access to functional water infrastructure. Damaged infrastructure coupled with water shortages as a result of climate change puts these populations at risk of water insecurity, which is predicted to fuel future social tensions and potentially further conflict.

The impact of the conflict can also be seen in health and educational infrastructure. For example, a lack of medicines at hospitals and an inability to afford medicines from pharmacies were commonly reported barriers to accessing healthcare across all population groups in accessible areas. These barriers were also reported in newly retaken and conflict districts where non-displaced populations were assessed. Similarly, with respect to education, the poor physical condition of schools was a commonly reported barrier to accessing education for non-displaced and returnee populations in hard-to-reach areas. The high proportions of children not attending formal education

estimated by KIs in hard-to-reach communities further demonstrates how these areas have experienced the impact of conflict on infrastructure.

Public services have also been weakened by the conflict, and will need to be bolstered in order to meet the needs of the population. In particular, expansion of services is necessary to support conflict-affected populations, many of whom face difficulties in meeting their basic needs. For instance, the Public Distribution System (PDS), which provides government-subsidised food rations on a monthly basis as well as an annual kerosene distribution, does not appear to be functioning at full capacity; this is reflected by the vast majority of households in accessible areas reporting that they had received a half-ration, consisting of only one or two food items, as opposed to a full ration at the time of their last collection. In newly retaken and conflict areas, **lesser access to food assistance, coupled with lesser access to markets, highlights the comparative vulnerability of non-displaced populations with respect to food security.**

**Lastly, assessment findings highlight the need to continue supporting displaced populations with humanitarian assistance even as shifts towards stabilisation and recovery are ongoing.** Given that nearly three-quarters of IDP households reported no intentions to move in the three months following data collection, continued and protracted displacement can be anticipated into 2018. However, there is a need for further research and more frequent monitoring of intentions to better inform assistance to IDPs. In particular, IDPs living out of camps are in need of shelter assistance, given the high proportion of out-of-camp IDP households residing in critical shelter types. This is evidenced by over one-third of households in this population group residing in either collective centres or informal sites, and 15% who are specifically living in unfinished or religious buildings. Moreover, a quarter of returnee households also live in collective centres, indicating that **even after leaving their location of displacement and returning to their areas of origin, these groups still face distinct vulnerabilities with respect to shelter.**

## ANNEXES

## Annex 1: Returnee sample sizes by district

Governorate	District	Sample size
Anbar	Ramadi	92
Baghdad	Abu Ghraib	32
	Adhamia	6
	Kadhimia	53
	Mada'in	6
	Mahmoudiya	117
Dahuk	Amedi	6
	Dahuk	24
	Sumel	54
	Zakho	12
Diyala	Khalis	57
	Khanaqin	192
	Kifri	12
	Muqdadiya	103
Erbil	Erbil	126
	Makhmur	150
	Shaqlawā	24
	Soran	6
Kerbala	Hindiya	1
Kirkuk	Dabes	20
	Daquq	38
	Hawiga	1
	Kirkuk	314
Najaf	Najaf	23
Ninewa	Akre	6
Sulaymaniyah	Sulaymaniyah	42
Wasit	Kut	18
	Na'maniya	36