**IRAQ** 

# Comparative Multi-Cluster Assessment of IDPs Living in Camps

Assessment Report Round IX

**April** 2018



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#### **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's mission is 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 interagency aid coordination mechanisms. For more information please visit our website: <a href="www.reach-initiative.org">www.reach-initiative.org</a>. You can contact us directly at: <a href="mailto:geneva@reach-initiative.org">geneva@reach-initiative.org</a> and follow us on Twitter <a href="mailto:geneva@reach-initiative.org">geneva@reach-initiative.org</a> and follow us on Twitter <a href="mailto:geneva@reach-initiative.org">geneva@reach-initiative.org</a> and follow us on Twitter





# **EXECUTIVE SUMMARY**

Iraq has endured a displacement crisis since 2014, as a result of clashes between the so-called Islamic State in Iraq and the Levant (ISIL) and the Iraqi Security Forces (ISF) of the Iraqi government. Four major waves of mass displacement have occurred alongside multiple smaller cases since 2014, including displacement resulting from the Mosul military operation beginning October 2016. As of March 2018, 2.27 million people remain internally displaced,¹ including over 580,000 residing in formal camp settings. January 2018 marked the first time since the crisis began where the number of people that have returned to their area of origin exceeded the number who remain displaced.² The shifting context has led to a new phase in the Camp Coordination and Camp Management (CCCM) Cluster national strategy, as increasing returns signal the need to consolidate and phase out the operation of formal IDP camps over time. To guide the phase-out process, camps with relatively poorer services and infrastructure will be targeted first for closure, with residents given the option to move to camps that will remain open in the longer term.

In order to inform effective planning processes regarding camp consolidation, and to monitor the needs of IDP households continuing to reside in formal camps, REACH and the CCCM Cluster in Iraq conducted a nationwide multi-sector camp profiling assessment between 12 December 2017 and 14 January 2018. This assessment was the ninth round of camp profiling conducted jointly by REACH and CCCM, in which 5,591 household-level interviews were conducted across 61 formal IDP camps in 11 governorates of Iraq.<sup>3</sup> This report analyses and compares camp profiling data captured during previous assessment rounds with the latest data from <a href="Camp Directory Round 9">Camp Directory Round 9</a>; providing a longitudinal and geographical comparative analysis of the situation in formal camps at the governorate level.<sup>4</sup>

One of the main findings of this assessment was that remaining in-camp IDP households were **increasingly reliant on humanitarian and government aid** to meet their short-term food and household needs, with this proportion rising from 10% (humanitarian aid) and 1% (government aid) in May 2017, to 43% and 33% respectively by January 2018. This heavy reliance on aid was further illustrated by almost half of households reporting that assistance from UN agencies or international organisations was one of their main food sources and by 76% of households that reported food as a top priority need.

Although the proportion of IDP households in camps with no access at all to a livelihoods source, had dropped from 32% to 10% between May 2017 and January 2018, the simultaneous increase in reliance on aid as a source witnessed during the same period, indicates a lack of access to more sustainable sources. Indeed, 47% of the 87% of in-camp households that reported information needs, stated employment opportunities as a top-three information need. Lack of access to sustainable sources was further highlighted by 77% of households resorting to livelihood coping strategies, such as selling assistance, taking on debt, and spending savings. Furthermore, this assessment found that IDPs remaining in camps, had shifted from selling assistance and spending savings towards taking on debt to meet their needs, indicating exhausted resources.

Another key finding was the **increase in the number of female-headed households** from 10% in round 8, to 15% in round 9. Female-headed household are 63% more likely to be widowed and have a greater tendency to rely on less stable livelihood sources, with 26% of female-headed households reliant on gifts, in comparison to 13% of men. Similarly the average the average income from wages per month was 169,319 IQD (142 USD) for female-headed households compared to 222,723 IQD (187 USD) for male-headed households.

Finally, the assessment found an increase in the number of children between 6 and 11 years old attending formal education to 54% in round 8 to 74% in round 9. This is a return to the same level of enrolment seen in round 7 (74%, December 2016-January 2017). It is suggested that this oscillating trend is explained by an improvement in formal education services at Mosul emergency camps, where previously a low number of children had access to formal education due to their recent formation at the time of round 8 (April-May 2017) data collection.

Unless specified otherwise, the data refers to camp profiling round 9.





<sup>&</sup>lt;sup>1</sup> International Organisation for Migration, <u>Displacement Tracking Database</u> (IOM-DTM), March 2018.

<sup>&</sup>lt;sup>2</sup> IOM-Iraq Press Release, January 12, 2018.

<sup>&</sup>lt;sup>3</sup> Anbar, Baghdad, Dahuk, Diyala, Erbil, Kerbala, Kirkuk, Najaf, Ninewa, Salah al-Din, and Sulaymaniyah governorates.

Another positive finding included an increase in the number of households reporting relative freedom of movement to temporarily enter and exit the camps in order to access markets of livelihood opportunities (round 9 96%, round 8 85%).

As the camp phase-out process begins, it is important that camp consolidations and closures do not diminish the social, economic and security situations of the households who remain displaced in informal IDP camps.

# **Key Findings by Sector**

#### Food security

- The Food Consumption Score (FCS) in profiling round 9 found that 96% of households had acceptable FCS (≥42) compared to 88% in round 8 (April-May 2017), while 4% were borderline (28-42 FCS) compared to 10% in round 8.
- The majority of households (58%) reported purchasing with cash as their primary source for food, followed by UN assistance or international organisations (49%) and purchasing with credit (22%).<sup>5</sup>
- 48% of households reported receiving public distribution system (PDS) assistance at least monthly, while 13% received it every three months, and 39% did not receive PDS in the three months preceding data collection.

#### Livelihoods

- The proportion of households reporting no livelihood source in the thirty days preceding data collection has decreased, from 19% in April 2016 and 32% in May 2017 to 10% during round 9 (December 2017-January 2018). This decrease may be explained by the increase in the proportion of households citing assistance as a primary livelihood source (i.e. 43% and 33% of HHs relied on humanitarian and government aid respectively as their source of livelihood, compared to 10% and 1% in round 8).
- Female-headed households were more likely to report not having a source of income (17%) compared to
  male-headed household heads (9%)Female-headed households tended to rely on less stable livelihood
  sources, leaving them more vulnerable and reliant on coping strategies to meet their basic needs. This is
  evident through a higher reliance on less stable sources of income such as pensions, humanitarian aid,
  government aid, gifts, and social care (i.e. disability allowance).
- The proportion of households reporting the use of livelihood coping strategies (i.e. selling assistance, taking
  on debt, and spending savings) in the thirty days prior to data collection was especially high in Dahuk, Ninewa,
  and Salah al-Din (between 91% and 93% of households in these governorates reported resorting to such
  strategies).<sup>5</sup>
- 69% of households reported at least one member working in the thirty days preceding round 9 data collection.

#### Health

- The most frequently cited difficulties in accessing healthcare highlighted increasing inability to afford healthcare services. The top three difficulties were the cost of healthcare being too high (79% in round 9, 66% in round 8), insufficient funds to purchase medicine (53% in round 9, 41% in round 8) and no medicine being available at the hospital (17% in round 9, 24% in round 8).
- Although 98% of households reported having a healthcare facility within walking distance of their home, 40% of households that required healthcare in the thirty days prior to data collection and sought treatment reported having experienced problems in doing so.
- Almost half of households reported receiving healthcare at public hospitals or clinics (47%), followed by 30% of households that received it in a private hospital, and 23% receiving treatment in an NGO clinic.
- Cost of healthcare was the most commonly cited difficulty faced by households that sought treatment.
   However, the households who reported so were also much more likely to be accessing private healthcare services (67%) compared to the national level (30%).

<sup>&</sup>lt;sup>5</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.





#### Shelter and non-food items (NFIs)

- As in previous camp profiling rounds, tents remain the most common shelter type, with 85% of assessed households nationwide residing in tents. The majority of tents have secondary covers (85%) and a cement base (68%).
- Regarding priority NFIs, households reported a need for seasonal items such as fuel for heating (46%), fuel storage (38%), and winter clothes (33%).

#### Water, Sanitation, and Hygiene (WASH)

- 61% of households across the country relied on network water outside of their shelter as their primary source for drinking water.
- In both round 8 and round 9 of data collection, all households in Kerbala reported buying their drinking water in shops. In Najaf and Baghdad the situation has improved since round 8, with only 7% and 19% buying water in shops respectively, compared to 100% and 49% previously: relieving a financial burden on households.
- Nationally, 16% of households reported issues with the water quality ('looks dirty, is salty, tastes bad, smells bad'), whereas this was higher in Dahuk and Diyala (44% of households reported so in these governorates).
- At the national level, 92% of households reported having had no water shortages in the thirty days prior to data collection. However, water shortages were concerning in Anbar, Baghdad, Ninewa, and Salah al-Din (see table 9).

#### CCCM

- 11% of households reported having made a complaint in the three months preceding data collection, in comparison to 17% in round 8. Of these households, 33% of households reported that action was taken in response to the complaint. This is an increase compared to the 8th round of camp profiling, where less than 10% of households reported action being taken in response to their complaint.
- 96% of households across the country were aware of existing camp management committees.

#### Education

- There was an increase in the number of children between 6 and 11 years old attending formal education from 54% in round 8 to 74% in round 9.
- 74% of children between 6 and 11 years old were attending formal education at the time of the assessment, with 56% of children aged between 12 and 17 years old.
- The main reasons reported by adult respondents for children not attending school were 'child is disinterested' (40%), followed by the 'school costs' (11%), and 'missed too much to make up for' (5%).6

<sup>&</sup>lt;sup>6</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.





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# **List of Acronyms**

AoO Area of Origin
CCCM Camp Coordination and Camp Management
CMC Camp Management Committee

**DDM** Directory of Displacement and Migration

FCS Food Consumption Score
GPS Global Positioning System
Head of Household

**HH** Household

**IDP** Internally Displaced Person

**IOM-DTM** International Organisation for Migration-Displacement Tracking Database

IQD Iraqi dinar

ISIL Islamic State in Iraq and the Levant

KI Key Informant

**MoDM** Ministry of Displacement and Migration

NFI Non-Food Items
ODK Open Data Kit

PDS Public Distribution System RHU Residential Housing Units

**UN** United Nations

**WASH** Water, Sanitation, and Hygiene

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# Introduction

Iraq has endured a displacement crisis since 2014, as a result of clashes between the so called Islamic State in Iraq and the Levant (ISIL) and the Iraqi government. Four major waves of mass displacement have occurred alongside multiple smaller cases since 2014, including displacement resulting from the Mosul military operation beginning October 2016. As of March 2018, 2.27 million people remain internally displaced, including over 580,000 residing in formal camp settings.<sup>7</sup>

While new displacements continue, notably in western Anbar, western Kirkuk, and northern Salah al-Din,<sup>8</sup> the overall number of IDPs has decreased considerably as people have started to return to their areas of origin.<sup>9</sup> In response to these movements, the CCCM Cluster has developed a camp consolidation and phase-out strategy with accompanying tools and guidelines to inform discussions. For this protracted crisis in a rapidly changing context, a clear and regular monitoring of camps is essential in order to have a comprehensive understanding of the existing gaps and needs within camps; updated information on household needs in camps informs the planning of a more effective humanitarian response. The CCCM Cluster and REACH Quarterly IDP Camp Profiling assessments thus aim to provide frequent updated information on developments, needs, and gaps in all IDP camps across Iraq, in particular, to highlight priority household needs in order to inform the planning of a more effective humanitarian response in light of the rapidly changing context of new displacements and returns.

In March 2018, key findings from the December – January 2018 round of data were disseminated by the CCCM Cluster and REACH Initiative as a Quarterly IDP Camp Directory, including individual profiles and camp infrastructure maps for each camp assessed. 10 The profiles include key sectoral findings in relation to core CCCM and SPHERE standards as well as information collected from camp management and updated infrastructure maps. 11 This report analyses and compares profiling data captured during previous assessment rounds to the latest data from Camp Directory Round 9 and provides a comparative analysis of the situation in formal camps across governorates. Camp Directory Round 9 provides an overview of camp conditions and household needs for each individual camp, whereas this report serves to provide both a longitudinal and geographic comparative analysis.

The first section of this report introduces the assessment methodology designed and applied by REACH and its limitations, followed by a demographic profile of the IDP populations residing in the camps covered in this assessment. The sector specific findings on IDP populations in camps, at the governorate and national levels, such as priority needs, livelihoods, food security, health, shelter and NFIs, WASH, CCCM, and education are addressed in the second part of the report. This included, where possible and useful, comparisons with earlier camp profiling assessment rounds carried out in April-May 2017, December 2016-January 2017, August-September 2016, and April 2016.

<sup>11</sup> These can be found on <a href="http://www.spherehandbook.org/">http://www.spherehandbook.org/</a>.





<sup>&</sup>lt;sup>7</sup> International Organisation for Migration, <u>Displacement Tracking Database</u> (IOM-DTM), March 2018.

<sup>8</sup> IOM-DTM from November 2017 and March 2018.

<sup>&</sup>lt;sup>9</sup> OCHA Iraq, <u>Humanitarian bulletin</u>, January 2018.

<sup>&</sup>lt;sup>10</sup> Reports were conducted quarterly, but from the 10<sup>th</sup> round onwards they will be conducted biennially.

### **METHODOLOGY**

# **Methodology Overview**

Primary data for round 9 was collected between 12 December 2017 and 14 January 2018, across 61 formal IDP camps. The selection of camps to be included in the assessment was based on the following criteria: open at the time of data collection, contains at least 100 households, and no security or accessibility constraints. In total, 5,591 households were assessed in 11 governorates in which these camps were located: Anbar, Baghdad, Dahuk, Diyala, Erbil, Kerbala, Kirkuk, Najaf, Ninewa, Salah al-Din, and Sulaymaniyah.

A mixed-methods approach was employed to conduct data collection, consisting of a household survey amongst a representative sample of households in the camps, key informant (KI) interviews with the camp managers in each camp, and the mapping of camp infrastructure through the use of satellite imagery analysis and physical surveying of infrastructure by enumerators on the ground.

Households were selected using a probability sampling technique based on the generation of random GPS points within each camp. At the national level, findings are representative with a 99% confidence level and a 2% margin of error. At the governorate level, findings are statistically representative with a 95% confidence level and a margin of error between 3% and 9%. Sampling maps were provided to the data collection teams before deployment to the camps, from which the nearest household to each point was interviewed. Household interviews were conducted in Arabic by mixed teams of male and female enumerators, who entered data directly using Open Data Kit (ODK) software on hand-held devices. Data was uploaded on a daily basis by REACH field officers in each base, to be cleaned and analysed by the assessment team. Feedback from data cleaning were shared with the field officers each day to support their morning briefing to field teams.

REACH and the CCCM Cluster have previously conducted eight rounds of profiling and mapping in formal camps for IDPs in Iraq. These profiling exercises initially occurred on a quarterly basis, but as the situation in many IDP camps has stabilised over time, the activity now occurs on a biannual basis. Prior rounds of the REACH-CCCM Cluster camp profiling exercise took place during the following months:

- April-May 2017 (Round 8)
- December 2016-January 2017 (Round 7)
- August-September 2016 (Round 6)
- April 2016 (Round 5)
- December 2015 (Round 4)
- September-October 2015 (Round 3)
- January 2015 (Round 2)
- October 2014 (<u>Round 1</u>)





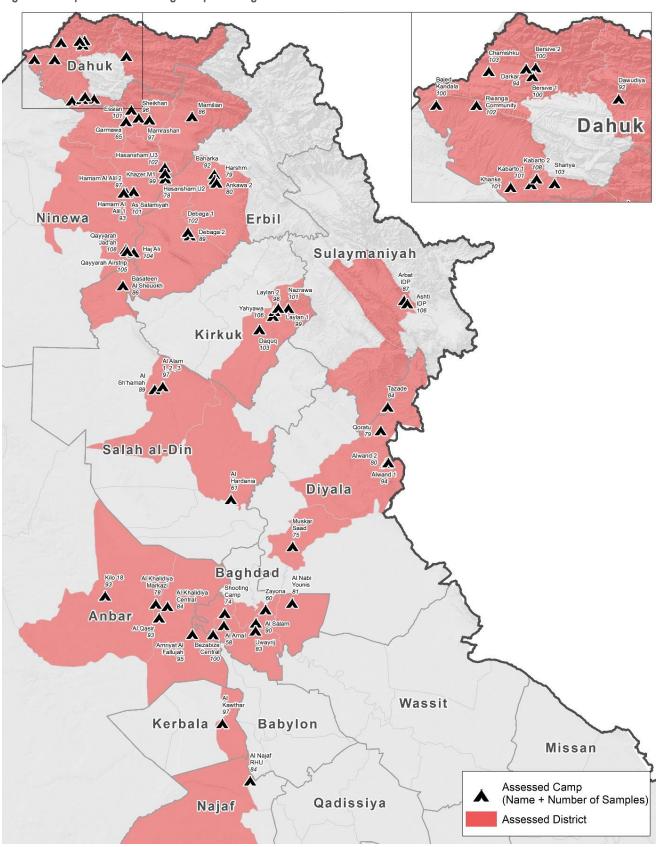


Figure 1. Camps assessed during Camp Profiling Round IX



#### Limitations

- As a result of camp closure and consolidation processes, several camps were closed shortly before or during
  the first few days of data collection. To mitigate these challenges, REACH removed four camps Chamakor,
  Hasansham M2, Nargizilia 1, and Nargizilia 2 from the data collection workplan and coordinated with CCCM
  partners in the south of the country for updates regarding evictions and camp access. Additionally, a question
  was added to the interview form asking households if they had arrived to the camp in the last two weeks, to
  capture these movements.
- Although originally considered to be accessible, REACH enumerators were unable to access Al Iraq Almuahad camp in Salah al-Din governorate due to restrictions imposed by an armed group in the area.
- Governorate comparisons are weighted by camp population sizes. Kerbala and Najaf governorates only
  contain one camp, and as such, extreme values are more pronounced. This factor should be taken into
  consideration when interpreting governorate level findings.
- Biases due to self-reporting of household-level indicators may exist. While REACH always endeavours to
  create an open dialogue with respondents in order to collect objective responses, 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 sampled 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 missing a form of documentation, will yield results with a lower precision. In particular, findings which relate to a very small subset of the population should be treated as indicative only. This is indicated where appropriate by footnotes throughout the report.



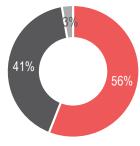
## **FINDINGS**

# **IDP Camp Population Profile**

The demographic breakdown of the IDP camp population across Iraq varied little from round 8 to round 9 of camp profiling that took place in April-May 2017. Just over half of the population consisted of minors; 56% of the population were under 18 years old and 19% were 5 years or younger.

Figure 2. Age distribution of IDP camp population









The proportion of households that were female-headed was 15% at the national level in round 9, a statistically significant change compared to 10% in round 8. This was especially prominent in Baghdad, where 24% of households were female-headed, followed by Salah al-Din with 22%, and Anbar and Ninewa with 17% and 18% respectively. Conversely, Kirkuk saw a proportion of 11% female-headed households, while this was 19% in round 8.

Figure 4. Sex of head of household, by governorate



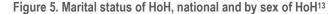
The average age of heads of household (HoH) was 41 years old, consistent with round 8. Generally, female-headed households were slightly older than male-headed households. 12 The greatest difference was in Erbil, with an average of 49 and 39 years old, respectively. In Salah al-Din the averages were 47 and 40 years old, respectively, and in Sulaymaniyah 46 and 39 years old, respectively.

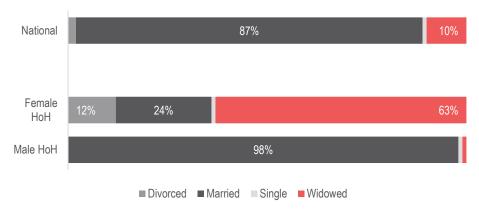
<sup>12</sup> Sample sizes for female-headed households on governorate level are smaller than required, so results should be interpreted as indicative only.





The marital status of heads of household has not changed significantly on the national level since round 8 (April-May 2017). **The majority of heads of household were married**, at a proportion of 87% across all camps, compared to 90% in round 8. However, **female-headed households were considerably more likely to either be divorced or widowed**, at 12% and 63%, compared to 0.2% and 1% of male-headed households, respectively.





The average household size has not changed compared to round 8 (April-May 2017); there were **an average of six to seven individuals per household for most governorates**. This number was highest in Dahuk with an average of eight individuals per household. At the national level, households in IDP camps occupied one shelter on average.

As certain household members may require specialised protection and assistance, households were asked to indicate if they were caring for one or more individuals who are chronically ill, elderly, widowed, pregnant or lactating, an unaccompanied minor, or have disabilities. The main vulnerable members of households, on a national level, were people with chronic illnesses or diseases (35% of all households), people with disabilities (24%, intellectual, mental, physical, and sensorial), and pregnant or lactating women (22%). These potential specialised protection and assistance needs should be taken into account when shaping new camp consolidation and return policies, as well as to inform current camp management and registration practices.

Table 1. Proportions of all households reporting one or more vulnerable household member

	Chronic illness	Disability	Pregnant or lactating	Widowed	Elderly at risk	Unaccompanied minor
National	35%	24%	22%	12%	12%	2%

Concerning households' area of origin, in Anbar and Diyala governorates almost all households interviewed came from the governorates they were residing in at the time of assessment. In contrast, households living in camps in Dahuk, Kerbala, and Najaf all reported being originally from Ninewa governorate, followed by Erbil with 47% and Baghdad with 35% reporting having come from Ninewa. Furthermore, in Baghdad 59% reported being originally from Anbar governorate, and in Salah al-Din the majority (55%) reported being from Kirkuk. Additionally, of the households that lived in camps in Sulaymaniyah, 87% reported coming from Salah al-Din.

<sup>13</sup> Findings for the national level and male HoH have a confidence level of 99% with a 2% margin of error, the latter is 3.5% for female-headed households.





Table 2. Governorate of displacement, by governorate of origin

Governorate of	Governorate of Origin										
Displacement	Anbar	Babylon	Diyala	Erbil	Kirkuk	Ninewa	Salah al-Din				
Anbar	100%										
Baghdad	59%					35%	6%				
Dahuk						100%					
Diyala	1%		99%								
Erbil	2%			45%	2%	48%	4%				
Kerbala						100%					
Kirkuk			1%		76%	12%	11%				
Najaf						100%					
Ninewa	0%			1%	3%	89%	7%				
Salah al-Din					55%	1%	44%				
Sulaymaniyah	1%	3%	1%			9%	87%				

The majority (93%) of households reported being officially registered as an IDP with the Ministry of Displacement and Migration (MoDM) or Directory of Displacement and Migration (DDM). Salah al-Din and Ninewa were the only two governorates with less than 90% of households reporting being officially registered: 84% in Salah al-Din and 89% in Ninewa.

The ability of IDPs to temporarily enter and exit the camps in order to access markets or livelihood opportunities has improved since round 8 (April-May 2017). In camps across the country, 96% of households reported such relative freedom of movement, compared to 85% during the previous assessment. Only 5% of households that did not earn an income in the thirty days preceding data collection (10% of all households) reported movement restrictions as a reason for their economic inactivity. Similarly, 99.6% of households reported being allowed to leave the camp temporarily for a medical emergency.

# **Priority Needs**

Top cross-sectoral priority needs differed slightly from round 8. Across Iraq, the most frequently reported need was food (76% compared to 71% in round 8), followed by employment (50% compared to 61% in round 8), and clothing (39%, which was not in the top three reported priorities previously), as shown in table 3. Especially notable is the difference between households' priority needs across governorates. In Salah al-Din, the proportion of households who reported 'registration' as a priority need far exceeded the national level, at 22% compared to 5%. Similar findings exist for other selected priority needs (see table 3). On the other hand, the opposite was also observed in this assessment: in Kirkuk only 5% cited education as a priority need, compared to 21% across all governorates. In Erbil, only 13% of households reported clothing as a priority need, compared to 39% at the national level (for further examples, see table below).

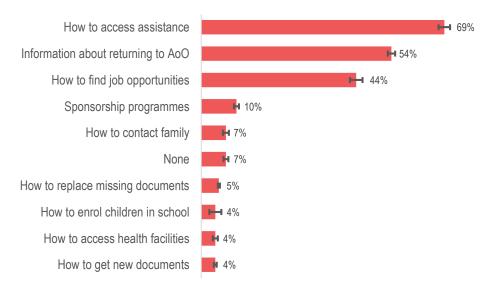


Table 3. Priority needs, by governorate<sup>14</sup>

	Education	Employ- ment	Food	Medical care	Psycho- social support	Shelter support	Water	Registra- tion	Clothing	Summari -sation	Cleaning hygiene items
National	21%	50%	76%	30%	7%	18%	8%	5%	39%	2%	4%
Anbar	40%	60%	93%	31%	3%	7%	12%	3%	16%	0%	0%
Baghdad	49%	55%	90%	34%	1%	2%	15%	7%	16%	3%	0%
Dahuk	8%	33%	63%	35%	8%	38%	8%	0%	35%	2%	2%
Diyala	19%	47%	72%	29%	8%	17%	17%	3%	29%	23%	1%
Erbil	17%	70%	85%	29%	14%	22%	0%	1%	13%	6%	13%
Kerbala	1%	48%	48%	15%	25%	0%	1%	0%	54%	59%	40%
Kirkuk	5%	66%	94%	52%	4%	2%	0%	0%	42%	4%	20%
Najaf	26%	98%	67%	5%	1%	0%	1%	0%	89%	8%	2%
Ninewa	23%	51%	73%	25%	7%	15%	9%	7%	49%	1%	3%
Salah al-Din	18%	61%	78%	25%	3%	13%	11%	22%	46%	0%	0%
Sulaymaniyah	22%	59%	96%	26%	6%	2%	0%	0%	49%	6%	6%

When asked about their three most-needed types of information, households most frequently named 'how to access assistance' (69%), 'information about returning to area of origin (AoO)' (54%), and 'how to find job opportunities (44%), visualised in figure 6 below.

Figure 6. Most-needed information type, across Iraq<sup>15</sup>







<sup>&</sup>lt;sup>14</sup> Households could choose up to three priority needs. Vocational training, footwear, and documentation were also cited as priority needs but by less than 15% of all households in all governorates.

<sup>&</sup>lt;sup>15</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.

Table 4. Most needed information type, by governorate<sup>16</sup>

	How to access assistance	Sponsorship programmes	Information about returning to AoO	How to contact family	How to enrol children in school	How to find job opportunities	How to access health facilities	None
Anbar	70%	3%	32%	5%	6%	42%	17%	19%
Baghdad	75%	1%	31%	5%	6%	34%	7%	17%
Dahuk	65%	1%	45%	2%	0%	33%	1%	7%
Diyala	51%	6%	44%	4%	1%	53%	2%	17%
Erbil	39%	2%	46%	1%	2%	59%	4%	17%
Kerbala	28%	0%	35%	4%	1%	33%	0%	63%
Kirkuk	80%	1%	86%	19%	0%	63%	13%	0%
Najaf	58%	10%	75%	0%	1%	92%	0%	5%
Ninewa	72%	20%	61%	8%	6%	44%	2%	2%
Salah al-Din	80%	20%	80%	7%	5%	62%	1%	0%
Sulaymaniyah	80%	1%	57%	15%	16%	60%	2%	5%

### **Food Security**

Camp profile round 9 found that the 96% of households had acceptable Food Consumption Scores (FCS) (≥42) compared to 88% in round 8 (April-May 2017), while 4% were borderline (28-42 FCS) compared to 10% in round 8.¹¹ No household assessed had a poor FCS. The proportion of households having acceptable food consumption scores was lowest in Salah al-Din at (87%) and Ninewa (93%), which were also the governorates in which households were most dependent on humanitarian and government aid as their source of livelihood as well as reportedly resorting to selling assistance as a main coping mechanism.¹¹8 This is reflected in the results of top priority needs, in which households on a national as well as governorate level reported food as their top priority need (76%).

The majority of households' sources of food, when they could select multiple options, were bought with cash (58%), UN assistance or international organisations (49%), or bought on credit (22%), see figure 7. When any type of assistance was the main source for food, most households received this assistance in kind (87%), except in Erbil and Sulaymaniyah where most households received it through cash assistance (84% and 77% respectively), and in Najaf where most households received it through vouchers (94%).

<sup>&</sup>lt;sup>18</sup> 43% and 33% reported humanitarian aid and government aid respectively as primary livelihood sources. For complete findings regarding access to livelihoods and needs, please see pages 17 to 21.





<sup>16</sup> Excluded from the table are: 'security restrictions in camp', 'how to get new documents', and 'how to replace missing documents, as these had lower than 10% response rate for all governorates. Findings have a confidence level of 95% and a margin of error between 3% and 8% at the governorate level.
17 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. For the MENA region, including Iraq and Syria, WFP interprets a score of 28 or under to indicate a poor food consumption profile; a score from 28.1 through 42 to be borderline; and a score above 42 to indicate an acceptable food consumption profile of food security.

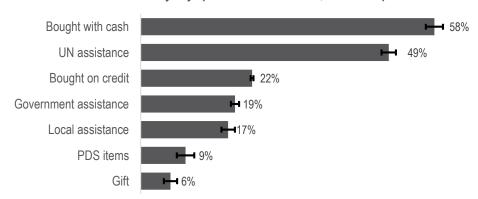


Figure 7. Main sources of food in the thirty days prior to data collection, across Iraq<sup>19</sup>

A majority of households (61%) reported having received PDS at least once in the three months prior to data collection. This was especially high in Dahuk where 90% of households reported having received PDS in the three months prior to data collection; 48% of all households reported having received PDS at least monthly, while in Sulaymaniyah this was only 17%.

Despite the high proportion of households with an acceptable FCS nationwide, households reported food as their top priority need (76%), and often resorted to food-related coping mechanisms. Half of the households assessed reported eating less expensive food one or more times in the seven days prior to data collection. For Baghdad this was only 4%, while for Najaf, Kerbala and Sulaymaniyah this was between 80% and 98%. This strategy was followed by borrowing food or money, which 23% of households reported resorting to at least once, while in Salah al-Din and Ninewa this was 40% and 37% respectively. The third main coping mechanism reported was to limit food portions (22%), which was extremely apparent in Sulaymaniyah (66%). Another main coping mechanism adopted in Sulaymaniyah has been to reduce the amount of meals per day, which 47% of households reported having resorted to at least once during the seven days prior to data collection, compared to 9% nationally.

Table 5. Food-related coping strategies during seven days prior to the assessment, by governorate<sup>20</sup>

	Eat less expensive food	Borrow food	Limit portion size	Reduce meals per day	Adults eat less	Reduce portions for adult females	Reduce portions for adult males	Send elsewhere to eat	Exchange food for diversity
National	50%	23%	22%	9%	7%	6%	5%	3%	16%
Anbar	11%	1%	0%	0%	0%	0%	0%	0%	1%
Baghdad	4%	3%	0%	0%	0%	0%	0%	0%	1%
Dahuk	42%	17%	15%	5%	4%	2%	1%	0%	2%
Diyala	74%	2%	20%	1%	2%	0%	0%	0%	10%
Erbil	62%	7%	24%	10%	1%	2%	2%	0%	3%
Kerbala	85%	0%	1%	0%	0%	0%	0%	0%	0%
Kirkuk	38%	8%	16%	10%	3%	1%	0%	0%	19%
Najaf	98%	0%	0%	0%	0%	0%	0%	0%	1%
Ninewa	64%	37%	31%	11%	12%	10%	9%	6%	28%
Salah al-Din	57%	40%	27%	10%	15%	9%	8%	2%	24%
Sulaymaniyah	80%	27%	66%	47%	16%	14%	15%	7%	7%

<sup>&</sup>lt;sup>20</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.





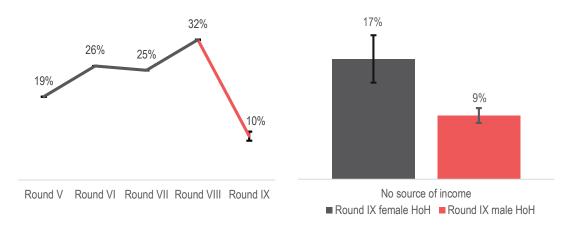
<sup>&</sup>lt;sup>19</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.

#### Livelihoods

The proportion of IDPs in camps who reported having no livelihood source has significantly decreased; only 10% of households in round 9 reported having no source of livelihood during the thirty days preceding data collection, compared to 32% in round 8 (April-May 2017). These numbers were highest for households in Anbar and Baghdad, where 26% reported having no livelihood source. Especially prominent in round 9 was the decrease in these numbers in Ninewa governorate to 6%, from 58% in May 2017. As Ninewa governorate hosts a large portion of the Mosul emergency camps, which were built rapidly in response to the IDP influx from the Mosul offensive in 2016-17, many households were newly displaced when the May 2017 assessment took place.<sup>21</sup> A significant difference in sex of heads of household and having no source of livelihood was observed in round 9; 17% for female-headed households compared to 9% for male-headed households. This was particularly evident in Sulaymaniyah where there existed a significant difference between male- (11%) and female-headed households (36%) having no source of livelihood.

Figure 8. Proportion of households reporting not having a source of livelihood, across Iraq

Figure 9. Proportion of HHs reporting not having a source of livelihood, by sex of HoH<sup>22</sup>



The decreased proportion of households not having a source of livelihood may be explained by an increased reliance on humanitarian and government aid. On a national level, households in round 9 increasingly relied on humanitarian and government aid to cover their household needs, with 43% and 33% respectively, compared to 10% and 1% in round 8, suggesting a lack of sustainable livelihood opportunities. This was especially high in Salah al-Din (72% and 71% respectively) and Ninewa (62% and 56% respectively) governorates, and particularly low in Diyala, at 4% and 1% respectively. The primary non-assistance source of livelihood continued to be unskilled labour (22%, e.g. construction), which was a key source for households in round 8 (15%, April-May 2017). However, there were notable variations between governorates, such as 48% in Sulaymaniyah and 15% in Ninewa (see table 6). Other livelihoods findings included 69% of households reporting having at least one household member working the thirty days prior to data collection, with the lowest in Anbar (51%) and the highest in Kerbala (96%) and Najaf (98%). The average income from wages for households reporting earning an income in the thirty days prior to data collection was 215,765 IQD (181 USD).<sup>23</sup>

<sup>&</sup>lt;sup>23</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018.





<sup>&</sup>lt;sup>21</sup> As Salamiyah, Haj Ali, Hamam Al Alil 1, Hamam Al Alil 2, Hasansham U2, Hasansham U3, Khazer M1, Qayyarah Airstrip and Qayyarah Jad'ah camps were built rapidly in Ninewa governorate in response to the IDP influx from the Mosul offensive in 2016-17.

<sup>&</sup>lt;sup>22</sup> Findings for Round IX and Round IX male HoH have a confidence level of 99% with a 2% margin of error, the latter is 3.5% for Round IX female-headed households. The error bar in this graphs represents a 3.5% margin of error.

Table 6. Proportion of HHs by primary livelihoods source 30 days prior to assessment, by governorate<sup>24</sup>

National	Economically inactive	Unskilled agricul- tural labour	Un- skilled labour	Self em- ployed	Public sector	Public security official	Low skilled service industry	Gifts	Pension 5%	Govern ment aid	Humani- tarian aid	Social support
1144101141	1070	070	2270	0 70	0 70	070	1070	1070	070	0070	1070	170
Anbar	26%	8%	26%	10%	6%	1%	4%	5%	2%	12%	18%	1%
Baghdad	26%	6%	31%	10%	4%	3%	6%	1%	1%	7%	12%	0%
Dahuk	11%	5%	27%	8%	6%	15%	7%	1%	6%	8%	24%	4%
Diyala	5%	9%	29%	13%	9%	3%	13%	3%	11%	1%	4%	10%
Erbil	4%	5%	34%	8%	10%	8%	9%	7%	6%	30%	58%	2%
Kerbala	0%	10%	21%	8%	4%	5%	27%	0%	10%	0%	4%	7%
Kirkuk	0%	2%	25%	5%	9%	5%	14%	25%	7%	15%	56%	4%
Najaf	2%	6%	31%	2%	2%	2%	30%	0%	5%	0%	2%	17%
Ninewa	6%	6%	15%	3%	4%	4%	12%	24%	5%	56%	62%	6%
Salah al-Din	5%	2%	17%	0%	0%	2%	13%	36%	4%	71%	72%	8%
Sulaymaniyah	15%	11%	48%	2%	5%	1%	9%	10%	5%	18%	15%	0%

The distribution of primary livelihood sources especially differed when disaggregated by sex of heads of household, with 10% of female-headed households reportedly earning from unskilled labour compared to 24% of male-headed households. In general, female-headed households tended to rely on less stable livelihood sources, something that was also found in round 8 (April-May 2017). This is evident through a higher reliance on pension (9% compared to 4% for male-headed households), humanitarian aid (48% compared to 43% for male-headed households), government aid (39% compared to 32% for male-headed households), gifts (26% compared to 13% for male-headed households), and social support, i.e. disability allowance (8% compared to 3.6% for male-headed households). Across the country, this assessment found that female-headed households earned on average less than male-headed ones: The average income from wages per month was 169,319 IQD (142 USD) for female-headed households compared to 222,723 IQD (187 USD) for male-headed households. The average income from other sources (including remittances and humanitarian aid) for households reporting any income was 163,261 IQD (137 USD) for female-headed households, and 219,936 IQD (185 USD) for male-headed households per month. The average income from other sources (including remittances and humanitarian aid) for households reporting any income was 163,261 IQD (137 USD) for female-headed households, and 219,936 IQD (185 USD) for male-headed households per month.

Overall, the lack of sufficient livelihood sources had been paired with higher reported use of coping strategies, which were especially high in Dahuk, Ninewa, and Salah al-Din, where 91-93% of households reported resorting to coping strategies. While in Ninewa and Salah al-Din, households primarily resorted to selling assistance, in Dahuk this was taking on debt, followed for all three governorates by spending their savings. On the national level, selling assistance, taking on debt, and spending savings were the main reported coping mechanisms.

No significant difference was found between the proportions of male- and female-headed households resorting to coping strategies (both 77%, see figure below), while in round 8 (April-May 2017) over 70% of female-headed households reported doing so compared to 58% of male-headed households. However, when households did report resorting to livelihoods coping strategies, significantly more female-headed households reported resorting to selling assistance (42% compared to 30% male-headed households), reducing spending (18% compared to 14% for male-headed households), and receiving support from friends and relatives (21% compared to 14% for male-headed households). Conversely, a notably larger proportion of male-headed households resorted to taking on debts (25% compared to 21% for female-headed households and accessing a previous income source (8% compared to 3% for female-headed households). Not only did a higher proportion of male-headed households report taking on debts, but the average value of the debt was higher among male-headed households than female-headed households. The average amount of debt among households reporting debt

<sup>&</sup>lt;sup>26</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018.





<sup>&</sup>lt;sup>24</sup> Interviewees were asked to select all their livelihood sources, if they had more than one. The table only represents the most commonly reported livelihood sources, excluding commercial agriculture (0.3%), smallholder agriculture (2%), subsistence agriculture (1%), highly skilled service (1%), and skilled service industry (2%). Therefore, the percentages do not add up to 100%. Self-employed refers to commercial business owners. Unskilled labour refers to construction work, and social support refers to i.e. disability allowance.

<sup>&</sup>lt;sup>25</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018.

(25% of all households) was 954,607 IQD (802 USD)<sup>27</sup> for male-headed households and 589,672 IQD (495 USD)<sup>28</sup> for female-headed households. The average amount of debt households held on a national level was 902,881 IQD (759 USD)<sup>29</sup>. The proportion of households taking on debts in round 9 does not significantly differ from round 8 (April-May 2017).



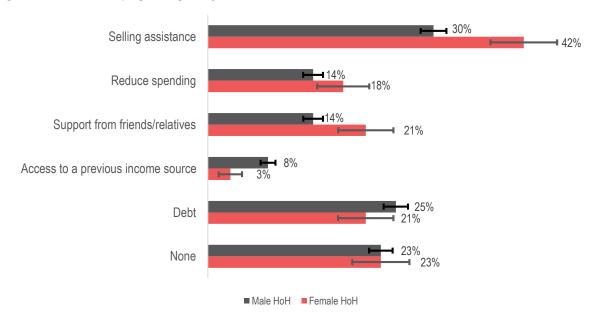
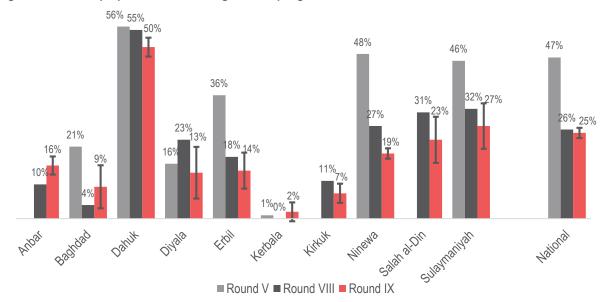


Figure 11. Trend of proportion of HHs taking on debt, per governorate across round V-IX<sup>31</sup>



When displacement becomes protracted, IDP households tend to move from spending savings towards the use of debt to meet their needs as they exhaust their resources. This is supported by analysing camps in Ninewa

<sup>&</sup>lt;sup>31</sup> For this round: results for Baghdad, Diyala, and Kerbala can only be interpreted as indicative, due to a lower sample than necessary. For this same reason, Najaf is excluded from the graph. For the other governorates, findings were statistically representative with a 95% confidence level and a margin of error between 2% and 8%. The error bars in this graph represent a margin of error of 5%. For Anbar, Kirkuk and Salah al-Din, no data is shown for Round V as no data was collected due to there being no camps present at this time.





<sup>&</sup>lt;sup>27</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018.

<sup>28</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018

<sup>&</sup>lt;sup>29</sup> IQD/USD: 0.00084, XE Currency Charts: IQD to USD, 30 July 2018.

<sup>&</sup>lt;sup>30</sup> Results for male HoH have a 95% confidence level with a 1.4% margin of error, while this is 3.4% for female-headed households. A chi-square test was carried out for each of the reported coping mechanisms by sex HoH, and only the ones which had a significant result (α < 0.05) are included in this graph, in addition to the breakdown of households not engaging in livelihood coping strategies.

governorate according to their date of establishment.<sup>32</sup> In older camps, 49% of the households took on debt, while 18% spent their savings. This is compared to newer camps where 18% of households took on debt and 25% spent their savings. Households in newer camps (Mosul response camps) were also more likely to depend on selling assistance (72%) than households in the older camps (15%).

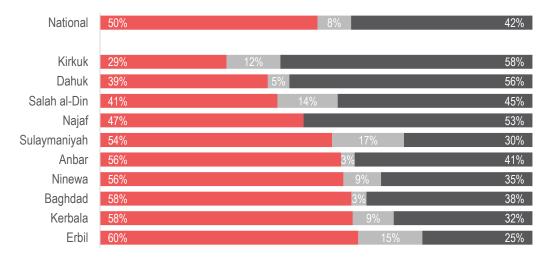
Table 7. Top 3 livelihood coping strategies adopted in the 30 days prior to assessment, by governorate<sup>33</sup>

	Spent savings	Access to previous income	Support from friends / relatives	Selling assets	Charitable donations	Debt	Reduce spending	Sold as- sistance	None
National	24%	7%	15%	6%	9%	25%	15%	32%	23%
Anbar	19%	0%	4%	6%	8%	15%	1%	0%	67%
Baghdad	18%	0%	8%	4%	6%	10%	0%	0%	66%
Dahuk	28%	18%	17%	5%	13%	50%	26%	5%	9%
Diyala	9%	1%	7%	13%	25%	14%	10%	27%	39%
Erbil	17%	3%	15%	13%	30%	14%	13%	7%	32%
Kerbala	0%	0%	1%	0%	0%	1%	0%	0%	99%
Kirkuk	1%	0%	29%	11%	10%	8%	12%	22%	59%
Najaf	0%	0%	2%	0%	0%	6%	1%	1%	93%
Ninewa	29%	5%	16%	6%	6%	19%	15%	60%	7%
Salah al-Din	33%	1%	18%	4%	6%	23%	12%	64%	8%
Sulaymaniyah	2%	14%	22%	3%	8%	27%	17%	2%	35%

#### Health

The majority of households (98%) reported having a health centre within two kilometres from their home, similar to round 8. Anbar, having the lowest proportion of households reporting a health centre within two kilometres from their home (94%), improved from 88% in round 8 (April-May 2017). Half of the surveyed households reported that a member of their household required healthcare treatment in the thirty days preceding data collection. Of these households, 84% sought treatment, while 16% did not.

Figure 12. Proportion of HH members requiring healthcare treatment in the 30 days prior to data collection



■ No health treatment needed ■ Did not seek treatment while needed ■ Sought health treatment

Although health facilities were generally located within walking distance, 40% of households that sought health treatment reported experiencing challenges when accessing the required healthcare. For these

<sup>33</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.





<sup>&</sup>lt;sup>32</sup> As Salamiyah, Haj Ali, Hamam Al Alil 1, Hamam Al Alil 2, Hasansham U2, Hasansham U3, Khazer M1, Qayyarah Airstrip and Qayyarah Jad'ah: these camps were built rapidly in Ninewa governorate in response to the IDP influx from the Mosul offensive in 2016-17.

households, the main difficulty was that the costs of healthcare was too high;<sup>34</sup> 79% of households facing difficulties regarding healthcare reported this, compared to 48% in round 6 in September 2016, and 66% in round 8 in May 2017. The second greatest difficulty reported was that those households were unable to purchase medicines at pharmacies, which 53% of the households facing difficulties reported - compared to 59% in round 6 and 41% in round 8. This was followed by a lack of sufficient medicines in hospitals (17%, while in round 8 it was 24%), and the distance to a treatment centre (16%).

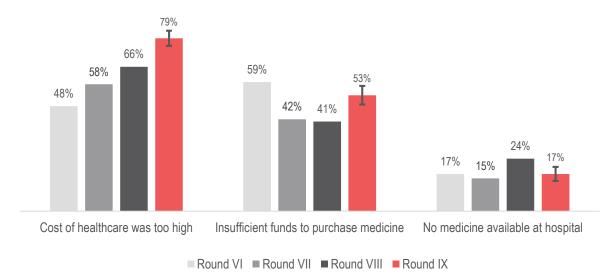


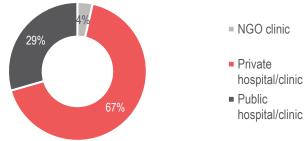
Figure 13. Difficulties with accessing healthcare, comparing assessment rounds<sup>35</sup>

Nationally, 47% of households that sought health treatment reported going to public hospitals or clinics, 30% received treatment in a private hospital or clinic, and 23% received treatment in an NGO clinic. This varied greatly between governorates. In Dahuk 50% of households that sought health treatment received this in a private hospital or clinic, compared to 2% and 3% in Anbar and Baghdad, respectively. Most households in Baghdad received treatment in public hospitals or clinics (91%), followed by 86% and 84% in Kirkuk and Anbar respectively. Only 6% of households received treatment in NGO clinics in Kerbala and Baghdad, and only 2% in Sulaymaniyah, while this was 46% in Salah al-Din and 40% in Ninewa.

Although, overall, cost was the most commonly reported issue to accessing healthcare services, these households were much more likely to be accessing private healthcare services (67%) compared to the national average of households seeking private health services (30%); these facilities are not located in camp sites, a possible reason why households still reported distance to a treatment centre as a difficulty. Despite the availability of health facilities within walking distance, as reported by 98% of households, IDPs were seeking services that are costlier and farther away, highlighting potential gaps in the types or quality of services offered in the local

Figure 14. Proportion of households that reported costs of healthcare as a main difficulty, by health facility type





<sup>34</sup> Healthcare centres in camps are free of costs, so this difficulty refers to households who went to seek healthcare outside of these centres.

<sup>35</sup> Findings for Round IX have a 99% confidence level and a 2% margin of error, as represented by the error bars in the graph. Respondents could give multiple answers, therefore the totals do not add up to 100%. The error bars for the previous rounds in this graph represent a 5% margin of error.





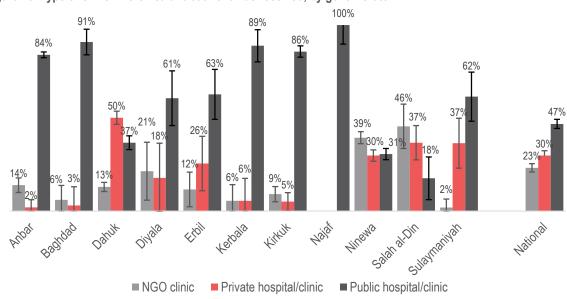
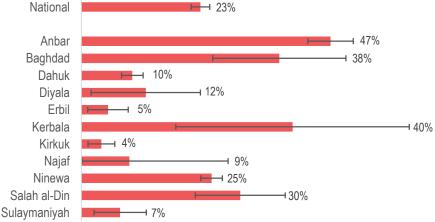


Figure 15. Type of clinic where health treatment was received, by governorate<sup>36</sup>

Across Iraq, 23% of households with children under five years old reported that they had none of their children vaccinated against polio. This varied greatly between governorates, with the highest percentage in Anbar where 47% of households reported having none of their children under five years old vaccinated against polio. This percentage was the lowest in Kirkuk, where only 4% of households had no children under five years old vaccinated against polio.





Of households with a pregnant or lactating member (22% of all households), 65% reported visiting obstetric or antenatal care the 30 days before round 9 data collection.<sup>38</sup> This, however, varied per governorate, as visualised in figure 17.

<sup>38</sup> This question was not answered by everyone in the sample, therefore this finding has a confidence level of 99% with a margin of error of 4%.





<sup>&</sup>lt;sup>36</sup> Numbers for Najaf, Kerbala, and Sulaymaniyah governorates can only be interpreted as indicative due to the proportion of the sample that responded to this question for those governorates. For other governorates, the findings are statistically representative with a confidence level of 95% and a margin of error between 4% and 9%. On a national level, findings are statistically representative with a 99% confidence level and a 3% margin of error.

<sup>&</sup>lt;sup>37</sup> Numbers for Najaf and Kerbala governorates can only be interpreted as indicative due to the proportion of the sample that responded to this question. For other governorates, the findings are statistically representative with a confidence level of 95% and a margin of error between 3% and 8%. The error bars represent a margin of error of 5%.

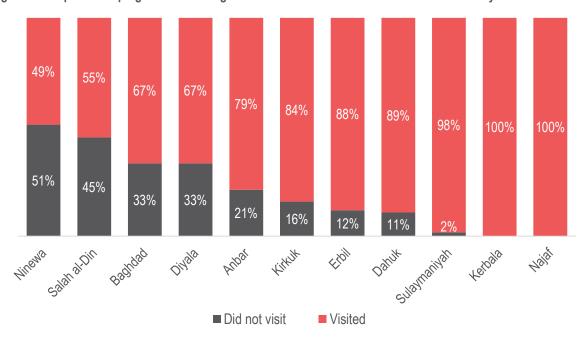


Figure 17. Proportion of pregnant or lactating women who visit obstetric or antenatal care facility 39

#### **Shelter and Non-Food Items**

This assessment found that **tents remained the most common shelter type (85%), followed by caravans (11%)** on a national level. In Kirkuk and Ninewa for example, households reported tents as their main shelter type, with 97% and 96% respectively. In Kerbala and Najaf to the contrary, 100% of households reported caravans as their shelter type, followed by Diyala (64%), and Baghdad (57%). Residential Housing Units (RHU) were almost only found in Sulaymaniyah, with 13% of households reporting living in RHUs. Across the country, the average number of shelters occupied per household was one.

Low quality structured shelters can impact the health and safety of IDPs in camps by increasing the chances of flooding and the spread of diseases. Overall, 32% of households who reported living in tents, reported having no cement base. The proportion of households living in tents without a cement base is highest in Salah al-Din (100%), Anbar (92%), Baghdad (82%), and Erbil (54%). Conversely, in Dahuk, Diyala, and Sulaymaniya 100% of households living in tents reported having cement bases. Additionally, the majority of households reporting living in tents did have secondary covers for those tents (85%). These figures are an improvement compared to round 8, during which less than half of the assessed households living in tents reported having a cement base or a secondary cover for their tents.

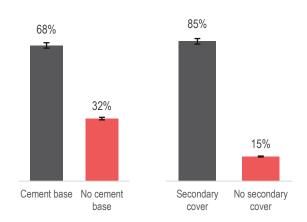
<sup>&</sup>lt;sup>39</sup> Numbers for Salah al-Din and Sulaymaniyah governorates can only be interpreted as indicative due to the proportion of the sample that responded to this question. For other governorates, the findings are statistically representative with a confidence level of 95% and a margin of error between 5% and 10%. On a national level, findings were statistically representative with a 99% confidence level and a margin of error of 4%.

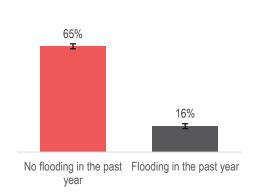




Figure 18. Proportion of households living in tents having a cement base or secondary cover

Figure 19. Proportion of households that have experienced flooding in the year before data collection<sup>40</sup>





Overall, 16% of households reported they had experienced flooding in the year prior to data collection. Anbar especially had been vulnerable to this, as 40% of households reported they had experienced flooding - with 66% in Kilo 18 camp, in which 96% reported not having cement base and 44% not having secondary cover - followed by Baghdad and Dahuk, in which 24% reported flooding. Please note, however, that this assessment was conducted before the February 2018 flooding in northern and central governorates, which affected 33 camps/sites of displaced persons and over 200,000 IDPs.<sup>41</sup>

Regarding NFIs, the main winter NFIs households reported not having were fuel (46%), fuel storage (38%), or winter clothes (33%). Correspondingly, the main winter item reported as a top priority need were a kerosene heater (91%), followed by kerosene (78%), and clothes (67%).

Table 8. Winter priority needs items, by governorate<sup>42</sup>

	Kerosene heater	Kerosene jerry can	Kerosene	Clothes
National	91%	33%	78%	67%
Anbar	93%	37%	66%	39%
Baghdad	93%	31%	63%	39%
Dahuk	91%	14%	88%	73%
Diyala	97%	16%	74%	84%
Erbil	93%	46%	98%	48%
Kerbala	90%	39%	73%	71%
Kirkuk	99%	81%	49%	58%
Najaf	100%	0%	8%	96%
Ninewa	83%	28%	86%	82%
Salah al-Din	88%	40%	86%	83%
Sulaymaniyah	93%	19%	93%	82%

The majority of households (98%) reported having access to electricity, with the exception of Basateen Al Sheuokh camp in Salah al-Din, in which 100% of households reported not having access to electricity. The average hours of electricity per day, however, differed per governorate and camp, ranging from 4-24 hours per day, with the

<sup>&</sup>lt;sup>42</sup> Multiple response options could be selected for this question, therefore the total might exceed 100%.





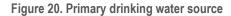
<sup>&</sup>lt;sup>40</sup> 19% of households reported that they did not know, or provided an unclear answer, on whether their shelter experienced flooding in the past year.

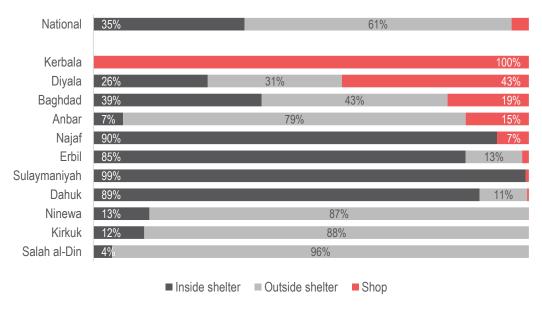
<sup>&</sup>lt;sup>41</sup> OCHA Iraq, <u>Humanitarian bulletin</u>, February 2018, issued on 13 March. And <u>UNCHR Iraq Flash Update</u> 26 February 2018.

highest average in Kirkuk governorate (21 hours per day), and the lowest in Dahuk and Salah al-Din, where an average of 8 and 9 hours per day respectively was reported.

#### **WASH**

More than half of households (61%) across the country relied on a water source external from their shelter as their primary source for drinking water.<sup>43</sup> All households reported buying their drinking water in shops in Kerbala, continuing the high trend since round 8 (April-May 2017), followed by Diyala with 43%. Najaf and Baghdad improved since round 8, with only 7% and 19% buying water in shops respectively, compared to 100% and 49% previously: relieving a financial burden on households. Among the households that bought drinking water in shops (4% of all households), 28% reported having no source of livelihood, even though 10% of households nationwide reported not having a livelihood source.





While on a national level 16% of households reported issues with water quality ('looks dirty, is salty, tastes bad, or smells bad'), this was 44% in Dahuk and Diyala governorates. The average of the other governorates was 7%. This data had some camp outliers however; in 12 camps over 40% of households reported issues with water quality.<sup>44</sup>

<sup>&</sup>lt;sup>43</sup> It is worth noting that many tented households in IDP camps are equipped with individual taps that are connected to water tanks that are regularly refilled.
<sup>44</sup> This is especially pertinent in Basateen Al Sheuokh in Salah al-Din where 90% reported so, followed by Sheikhan in Ninewa with 82% reporting water quality issues. Other outliers were Al Wand 1, Al Wand 2, Bajed Kandala, Berseve 1, Berseve 2, Darkar, Dawoudiya, Garmawa, Kabarto 2, and Khanke camps.





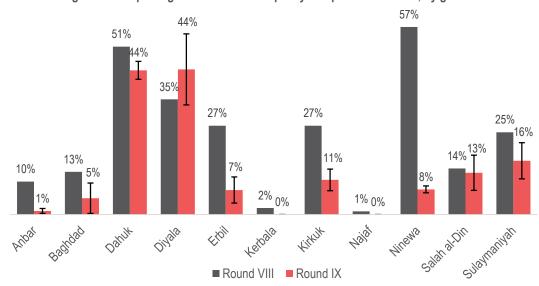


Figure 21. Percentage of HHs reporting issues with water quality compared to round 8, by governorate<sup>45</sup>

On a national level, 92% reported not having had any water shortage in the thirty days preceding data collection, while 3% had one day without access to water, 2% had two days, and 1% had three days without access to water during those thirty days. This differed significantly per governorate, as visualised in the table below. Water shortages were especially concerning in Anbar, Baghdad, Ninewa, and Salah al-Din.

Table 9. Proportion of households that spent days (24 consecutive hours) without access to water

	No water shortage	1 day of water shortage	2 days of water shortage	3 days of water shortage	4 days of water shortage	5 days of water shortage	6 days of water shortage	7 days of water shortage	8 days of water shortage
Anbar	83%	7%	3%	3%	0%	0%	0%	2%	0%
Baghdad	79%	6%	5%	7%	3%	0%	0%	0%	0%
Dahuk	100%	0%	0%	0%	0%	0%	0%	0%	0%
Diyala	93%	0%	5%	1%	0%	1%	0%	0%	0%
Erbil	99%	0%	0%	1%	0%	0%	0%	0%	0%
Kerbala	100%	0%	0%	0%	0%	0%	0%	0%	0%
Kirkuk	99%	1%	0%	0%	0%	0%	0%	0%	0%
Najaf	100%	0%	0%	0%	0%	0%	0%	0%	0%
Ninewa	86%	8%	5%	1%	0%	0%	0%	0%	0%
Salah al-Din	83%	9%	5%	1%	0%	1%	1%	1%	1%
Sulaymaniyah	99%	1%	0%	0%	0%	0%	0%	0%	0%

# **Camp Management**

The vast majority of households across the country were aware of existing camp committees (CC, 96%), with the lowest level of awareness reported in Dahuk (87%).<sup>46</sup> On a national level, only 21% perceived these committees to have been elected by the camp population. This is a decrease compared to round 8 when 33% did perceive the committees to have been elected by the camp population (April-May 2017). However, when asked about the representativeness of such committees of the camp population, the majority of households

<sup>&</sup>lt;sup>46</sup> Camp committees may be financed to identify design and implement small scale sectoral projects that are needed by persons of concern and host communities. These committees enable persons of concern to exercise their right to participate and influence the design and delivery of humanitarian programmes at all stages. Based on <u>UNHCR Emergency Handbook – CCCM Overview</u>. Examples of CCs are: camp management committee, women committee, youth committee, maintenance committee.





<sup>&</sup>lt;sup>45</sup> The error bars in this graph represent a 5% margin of error. For round IX the findings are statistically representative with a confidence level of 95% and a margin of error between 3% and 8% on governorate level.

**answered 'yes' (91%)**, an increase since the fifth round of profiling conducted in April 2016, when only 49% believed that committees were representative.

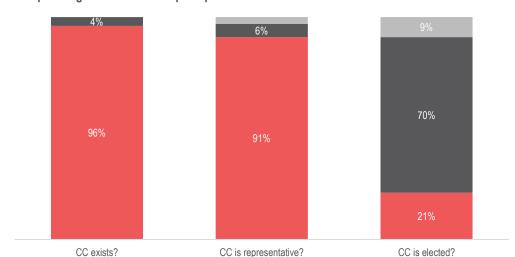


Figure 22. Camp management committee perceptions

Nationally, only 11% of households reported having made a complaint about their conditions, assistance or other issues in the three months preceding data collection, compared to 17% during round 8 (April-May 2017). The lowest proportion of claims was in Kirkuk, where only 1% of the households assessed reported having made a complaint. This was the highest in Salah al-Din where 27% of households reported having made a complaint; overall these were lower proportions than in round 8.

■Yes ■ No ■ Do not know

Of the households who did make a complaint (11%), almost a third reported that action was taken (33%). This is an improvement compared to the 8th round of camp profiling, where less than 10% of households reported action being taken in response to their complaint. However, in this 9th round of camp profiling, these numbers varied greatly between governorates. In Anbar, 97% of households reported that action was taken after they lodged a complaint (10% of households reported having lodged a complaint), compared to 16% during round 8 (April-May 2017), a great improvement. However, these numbers remained low at 17% in Ninewa (while 10% of households reported having lodged a complaint) and 29% in Dahuk governorate (while 17% of households reported having lodged a complaint). These low numbers suggest a disconnection between complaint feedback mechanisms and communication channels that were in use in camps in several governorates across Iraq.

#### **Education**

Round 8 of Camp Profiling found that the proportion of children between 6 and 11 years old attending formal education dropped from 74% in round 7 (December 2016-January 2017) to 54%, a decrease of 20 percentage points within a year. This decline was explained in last comparative report by the situation in the Mosul emergency camps where low proportions of children had access to formal education. In round 9, the proportion of **children** between 6 and 11 years old attending formal school at the time of assessment returned to 74%. However, there was a decrease in the number of children aged 12 to 17, 56%, attending education (round 8: 57% of children aged 12 to 14 years old and 70% of those aged between 15 and 17 years old).

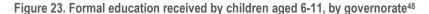
Education figures in round 9 differed per governorate (see below figures). In particular, in Ninewa, few school-aged children were attending formal education (51% of children aged 6-11, and 37% of children aged 12-17). These numbers were especially low in the camps that were established following the wave of mass displacement after the

<sup>&</sup>lt;sup>47</sup> On the governorate level, numbers for Anbar can only be interpreted as indicative. Numbers for Dahuk and Ninewa are statistically representative with a 95% confidence level and a 6-7% margin of error. Results for other governorates have not been included: due to the low response rate they cannot be seen as statistically representative.





Mosul military operation beginning in 2016: Haj Ali, Hamam Al Alil 1 & 2, Hasansham U2, Qayyarah Airstrip, and Qayyarah Jad'ah.



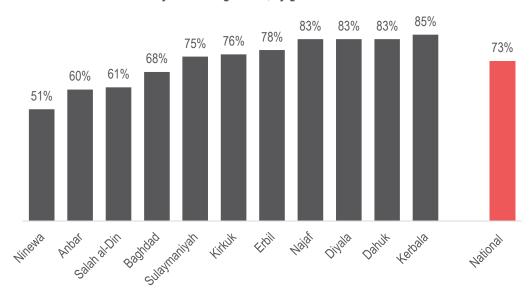
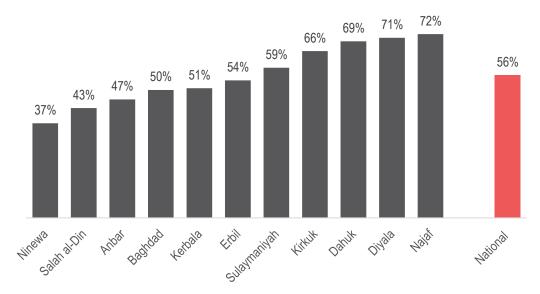


Figure 24. Formal education received by children aged 12-17, by governorate<sup>49</sup>



As visualised in table 10, households with school-aged children were asked the reason why their children were not attending school, if that was the case. The main reason reported for children not attending school, different from round 8, was 'child is disinterested' (40%), followed by school costs (11%) – this was especially the case in Laylan 2, where 50% of households reported school costs as one of the main reasons children were not in school – and thirdly 'missed too much to make up for' (5%). Only in Baghdad governorate did households report safety/security concerns as a reason (9%): 50% in Uwayrij camp and 20% in Al Nabi Younis camp. In Al Khalidiya Central camp, 68% of households reported that they were not allowed to leave the camp as a reason for children not attending school.

<sup>&</sup>lt;sup>49</sup> This question was only answered by a sub-set of the population; households with school-aged children.





<sup>&</sup>lt;sup>48</sup> This question was only answered by a sub-set of the population; households with school-aged children.

Table 10. Reasons for children's non-attendance in school, by governorate50

	No school available	Child is disinterested	School distance	Cost	Chores	Working	New arrival	Customs	Missed too much
National	4%	40%	3%	11%	4%	3%	2%	2%	5%
Anbar	1%	7%	2%	16%	0%	0%	1%	0%	8%
Baghdad	4%	5%	9%	12%	0%	0%	0%	1%	5%
Dahuk	2%	19%	0%	8%	2%	2%	0%	0%	3%
Diyala	2%	37%	0%	0%	12%	0%	0%	0%	0%
Erbil	0%	33%	0%	6%	0%	5%	11%	2%	3%
Kerbala	0%	50%	0%	0%	0%	0%	0%	0%	0%
Kirkuk	9%	8%	0%	13%	2%	2%	0%	2%	10%
Ninewa	4%	46%	4%	11%	5%	3%	1%	2%	5%
Salah al-Din	2%	52%	0%	18%	3%	2%	1%	0%	2%
Sulaymaniyah	6%	29%	0%	5%	8%	6%	1%	0%	0%

<sup>&</sup>lt;sup>50</sup> Households could select multiple options. Options with a lower than a national average of 2% have not been included in this table: 'not allowed to leave the camp', 'health reasons', 'safety and security reasons', 'child is disabled', 'absence of gender-appropriate teaching staff', 'no transport', 'space constraints', 'bad condition', and 'quality'. Therefore, some of the totals do not add up to 100% or more.





## CONCLUSION

While displaced households in Iraq have begun returning to their areas of origin at a higher rate, IDP households in formal camp settings still constitute 29% of the total IDP population (709,237 individuals).<sup>51</sup> In light of the new CCCM camp closure and consolidation strategy, this comparative report sought to provide an updated comparison between 2017 and early 2018 of camp conditions, infrastructure, household needs, and gaps in all accessible IDP camps across Iraq. This comparative report aimed to highlight priority needs in order to inform consolidation and closure of camps.

Most importantly, this round of assessment found that in-camp IDP households relied heavily on humanitarian assistance as their primary livelihoods source. This is in contrast to an overall decrease in the number of households reporting to not have a livelihood source at all, suggesting households are increasingly reliant on limited and unsustainable livelihoods to meet households needs. Furthermore, while almost half of all households relied on assistance from UN agencies or international organisations as one of their main food sources, food was reported as a top priority need by 76% of households. Moreover, households resorted to food related coping mechanisms, such as eating less expensive food, borrowing food or money to buy food (potentially increasing debt), and limiting food portions.

This lack of sustainable livelihood opportunities is also demonstrated by IDP households citing additional information on employment opportunities as a top-three information need, and 77% of households resorting to livelihood coping strategies, such as selling assistance, taking on debt, and spending savings. This high reliance on assistance for livelihoods, and the often protracted displacement of IDPs can be associated with a shift from selling assistance and spending savings towards the increased use of debt to meet their needs. Debt accumulation combined with reliance on assistance is unsustainable and damaging for IDPs' long-term resilience. In particular, it leaves IDPs' vulnerable to future shocks and with diminished ability to re-establish themselves when returning to their place of origin.

Despite having few livelihood opportunities and the availability of health facilities within walking distance, IDP households sought healthcare services that are more costly and farther away, highlighting potential gaps in the types or quality of services offered in local facilities.

Finally, this comparative assessment emphasises a focus on highly vulnerable displaced families. There is an increase in both the majority of minors among the population (56%), and the proportion of female-headed households. In forming humanitarian priorities therefore, the differing needs between male and female-headed households should be taken into account as they face different situations, and thus challenges. Female-headed households were more likely to be single headed households (higher divorce and widow rate) and slightly older. Female-headed households also tended to rely on less stable livelihood sources, leaving them more vulnerable and reliant on coping strategies to meet their basic needs.

To inform this planning against the rapidly changing context of new displacements and returns, it is crucial to continue to regularly monitor IDP camps on developments, needs, and gaps. As camp consolidations and closures continue, it is evident that vulnerable households remain. When planning these continued closures and consolidations, it is important that this is taken into account so as not to aggravate the already precarious situation of many of the remaining households.

<sup>&</sup>lt;sup>51</sup> CCCM Settlement status report, 13 December 2017 to 31 January 2018.





# ANNEXES

# **Annex: Household Questionnaire**

GPS location	on N E			Governorate					Dis	strict	
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						Open			Other	-	Ob all and D
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									Yes		No
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	in the area of origin + documentati	ion								
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		Documents		property	iship or remai	certificate		Food n	ation card	Information card Guardianship
No	If no, which documents are	Birth certific		Marria	age certificate	Divorce certifica	ate	Death	certificate	certificate
	missing? (select multiple)	Trusteesh certificat		Inhei	ritance deed	School certifica	ate	Driver	s license	Not missing any of these
		ID Card	-	F	Passport	PDS card		MOD	M Letter	Security clearance document
No	If no, what is the gender and age o missing the document?				Inter age)	Females		N	Male	Refuse to answer
	n your opinion the livelihood/income		velihood	nake or know how to l/generate an income from		Agriculture (farming)			estock	Construction
earning opp	portunities available for you in your area of origin now?	Governme	nent		ealthcare	Transportation (taxi, etc.)	n		ce (hotel, aurant)	Private Business (enter text)
		Casual Lat	bour		t know/refuse o answer	Other (busines	ss)			
Returning,	Integrating, relocating intentions									
									,	
Are you curr	rently planning on returning to your ar	ea of origin?					-		res	No Refuse to answer
Are you curr	rently planning on returning to your ar	<u> </u>		n in area	ı of origin is	Other family/co	ommu retur	Do n	ot know	Refuse to answer Livelihood opportunities
Are you curr	rently planning on returning to your ar	Security  Basic servi	vices (wa	table ater, elec	tricity, health,	Other family/co	retur	Do n inity mem ned	ot know	Refuse to answer Livelihood opportunities available
Are you curr		Security  Basic servi educati Necessary	rices (wa tion, etc. y to secu	table ater, elec ) availab ure perso	tricity, health, le in AOO onal housing,		retur Er	Do n unity mem med motional c	ot know bers have bligation to ref	Refuse to answer Livelihood opportunities available
	If yes, what are the reasons why you would like to return to your	Security  Basic servi educati Necessary  Difficult con	rices (wa tion, etc. y to secu land an nditions/	table ater, elec ) availab ure perso nd proper f limited s	tricity, health, le in AOO onal housing, rty services in the	Limited live	retur Er elihood the ar	Do n inity mem med motional c d opportur	ot know bers have bligation to refinities in the are	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of
	If yes, what are the reasons why you would like to return to your	Security  Basic servi educati Necessary  Difficult con	rices (wa tion, etc. y to secu land an nditions/ area of d	table ater, elec ) availab ure perso nd proper	tricity, health, le in AOO onal housing, rty services in the nent	Limited live	retur Er elihood the ar	Do n inity mem med motional c d opportur	ot know bers have bligation to refinities in the are	Refuse to answer Livelihood opportunities available turn ea of displacement
	If yes, what are the reasons why you would like to return to your AOO? (max 3)	Security  Basic servi educati Necessary  Difficult con	rices (wa tion, etc. y to seculand an inditions/ area of d	table ater, elec ) availab ure perso nd proper limited s lisplacem (specify	tricity, health, le in AOO onal housing, rty services in the nent	Limited live	retur Er elihood the ar ement	Do n inity mem ined motional c d opportur rea of	ot know bers have bligation to refinities in the are	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of
Yes  If selected 'difficult	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are	Security  Basic servi educati Necessary  Difficult con a  Health facil	sirices (wation, etc. y to seculand an nditions/ area of d Other iilities	table  ater, elec ) availab ure person d proper limited s displacem (specify  Lack fac	tricity, health, le in AOO ple in AOO prty services in the nent	Limited live It is unsafe in displace	Er elihood the ar ement	Do n inity mem ned motional c d opportur rea of La toilets	ot know bers have bligation to rel nities in the are Do not feel a d	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of isplacement
Yes	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi	rices (wation, etc. y to secular land armoditions/area of dotter illities and dotter land armoditions/area of dotter land armoditions/area of dotter land armoditions/area of dotter land armoditions/area of dotter land land land land land land land land	table  ater, elect ) availab ure person d proper limited s lisplacem (specify  Lack fac m  Har	tricity, health, le in AOO onal housing, rty services in the nent )  ck of water of healthcare cilities and	Limited live  It is unsafe in  displace  Lack of NFIs  Difficulties  establishing livelihood/ incor	Er elihood the ar ement	Do n inity mem med motional c d opportur rea of La toilets	ot know bers have bligation to ret nities in the are Do not feel a d ck of cklatrines	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of isplacement Lack of electricity
Yes  If selected  'difficult  conditions'	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel	rices (wation, etc. y to sect land an inditions/area of d Other illities ood eel d by inity eks	table ater, elec ) availab ure perso d proper limited s displacem (specify  Lack fac m  Har curr 2	tricity, health, le in AOO onal housing, rty services in the nent )  ck of water of healthcare cilities and nedicines assment in ent location —4 weeks	Limited live  It is unsafe in  displace  Lack of NFIs  Difficulties  establishing livelihood/ income	Er elihood the ar ement	Do n inity mem med motional c d opportur rea of La toilets	ot know bers have bligation to ref bligation to ref blities in the are Do not feel a d ck of k/latrines	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of isplacement Lack of electricity
Yes  If selected 'difficult	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi	rices (wation, etc. y to sect land an inditions/area of d Other illities ood eel d by inity eks	table ater, elec ) availab ure perso d proper limited s displacem (specify  Lack fac m  Har curr 2	tricity, health, le in AOO onal housing, rty services in the nent )  ck of water of healthcare cilities and nedicines assment in ent location	Limited live  It is unsafe in  displace  Lack of NFIs  Difficulties  establishing livelihood/ incor	Er elihood the ar ement	Do n inity mem med motional c d opportur rea of La toilets	ot know bers have bligation to refulties in the are Do not feel a d ck of straines crowded	Refuse to answer Livelihood opportunities available turn as of displacement accepted in the area of isplacement Lack of electricity  Do not feel safe  Later
Yes  If selected 'difficult conditions'  Yes	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn	rices (was iton, etc. y to seculand an inditions/ area of do Other illities ood eel do by hity eks now Origin	table ater, elec ) availab ure persond proper ( limited s lisplacem	ctricity, health, lee in AOO onal housing, rty services in the nent ) ock of water of healthcare cilities and nedicines assment in ent location —4 weeks o answer	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incord  Other  1-2 months  Integrate with a family in nearby	Erretur Erretu	Do n ninity mem med motional c d opportur rea of La toilets	ot know bers have bligation to ret inities in the are Do not feel a d ck of s/latrines crowded  Move into house/apa neigh	Refuse to answer Livelihood opportunities available  turn ea of displacement accepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same
Yes  If selected  'difficult  conditions'	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn	rices (wae rices of color read of	table ater, elec ) availab ure persond proper limited s displacem (specify Lack fac m Har curr 2 N nal home	ctricity, health, le in AOO onal housing, rty services in the ment ) ck of water of healthcare cilities and nedicines rassment in ent location -4 weeks o answer	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incord  Other  1-2 months  Integrate with a family in nearby	Erretur Erretu	Do n ninity mem med motional c d opportur rea of La toilets  Overs  3-6 in the communal communication c	ot know bers have bligation to ret inities in the are Do not feel a d ck of s/latrines crowded  Move into house/apa neigh	Refuse to answer Livelihood opportunities available turn ea of displacement accepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same
Yes  If selected 'difficult conditions'	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?  If yes, will you be going to your original home in area of origin or	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn	rices (was iton, etc. by to seculand an inditions/area of do Other illities ood eel do by hity sks now original a public same neinearby version, etc. over the company of t	table ater, elec ) availab ure persond proper limited s displacem (specify Lack fac m Har curr 2 N nal home	ctricity, health, le in AOO onal housing, rty services in the ment ) ck of water of healthcare cilities and hedicines rassment in ent location -4 weeks o answer e onal building in hood area of origin	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incor  Other  1-2 months  Integrate with a family in nearby  Move into a pu	Erreture Err	Do n ninity mem med motional c d opportur rea of La toilets  Overra  3-6 i opportur rea of communal (who is the property of the property opportunity camp	ot know bers have bligation to ref ities in the are Do not feel a d ck of s/latrines crowded  Move into house/apa neigh building in a n ich one?) to area of orig	Refuse to answer Livelihood opportunities available  turn ea of displacement eaccepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same abourhood earby neighbourhood
Yes  If selected 'difficult conditions'  Yes	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?  If yes, will you be going to your original home in area of origin or	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn  Move into a sign of the sign o	rices (wation, etc. y to sect land an inditions/area of d Other illities ood eld by hity eks now Origin a public same ne nearby v (whice	table ater, elec ) availab ure persc d proper / limited s lisplacem / (specify  Lack fac m  Har curm 2.  N  nal home //commur ighbourh willage to ch one?)	ctricity, health, le in AOO onal housing, rty services in the ment ) ck of water of healthcare cilities and hedicines rassment in ent location -4 weeks o answer e onal building in hood area of origin	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incor  Other  1-2 months  Integrate with a family in nearby  Move into a pu	Erreture Err	Do n ninity mem med motional c d opportur rea of La toilets  Overra  3-6 i opportur rea of communal (who is the property of the property opportunity camp	ot know bers have bligation to ref ities in the are Do not feel a d ck of s/latrines crowded  Move into house/apa neigh building in a n ich one?) to area of orig	Refuse to answer Livelihood opportunities available  turn ea of displacement eaccepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same abourhood earby neighbourhood gin (which one?)  No
Yes  If selected 'difficult conditions'  Yes  Yes  Have you re	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?  If yes, will you be going to your original home in area of origin or will you live somewhere else?	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn  Move into a sign of the sign o	rices (was iton, etc. y to seculand an inditions/area of do Other illities ood eel do by inity sks inow original a public same ne nearby which in unsuce to inform	table ater, elec ) availab ure person d proper limited s displacem (specify Lack fac m Har curr 2. N nal home village to ch one?) cessful?	tricity, health, le in AOO onal housing, rty services in the ment ) ock of water of healthcare cilities and hedicines rassment in ent location 4 weeks o answer and building in lood area of origin	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incording liveliho	retur  Er  Er  Ilihooc  the ar  ement  me  anothe  y hous  ublic/c  a nea	Do n ninity mem med motional c d opportur rea of La toilets  Overra  3-6 i ommunal (whore) camp and	ot know bers have belgation to refaities in the are Do not feel a d  ck of s/latrines  months  Move into house/apa neigh building in a n ich one?) to area of orig  res  Refuse to Basic servi	Refuse to answer Livelihood opportunities available  turn ea of displacement eaccepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same abourhood earby neighbourhood in (which one?) No o answer ces (water, electricity,
Yes  If selected 'difficult conditions'  Yes  Yes  Have you re  If it were poryou or your	If yes, what are the reasons why you would like to return to your AOO? (max 3)  If selected "difficult conditions / limited services in the current area of displacement", which are the main constraints/gaps you currently face in camps? (max 3)  If yes, when do you think you will return?  If yes, will you be going to your original home in area of origin or will you live somewhere else?	Security  Basic servi educati Necessary  Difficult con a  Health facil  Lack of for  Don't fee welcomed communi 1-2 weel Do not kn  Move into a sign of the sign o	rices (was ition, etc. by to seculand an inditions/area of do Other illities ood eel do by hity sks now Origin a public same ne nearby was it of the indition	table ater, elec ) availab ure persond proper (limited s lisplacem (specify Lack fac m Har curr 2 N nal home //communighbourh village to ch one?) nation on in the A	tricity, health, le in AOO onal housing, rty services in the ment ) ock of water of healthcare cilities and hedicines rassment in ent location 4 weeks o answer and building in lood area of origin	Limited live  It is unsafe in displace  Lack of NFIs  Difficulties establishing livelihood/ incord  Other  1-2 months  Integrate with a family in nearby  Move into a pu	retur  Er  Er  Ilihooc  the ar  ement  me  anothe  y hous  ublic/c  a nea	Do n inity mem med motional of dopportur rea of Cover of Ser see communal (what is a ser see communal of return of ser see communal of ser see communal of ser ser ser see communal of ser	bligation to reference bligation bligation to reference bligation blight bligation bli	Refuse to answer Livelihood opportunities available  turn ea of displacement eaccepted in the area of isplacement  Lack of electricity  Do not feel safe  Later  an abandoned rtment in same abourhood earby neighbourhood  jin (which one?)  No o answer



		Functio justio mechar	ce nisms	Personal Identification Documents	Rehabilitation/ reconstruction of homes		ure/Non- d items	Food items
		Live opportun	ities / Profe	ome generating essional development raining	Do not know	Refuse	to answer	Other (enter)
Protection c	concerns							
	a person vulnerable? (select	Unable to		Separation from family	Lost head of household	Ins	ecurity	Forced restrictions of movement
multiple)		Force displace		Other (enter)				
Do you have	any specific concerns about women a	nd/or girls	returning t	o the area of origin?			Yes	No
					No bealthean			to answer
							cians, gynae	nen and girls (female
V	16		data and one	0	Security situation un			nood opportunities for
Yes	If yes, what concerns do you have fo	r women/g	jiris returni	ng?	women and gir	ls		omen and girls
					No education oppor			Other (enter)
					for women and o			
Do you have	any specific concerns about the elderl	v or peopl	e with disa	bilities returning to the a	area of origin?		Yes	No
•	, ,				· ·			to answer
					No healthcare s		ailable for eld sabilities	derly or people with
Yes	If yes, what concerns do you have fo	r women/g	jirls returni	ng?	Security situation u			lihood opportunities
					No education oppor			Other (enter)
CCCM					140 education oppor	turnues		Other (enter)
OOOM			Ca	mp management				
Which of the	following camp committees are preser	nt in this		committee	Women commit	tee		outh committee
site?				ribution committee	Maintenance com		W.	ASH committee
			(	Other committee	No committee	)		
	mmittees been elected by the camp			Yes	No			Do not know
population?	this IDP committee is representative of	the						
camp popula		uic		Yes	No			Do not know
	months, have you attempted to make	a complair	nt about yo	ur conditions,	Voo			No
	r other issues?				Yes			No
	stered with the MoDM / DDM?						Yes	No
Are you regis	stered with the MoDM / DDM?				1		Yes	No
	If not, for which of the following reason		I hav	e no complaints	I was scared to ma complaint	ake a	Р	refer not to say
No	did you not lodge a complaint?	) is	I didn't kn	ow where to lodge a	'			<u> </u>
	ala you not loage a complaint:		i didiri kiri	complaint	Other			
Do you feel h	hesitant to ask any questions and raise			Yes	No		Prefer not to say	
	th camp administration/aid workers?			165	No		Prefer not to say	
Do you know	v who you can contact in Camp			Vaa	Na		Prefer not to say	
or concern?	t/administration team if you have an iss	sue		Yes	No		P	refer not to say
or ouricum!				Camp Manager	NGO		Television	
				Print materials			1	Nord of mouth
How do you I	learn about distributions in the camp?	(max 3)	(banne	rs/posters/pamphlets)	Facebook			Vord of mouth
How do you l	learn about distributions in the camp?	(max 3)	(banne Inter	rs/posters/pamphlets) net (news websites)	Facebook Local authoritie	es	Co	mmunity leaders
How do you l	learn about distributions in the camp?	(max 3)	(banne Inter	rs/posters/pamphlets) net (news websites) ommunity leaders	Facebook Local authoritie Radio		Co	
How do you l	learn about distributions in the camp?	(max 3)	(banne Inter Co	rs/posters/pamphlets) net (news websites) ommunity leaders bile phone (apps)	Facebook  Local authoritie  Radio  Other (enter)		Со	mmunity leaders Newspapers
How do you l	learn about distributions in the camp?	(max 3)	(banne Inter Co Mo	rs/posters/pamphlets) net (news websites) ommunity leaders	Facebook Local authoritie Radio	rams	Co	mmunity leaders Newspapers about returning to Ao
			(banne Inter Co	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members	rams imily	Information How to e	mmunity leaders Newspapers about returning to Aounrol children in school
	learn about distributions in the camp?		(banne Inter Co	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa	rams imily	Information How to e	mmunity leaders Newspapers about returning to Ao
			(banne Inter Co	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo	rams mily rtunities	Information How to e	mmunity leaders Newspapers  about returning to Ao nrol children in school
			(banne Inter Co	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the camp	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume	rams imily rtunities ents for ne	Information How to e	mmunity leaders Newspapers  about returning to Aoi nrol children in school access health facilities
	e top 3 priority information needs? (max		(banne Inter Co	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo	rams imily rtunities ents for ne	Information How to e	mmunity leaders Newspapers  about returning to Aoi nrol children in school access health facilities
What are the	e top 3 priority information needs? (max	⟨3⟩	(banne Inter Co Mc How How Secu	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the camp	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume	rams mily rtunities ents for ne	Information How to e	mmunity leaders Newspapers  about returning to Aoi nrol children in school access health facilities
What are the  PROTECTIO Is leaving the	e top 3 priority information needs? (max	c3)	(banne Inter Co Mc Mo How How Secu	rs/posters/pamphlets) net (news websites) nmunity leaders bille phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the camp None	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume	rams imily rtunities ents for ne	Information How to e How to a w-borns, mar	mmunity leaders Newspapers  about returning to Ao nrol children in school access health facilities riages certificates, etc.
What are the  PROTEOTIO Is leaving the Is leaving the	e top 3 priority information needs? (max DN e camp temporarily allowed for a medic	cal emerge	(banne Inter Co Mc Mc How How Secu	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the camp None	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume	rams mily rtunities ents for ne	Information How to e How to a w-borns, man	mmunity leaders Newspapers  about returning to Ao nrol children in school access health facilities riages certificates, etc.  No
What are the  PROTEOTIO Is leaving the Is leaving the	e top 3 priority information needs? (maxion)  ON  e camp temporarily allowed for a medic e camp temporarily allowed? (for exam any barriers accessing services, assist	cal emerge	(banne Inter Co Mc Mc How How Secu	rs/posters/pamphlets) net (news websites) nmunity leaders bile phone (apps) to access assistance to replace missing documents to make complaints rity restrictions in the camp None	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume  Other (enter)	rams mily rtunities ents for ne	Information How to e How to a w-borns, man Yes Yes	mmunity leaders Newspapers  about returning to Aor nrol children in school access health facilities riages certificates, etc.  No No No
What are the  PROTEOTIO Is leaving the Is leaving the	e top 3 priority information needs? (maxion)  ON  e camp temporarily allowed for a medic e camp temporarily allowed? (for exam any barriers accessing services, assist  If yes, what are the barriers? (select	cal emerge	(banne Inter Co Mc Mc How How Secu	rs/posters/pamphlets) net (news websites) net (news websites) nemunity leaders bile phone (apps) o access assistance o to replace missing documents to make complaints rity restrictions in the camp None narket, livelihood) nce in the camp?	Facebook  Local authoritie Radio Other (enter) Sponsorship prog How to contact fe members How to find job oppo How to get docume Other (enter)  Gender discrimina	rams mily rtunities ents for ne	Information How to a How to a w-borns, man  Yes Yes Yes No	nmunity leaders Newspapers  a about returning to Aoutrol children in school access health facilities riages certificates, etc.  No No No No male head of HH
What are the  PROTECTIO Is leaving the Is leaving the Do you face a	o top 3 priority information needs? (maximum)  DN  e camp temporarily allowed for a medic e camp temporarily allowed? (for exam any barriers accessing services, assist lf yes, what are the barriers? (select multiple)	cal emerge ple for goi tance or le	(banne Inter CC Mc Mc How How Secu Inter	rs/posters/pamphlets) net (news websites) net (news websites) nmunity leaders bile phone (apps) o access assistance r to replace missing documents to make complaints rity restrictions in the camp None narket, livelihood) nce in the camp? ing documents nation on available ces/assistance	Facebook  Local authoritie  Radio  Other (enter)  Sponsorship prog  How to contact fa  members  How to find job oppo  How to get docume  Other (enter)	rams mily rtunities ents for ne	Information How to a How to a w-borns, man  Yes Yes Yes No	mmunity leaders Newspapers  about returning to Aou nrol children in school access health facilities riages certificates, etc.  No No No
What are the  PROTECTIO Is leaving the Is leaving the Do you face a  Yes  Have you rec	e top 3 priority information needs? (maximum)  DN  e camp temporarily allowed for a medice camp temporarily allowed? (for examany barriers accessing services, assist lf yes, what are the barriers? (select multiple)  ceived sufficient information about: reg	cal emerges ple for goi ance or le	(banne Inter Co Mc Mc How How Secu Procy? Ing to the n gal assistation service coursentation in the service of	rs/posters/pamphlets) net (news websites) net (news websites) nmunity leaders bile phone (apps) o access assistance r to replace missing documents to make complaints rity restrictions in the camp None narket, livelihood) nce in the camp? ing documents nation on available ces/assistance	Facebook  Local authoritie Radio Other (enter) Sponsorship prog How to contact fe members How to find job oppo How to get docume Other (enter)  Gender discrimina	rams mily rtunities ents for ne	Information How to a How to a w-borns, man  Yes Yes Yes No	nmunity leaders Newspapers  a about returning to AoC nrol children in school access health facilities riages certificates, etc.  No No No No male head of HH
What are the  PROTECTIO Is leaving the Is leaving the Do you face a  Yes  Have you rec	o top 3 priority information needs? (maximum)  DN  e camp temporarily allowed for a medic e camp temporarily allowed? (for exam any barriers accessing services, assist lf yes, what are the barriers? (select multiple)	cal emerges ple for goi ance or le	(banne Inter Co Mc Mc How How Secu Procy? Ing to the n gal assistation service coursentation in the service of	rs/posters/pamphlets) net (news websites) net (news websites) nmunity leaders bile phone (apps) o access assistance r to replace missing documents to make complaints rity restrictions in the camp None narket, livelihood) nce in the camp? ing documents nation on available ces/assistance	Facebook  Local authoritie Radio Other (enter) Sponsorship prog How to contact fe members How to find job oppo How to get docume Other (enter)  Gender discrimina	rams mily rtunities ents for ne	Information How to a How to a w-borns, man  Yes Yes No	mmunity leaders Newspapers  about returning to AoC nrol children in school access health facilities riages certificates, etc.  No No No No male head of HH Other (enter)





	household members w	vith you in the shelter	Chronio illness/dise		Fragile (anx Eaquize	e X Syndrome ciety, depress ophrenia) or visual,	ellectual (Down Syndrome, Autism, rome, etc.), mental health problems ression, PTSD, Bipolar Disorder, or physical and sensorial (hearing, ual, physical, speech).			
	-		Separated	child		nt/lactating omen			Widow	
			Elderly at	risk	WO	illeli				
HEALTH			,							
Are there ac	ccessible health service	es within 2 Km distance	to the location	n?				Yes		No
		have been vaccinated a	•	1		,				
		have had diarrhoea in the			5 present ir	n the HH)		V		N.
Do pregnant	it or lactating women v	isit obstetric or antenata	ii care? (If PLV	v present in the HH)			Voca	Yes	aht profess	No sional medical
Has a memt	ber of your household		Yes	tr s, but we did medic	eatment not seek p al treatme	rofessional				
					ast 30 days	8				
Yes	If selected "yes see	ked healthcare", where	did you receive	e this treatment?			hosp	oital/clinic GO clinic		hospital/clinic
Yes	If yes, did your HH	member(s) experience p			d health car	re?				,
			of healthcare	-				transport av		
			•	d health staff at hospita				clinic		public health
	Please specify the		clinic		alth	No treatm		able for the p		
Yes	type of difficulty	Insufficie		urchase medicine		DL.	Problems with civil documents  Public health clinic did not provide referral			
	faced	Medical staff refu	Language bused treatmen	t without any explanation	nn .	Publ				elerrai
					511	Th	Public health clinic not open  The treatment center was too far away			
سي بي				No medicine available at hospital						
		No me	edicine availab	le at pharmacy	0	ther:				
				le at pharmacy t public health clinic	0	ther:				
FOOD SEC	CURITY		ne available at	t public health clinic						
FOOD SEC	CURITY		ne available at		Bo	ought on cred			Own produ	uction
What was th	the main source of the not read out list) select	No medicing	ne available at Bou Gifts fro	t public health clinic  ught with cash  om family / friends	Bo			Food ass	•	
What was th	he main source of the	No medicing	Bou Gifts fro	t public health clinic ught with cash	Bo Food	ought on cred	from	Food ass	sistance fro	
What was th	he main source of the not read out list) selec	No medicing	Bou Gifts fro Food as	t public health clinic  ught with cash  om family / friends sistance from local	Bo Food	ought on cred assistance government	from		sistance fro	m UN or ING Other
What was the month? (do a selected a type of assistance e lf selected a type of assistanc a type of assistanc	he main source of the not read out list) select Which type of food	No medicing food in the past st main 2 sources assistance has your	Bou Gifts fro Food as chari In-kind	ught with cash om family / friends sistance from local ity / community	Bo Food	ought on cred assistance government ost communi	from ty F	PDS assistar	sistance fro	m UN or ING Other er
What was the month? (do to the month)))))))))	which type of food HH received?  How regularly do you assistance	No medicir food in the past ct main 2 sources assistance has your	Bou Gifts fro Food as chari In-kino At least on	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month	From ho	ought on cred I assistance government ost communi Cash	ty F	PDS assistar	visistance fro	m UN or ING Other er
What was th month? (do a type of assistanc e If selected a type of assistanc e Did your hot.	which type of food HH received?  How regularly do you assistance	No medicing food in the past extraord 2 sources assistance has your ou receive food to PDS (Public Distribution of PDS (PDS (PDS (PDS (PDS (PDS (PDS (PDS	Bou Gifts fro Food as chari In-kind At least on	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month	From ho  At lea	ought on cred assistance government ost communi Cash ast once a m	ty F	DDS assistar At	Vouch	Other er a month
What was the month? (do to the month)))))))))	Which type of food HH received?  How regularly do you assistance  How regularly do you assistance	No medicing food in the past standard pour receive food to PDS (Public Distribution ou receive PDS assistance)	Bou Gifts from Food as charm In-kind At least on on Assistance ce?	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month	From ho At lea	ought on cred assistance government ost communi Cash ast once a m	ty P	DDS assistar At	Vouch	Other er a month
What was th month? (do of selected a type of assistanc e lif selected a type of assistanc e Did your hour yes	Which type of food HH received?  How regularly do you assistance  How regularly do you when was the last PDS?	No medicing food in the past standard pour receive food for PDS (Public Distribution our receive PDS assistantime you received food the pour received food the p	Bou Gifts from Food as charm In-kind At least on On Assistance ce?	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 At least once a  At least once every th	From ho  At lea  months?  week	ought on cred assistance government ost communi Cash ast once a m	from ty F onth ast once	PDS assistar  At  Yes a month  months ago	Vouch  least twice  At leas  Over to	Other er a month  No t twice a month
What was th month? (do of selected a type of assistanc e of the selected a type of assistanc e of the selected a type of assistanc e of assistanc e of the selected a type of assistanc e of the selected a type of assistance of the selected a type of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of the selected a type of a type of the selected a type of a typ	which type of food HH received?  How regularly do you assistance  How regularly do you when was the last PDS?  The last time, did you	No medicing food in the past standard part of the past sources assistance has your for the polymer of the polym	Bou Gifts from Food as charm In-kind At least on On Assistance ce?	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 At least once a  At least once every th	From ho  At lea  months?  week	ought on cred I assistance government ost communi Cash ast once a m	from ty F onth ast once	PDS assistar  At  Yes a month  months ago	Vouch  least twice  At leas  Over to	Other er a month  No t twice a mont wo months ag
What was th month? (do of selected a type of assistanc e of the selected a type of assistanc e of the selected a type of assistanc e of assistanc e of the selected a type of assistanc e of the selected a type of assistance of the selected a type of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of the selected a type of a type of the selected a type of a typ	Which type of food HH received?  How regularly do you assistance  How regularly do you when was the last PDS?	No medicing food in the past standard part of the past sources assistance has your for the polymer of the polym	Bou Gifts from Food as charm In-kind At least on On Assistance ce?	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3  At least once a  At least once every the	From ho  At lea  months?  week  aree month  Last	ought on cred I assistance government ost communi Cash ast once a m At le	ty F onth ast once Two n	PDS assistar  At  Yes a month  months ago Ill ration Yes	Vouch  least twice  At leas  Over to	Other er a month  No t twice a mont wo months ag
What was th month? (do of selected a type of assistanc e of the selected a type of assistanc e of the selected a type of assistanc e of assistanc e of the selected a type of assistanc e of the selected a type of assistance of the selected a type of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of assistance of the selected a type of assistance of a type of assistance of the selected a type of the selected a type of a type of the selected a type of a typ	Which type of food HH received?  How regularly do you assistance  usehold have access to the work of t	No medicing food in the past standard part of the past sources assistance has your for the polymer of the polym	Bou Gifts from Food as charm In-kind At least on On Assistance ce?	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 in At least once a At least once every the month  Missing docum	From ho  From ho  At lea  months?  week  nree month  Last	ought on cred I assistance government ost communi Cash ast once a m At le	from ty F onth ast once Two n Fu der discri	PDS assistar  At  Yes a month  months ago Ill ration Yes mination	Vouch  At leas  Over to  No r h	Other er a month  No t twice a mont wo months ag lalf ration No male head of ousehold
What was th month? (do a type of assistanc e If selected a type of assistanc e Did your hour yes Yes Yes Do your HH	which type of food HH received?  How regularly do you assistance  when was the last PDS? The last time, did you face any barriers in a lif yes, what are the	No medicing food in the past extract main 2 sources assistance has your four receive food to PDS (Public Distribution our receive PDS assistance time you received food the food to PDS?	Bot Gifts from Food as charing In-kind At least on on Assistance ce?  hrough the or half ration?	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3  At least once a  At least once every th  This month  Missing docum  No information on a assistance	From ho  From ho  At lea  months?  week  nee month  Last  eents  available	ought on cred I assistance government ost communi Cash ast once a m At le	onth  Two n  Fu  Distance	PDS assistar  At  Yes a month  nonths ago Ill ration Yes mination ce	Vouch  At leas  Over to  No r h	Other er a month  No t twice a mont  wo months ag lalf ration  No male head of ousehold her (enter)
What was th month? (do in the month?)  If selected a type of assistance in the month of the mont	Which type of food HH received?  How regularly do you assistance  When was the last PDS? The last time, did you face any barriers in a lif yes, what are the e access to markets in	No medicing food in the past standard pour receive food to PDS (Public Distribution our receive PDS assistant time you receive food the pour receive the full ration coessing to PDS?  se barriers? (max 3)	Bou Gifts fro Food as chari In-kind At least on on Assistance ce? hrough the or half ration?	t public health clinic  ught with cash om family / friends sistance from local ity / community d (food products)  ast once a week ice every three month  System) in the past 3 in At least once a At least once every the This month  Missing docum No information on a assistance	From ho  From ho  At lea  months?  week  nee month  Last  eents  available	ought on cred I assistance government ost communi Cash ast once a m At le	onth  Two n  Fu  Distance	PDS assistar  At  Yes a month  months ago Ill ration Yes mination	Vouch  At leas  Over to  No r h	Other er a month  No t twice a mont wo months ag lalf ration No male head of ousehold
What was th month? (do in the month?)  If selected a type of assistance in the month of the mont	Which type of food HH received?  How regularly do you assistance  When was the last PDS? The last time, did you face any barriers in a lif yes, what are the e access to markets in	No medicing food in the past content and 2 sources assistance has your four receive food to PDS (Public Distribution or receive PDS assistance time you received food the food to PDS?  See barriers? (max 3) asside the camp or within any side you consume the factor of the part of the past of the part of the past of the part of the past of the	Bot Gifts from Food as charing In-kind At least on the or half ration?  walking distance following food walking distance following food the or half ration?	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 At least once a At least once every th  This month  Missing docum  No information on a assistance ace? dds? asta, wheat flour, rice, b	From hor At least months?  week bree month Last ments available bulgur;	ought on cred I assistance government ost communi Cash ast once a m  At le	onth  Two n  Fu  Distance	At  Yes a month  nonths ago Il ration Yes mination Ce Yes  AIRY PROD	Vouch  Vouch  least twice  At leas  Over the North Ct	other er a month  No t twice a mont  wo months ag lalf ration  No male head of ousehold her (enter)  No
What was th month? (do in the month?)  If selected a type of assistance in the month of the mont	Which type of food HH received?  How regularly do you assistance  When was the last PDS? The last time, did you face any barriers in a lif yes, what are the e access to markets in	No medicing food in the past control of the pa	Bot Gifts from Food as charing In-kind At least on the company on Assistance or half ration?  walking distance following food RS (bread, page 1975)	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 At least once a At least once every th  This month  Missing docum  No information on a assistance ince?	From hor At least months?  week mree month  Last mould available mould availab	ought on cred I assistance government ost communi Cash ast once a m  At le	onth  Two n  Fu  Distance	At  Yes a month  nonths ago Il ration Yes mination Ce Yes  AIRY PROD	Vouch  Vouch  At leas  Over to  No r  h  Ot	other er a month  No t twice a mont  wo months ag lalf ration  No male head of ousehold her (enter)  No k, c)
What was th month? (do in the month?)  If selected a type of assistance in the month of the mont	Which type of food HH received?  How regularly do you assistance  When was the last PDS? The last time, did you face any barriers in a lif yes, what are the e access to markets in	No medicing food in the past extraord assistance has your assistance has your for the polymer of	Bot Gifts from Food as charing In-kind At least on the company on Assistance or half ration?  walking distance following food RS (bread, passistance) S & SEEDS (b. 1986)	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3  At least once a  At least once every th  This month  Missing docum  No information on a assistance ace? dds? asta, wheat flour, rice, b potato, sweet p	From hor At least months?  week meek month  Last moulgur; potato) s, etc)	ought on cred I assistance government ost communi Cash ast once a m  At le	onth  Two n  Fu  Distance	At  Yes a month  nonths ago Il ration Yes mination Ce Yes  AIRY PROD	Over to home of the season of	other er a month  No t twice a mont  wo months ag lalf ration  No male head of ousehold her (enter)  No  k, c) S S
What was th month? (do in the month?)  If selected a type of assistance in the month of the mont	Which type of food HH received?  How regularly do you assistance  When was the last PDS? The last time, did you face any barriers in a lif yes, what are the e access to markets in	No medicing food in the past content and 2 sources assistance has your four receive food for PDS (Public Distribution or receive PDS assistance time you received food the pour receive the full ration codessing to PDS?  See barriers? (max 3) asside the camp or within any did you consume the CEREALS OR TUBE PULSES, NUT:	Bot Gifts from Food as charing In-kino At least on In-kino On Assistance or half ration?  walking distance following food RS (bread, passing S & SEEDS (bread, passing FRUITS (approximately septiment).	t public health clinic  ught with cash  om family / friends sistance from local ity / community d (food products)  ast once a week ce every three month  System) in the past 3 At least once a At least once every th  This month  Missing docum  No information on a assistance nce? dsta, wheat flour, rice, b potato, sweet p poeans, chickpeas, lentil	From hor At least months?  week mree month  Last moulgur; botato) s, etc) bage) s, etc)	ought on cred I assistance government ost communi Cash ast once a m  At le	onth  Two n  Fu  Distance	At  Yes a month  nonths ago Il ration Yes mination  Dee  Yes  AIRY PROD  ETS (Sugar,	Over to home of the season of	other  other  a month  No t twice a mont  wo months ago lalf ration  No male head of ousehold her (enter)  No  k, c) S S In,





During the last 7 food. 0 = None	days, on how	v many days did yo	ır household	d do any o	of the following	in order t	o cope with la	ck of	,	Yes	N	0
			or friend(s)	)	L		on size at mea				meal)	
If yes, what	fo	consumption by wo or men and small ch	ildren to eat	t		Rely on	less preferred	l and less	expensive	e food (ie d	cheaper lower quality food)	
coping strategies	W	onsumption by mer vomen and small ch	ildren to eat	t				Reduc	e number	of meals e	eaten in a day	
used		usehold members y	18 to work	(			Ex	change fo	od in orde			
	Adu Other strate	ults eat less so chil egy:	lren can eat	t								
		vere eaten by your			arable to breakf	ast lunch	, dinner)?		,	N	1-	
In the last 30 day		ced any problem to			lling agricultura	l/livestocl	k products/pur	chasing	,	N		
food? Since your displacement, have you been able to access your government Public Distribution System rations?										Yes	N	
Yes When was the last time you received food through the PDS?  This month Last month								onth	Two m	onths ago	Over two n	nonths ago
	ne last time, d	id you receive the	ull ration or h	half ration	?				Full	l ration	Half	ation
NFI	lauluta2	Do you have										0
Do you have b		mattresses?		-	e jerry cans?	L	Oo you have a		Do		summer clothes	?
Yes How many water	No r jerry cans do	Yes Nones your HH have?	)   Y	'es	No		Yes	No		Yes	No	
Do you have a stove?	cooking	Do you have a regular access to cooking fuel?	Do	you have	a kitchen set?		Do you have l nightfal		Do		a regular acces ating fuel?	s
Yes	No	Yes N		'es	No		Yes	No		Yes	No	
Do you have storage	e luei	Do you have enou winter clothes fo your family?		Do you h	Do you have access to an air water cooler (AWC)?				air	Do you h	ave a fridge?	
Yes	No No	Yes N	Y	'es	No	$\perp$	Yes	No		Yes	No	
Do you have acc		nours per day is the	electricity a	vailable?						Yes (enter i	number 1 to 24)	0
	•	tems is a priority no				Kerosen					Kerosene	
LIVELIHOODS				,	Jerry c	an for ke	rosene storag	e		VVI	nter clothes	
		Commercial agr	culture (large	e scale	Smallh	older agri	culture/livesto	ck	Tran	sportation	(taxi driver/truck	driver)
What were your		Subsistence ag	riculture/live				cultural labour			Casual	unskilled labour	•
household's prim	•	Self-employ busine	ed (commerces owner)	cial		ic sector/civil servant (teacher, postal service, public administration)				Public security official (military, p		
livelihood source	p to 3) (do	Low skilled se formal educ	vice industration require		Skilled ser	vice indus	stry (apprentic	eship	High		ervice industry (	(degree
not read out fron	n list)	Gifts/in-kind ass and	stance from elatives	friends	Pensi	on from tl	ne governmen	t		Gov	vernment aid	
House services !	oro of		itarian aid	ho lest		pport (dis	sability allowar	nce)	Other (e		, 1	No
nave any memb	ers of your no	ousehold earned ar	income in th	ne iast mo			pportunities	Mi	ssing docu		Gender discr	No rimination
No If	not, why is tha	at?					side the camp ad of househol	ld Mo	to work vement re		Distar	ice
						Othe	r (enter)			100		
							Shelter	maintena Food	ance	IQD IQD		
								lectricity		IQD		
In total, how muc	ch Iraqi Dinars	s did you spend on	basic needs	over the	last 30 days in	IQD?		dical Care	9	IQD IQD		
								Water		IQD		
NA// /					1.0		Debt	t repayme	nt	IQD		
		e over the last 30 cotal income in Iraqi				cluding re	mittances, hur	manitariar	n aid	IQD IQD		
	nousehold's to	tal income in Iraqi	Dinars over t	the last 30	days? (includ	ing remitt	ances, human	itarian aid	l and	IQD		f: 1
Did the househo other activities to		any of the following nselves?		Spe	ent Savings		Charita	ible Dona	tions		ce spending on ditures, such as education	





			Acc	ess to a p	revious ir	ncome sou	rce	Debt: Borrow	ed mo	ney	Sold		assistance items
			S	upport fro	m Friend	s/ Relative	S	Governme	ental ai	d		ther (p	lease specify)
					elling Ass			Humanita	rian ai	d	activity		gage in any other port the household
Debt	In IQD, how muc	ch debt has the ho	usehold ac	crued sind	ce their di	splacemen	t?				IQD		_
Debt	Who do you born	row money from?		Family			Friends	Neighbours from my place of origin		Otho displa famil	ced	Local shopkeeper	
				Local money lender				Other (enter)					
WASH													
What is your p	nat is your primary source of drinking water?					Purchased from shop Wa  Network (private)				Dug we			r:
Do you feel the	ere are any issue	es with the water q	uality (look	s dirtv. is	saltv. tast	es bad, sn		(communal) ad)?		•	Yes		No
	·				chased fro			ater Trucking		Dug we		Othe	
washing and o		ary source of water	101	N	etwork (p	-	(	Network (communal)	R	liver or sp			
How do you st	ore your water?			_	Tank			Jerry can		Bucke	t		Bowl
In the nast 30	days has the soi	urce of drinking wa	tar avar sı	ffered from	Jug m a short:	age of 24h		Other (enter)		,	Yes		No
· · · · · · · · · · · · · · · · · · ·				ted by		nunal garb						T	hrow in street/open
What is the mayour househol	ain method of wa d?	aste disposal for	munio			bin		Rubbish pit		Bu	ırning		place
How frequently site?	y is waste collect	ted from the	Ever	y day	E	very week		Every month		More th	an monthl	, I	Never
What types of	functional latrine	s do you have acc	ess to?					Public la Private la				Communal latrines None	
		s separate for mer		en?				Yes					
		s lockable from the								Yes		No	
		s have functioning		. 0 // (		1 / 12 11	11. 0	LHD			Yes		No
Do elderly and	disabled persor	ns have access to a	adapted la	rines? (if	have elde	rly/disable	d in th	e HH) Public sh			Yes	Commi	No unal showers
		ers/ bathing places						Private sl		6			showers
		ers/ bathing places									Yes		No
		ers/ bathing places rs/ bathing places I				9/					Yes Yes		No No
EDUCATION	or public shower	s/ battling places i	iave iuricu	orning light	uriy :						res		INO
	education are you	ur children receivin	q?					Formal	Formal Non-fo				None
		Ages 3-5	Ages 3-5	Ages 6-1	11 Male	Ages 6 Fema		Ages 12-14 Male		es 12- emale	Ages 1 Mal		Ages 15- 17 Female
	Idren (3-17) in yo ding formal educ	our household are	Female										
How many chi	Idren (6-17) in sehold are	auon											
currently atter formal learning at least 3 day	g environment												
		Cannot afford	No sp	ace in		ols not in g		Schools lack	а		n need to		Recently or
	lf and the	to pay for		not		tion (proble	ems	curriculum,			the family		ontinuous movement
	If any of your children do	tuition/cost (textbook, etc)		/unable		th latrines, icity, furnit	ure	certification, c			ousehold		to other location/s
None	not attend school, what	Children need		gister narriage		wly arrived		trained teache Customs/traditi		Se	curity		Disability
	are the reasons?	to work Traumatized	Unnec	essary	Child	ren must b	eg	Missed too mu to make up	ch		n/Insecurity I is too far		o transport available
		Still too young to enrol	Other:		1			ı to make up	ı			ı	
Costs		children do not atte t are the reasons?	nd school,	W	Books riting ma			Bag Tuition		chool uni		Othe	r:
PRIORITY NE					ga						,,,,,,		
	top 3 priority ne	ade?		(	Civil Docu	ments		Education for	r child	ren		Em	ployment
vviiat are your	top a priority ne	cuð!			Food			Learn local	langua	nge		Med	dical Care





Shelter support	Water	Registration
Sanitation	Vocational training	Footwear
Clothing	Psychosocial Support	Summarisation kits
Other:		

