Iraq

Multi-Sector Needs Assessment (MSNA) IV of Refugees Living out of Formal Camps in the KR-I

May 2019





Cover image: Tawela, Halabja District, February 2016. © IMPACT Initiatives, 2016

About IMPACT

IMPACT Initiatives is a Geneva based think-and-do-tank, created in 2010. IMPACT's teams implement independent assessment, monitoring & evaluation and organisational capacity-building programmes in direct partnership with aid actors or through its inter-agency initiatives, REACH and AGORA. Headquartered in Geneva, IMPACT has an established field presence in over 20 countries across Africa, Middle East and North Africa, Central and South-East Asia, and Eastern Europe.



Summary

The outbreak of violence in Syria since 2011 has led to large numbers of displaced Syrians seeking refuge in neighbouring countries, including the Kurdistan Region of Iraq (KR-I). However, this ongoing crisis is situated in a broader regional context characterised by both internal displacement into the KR-I from other governorates in Iraq, as well as refugees arriving from other neighbouring countries prior to the Syrian crisis. Nonetheless, more than 255,000 Syrian refugees and approximately 44,000 refugees from other countries, among them Iranian and Turkish refugees, currently reside in the KR-I.¹

Hosting both refugees and internally displaced persons (IDPs) from other governorates has placed increased pressure on the infrastructure and delivery of basic services in the KR-I. Thus, filling the information gap on the needs and vulnerabilities of out-of-camp refugee households through evidence-based assessments is necessary for a targeted response and an effective delivery of basic services.

In order to fill this information gap, IMPACT Initiatives (IMPACT), in coordination with UNHCR, conducted a fourth round multi-sectoral needs assessment (MSNA), in which a total of 1,371 Iranian, Syrian and Turkish out-of-camp refugee households were interviewed to provide a comprehensive understanding of multi-sectoral needs of out-of-camp refugees in the KR-I. The assessed households were asked a series of questions through a household survey on their needs related to seven sectors (livelihoods, protection, education, food security, health, shelter and WASH), as well as cross-sectoral questions about household demographics, movement intentions, communication with aid providers, and their most prioritised basic needs.

Findings in this report were disaggregated across refugee groups (Iranian, Syrian and Turkish refugee households) and across governorates (households living in Dohuk, Erbil and Sulaymaniyah). The assessed households were randomly sampled from UNHCR-provided lists to ensure that findings are representative at a 95% confidence level and 7% margin of error at the refugee group and at the governorate level, and 95% confidence level and 5% margin of error at the KR-I level. Findings are thus representative for households on these UNHCR-provided lists, which were extracted from UNHCR's ProGres database. The refugee households in these lists fulfilled two conditions: they had registered with UNHCR and had also been in contact with them in the 12 months preceding the interview. Thus, this assessment excludes unregistered refugee households in the KR-I and those households that had not been in communication with UNHCR in the previous year.

Statistical tests were conducted for each indicator. Where differences between the disaggregating variables were not found to be statistically significant, this is clearly indicated in this report. In addition, for certain indicators, a comparative longitudinal analysis was conducted on the Syrian refugee caseload from this year's assessment and last year's 2017 MSNA III to uncover if any trends could be established over the two years.

Cross-Sectoral Findings

Findings related to the households' cross-sectoral needs suggest that economic vulnerability lies at the core of many sectoral and overarching needs of refugee households living out of formal camps in the KR-I. Although the households' sectoral needs are rooted in this economic vulnerability, these vulnerabilities manifested themselves differently among the three refugee groups.

While most households across the three refugee groups reported having income through employment (89%; see Figure 1), this employment was often temporary and difficult to access, with households unable to earn enough through employment alone to cover monthly expenses. Concurrently, the assessed households reported needing to resort to coping mechanisms to be able to cover all household costs.

For example, over three quarters of households (79%) reported being in debt at the time of interview for this assessment. Of these households in debt at the time of interview, 93% reported borrowing from family or friends. Debt did not only affect Syrian households who had been recently displaced, but also applied to Iranian and Turkish households that have been in the KR-I for an extended period of time. This finding suggests that

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¹ UNHCR, <u>Iraq Fact Sheet</u>. Figures as of November 2018. Accessed 4 March 2019.



debt was used as a coping mechanism regardless of the length of displacement. The reported reasons for debt were primarily related to expenditure on basic needs such as food or household expenses (rent, electricity bills, etc.).

However, for each refugee group, economic insecurity manifested itself in a different way. For example, among Syrian refugee households, reasons given for children dropping out of school included helping with income generation for the household. Iranian households, in contrast, were likely to be food insecure, which manifested itself in households frequently reporting the use of coping mechanisms² to make up for lack of income to buy food. For Turkish refugee households, economic vulnerabilities (for instance access to employment) might be due to more frequently reported issues of missing legal documentation.

Thus, while employment represented the most frequently reported income source, using coping mechanisms was still widespread among the assessed households and suggests that certain gaps related to livelihood opportunities and sustainable income sources exist.

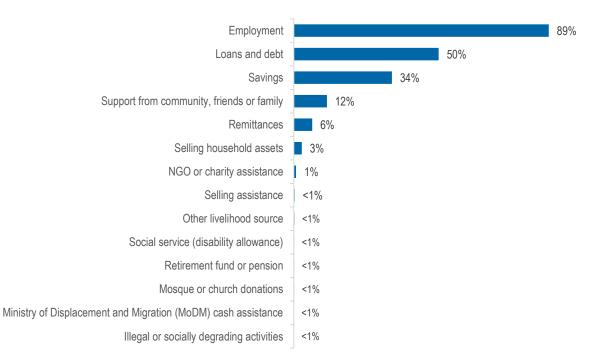


Figure 1: Proportion of reported household livelihood sources in the 30 days preceding interview, at KR-I level ³

Economic vulnerabilities such as a heavy reliance on debt and no household members in employment could directly affect these households' ability to cover costs related to multiple sectoral needs, such as renting adequate accommodation, purchasing food for the household, ensuring children's school attendance, and accessing adequate healthcare services.

Two subsets showed particular vulnerabilities related to economic insecurity. The first of these subsets were classified as 'high income vulnerability' households which reported having less than 85,000 IQD or 70 USD in household income per household member in the 30 days preceding interview. A higher proportion of these households (27% of 'high income vulnerability' households) reported that none of their household members were working, compared to 4% of 'less income vulnerability'⁴ households reporting the same. Furthermore, households classified as 'high income vulnerability' more frequently reported being in debt (92%) and their average total amount of debt (2,495,000 IQD or 2,095 USD) was reported to be higher than for households being labelled as

⁴ Households classified as 'low income vulnerability' reported an income of more than 85,000 IQD or 70 USD per capita in the 30 days preceding the

interview. 85,000 IQD or 70 USD per capita per month reflects the value of the Minimum Expenditure Basket in Iraq and is commonly used as an equivalent

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of the poverty threshold. See Cash Working Group (CWG), Survival Minimum Expenditure Basket. June 2018. Accessed 4 March 2019.



² For instance, using savings or selling productive assets to cope with a lack of financial means to buy food.

³ Multiple responses were possible, so findings exceed 100%.

'low income vulnerability' (73% reported being in debt with an average total amount of debt of 1,955,000 IQD or 1,640 USD).

Second, female-headed households were found to be more economically vulnerable than male-headed households. Overall, 10% of the assessed households reported being female-headed. However, female-headed households more frequently reported having no working household members (32% of female-headed households) than male-headed households (9%). Female-headed households also slightly more frequently reported being in debt at the time of the interview (81%) and indicated a significantly higher average amount of debt (2,935,000 IQD or 2,465 USD) than male-headed households (78% reported being in debt with an average total amount of debt of 2,070,000 IQD or 1,740 USD).

Sectoral findings

Livelihoods

- Findings suggest that households faced substantial financial and economic challenges. While
 roughly nine out of ten households (89%) reported employment as an income source, on average, this
 income did not suffice to cover monthly expenditures. Only when adding additional income sources –
 such as support from the community or family, or assistance from NGOs did households manage to
 generate sufficient income to cover these expenses.
- One out of three households (33%) reported having a total monthly household income which includes employment and non-employment sources – that was less than 85,000 IQD or 70 USD per capita.⁵
- While Syrian refugee households reported a small surplus between total income and total expenditure in the 30 days preceding interview, Iranian and Turkish refugee households faced a deficit.⁶ The reported average surplus for Syrian refugee households was 5,000 IQD or 5 USD, while Iranian households reported an average deficit of 80,000 IQD or 65 USD, and Turkish households an average deficit of 85,000 IQD or 70 USD.
- This financial insecurity was reflected in employment being reported as a priority need by 70% of all Iranian, Syrian and Turkish refugee households at the KR-I level. Correspondingly, 70% of households reporting employment as an income source reported this employment was temporary and often in low-paying sectors such as construction work (as reported by 52% of households reporting employment as an income source).

Education

- Across the KR-I, attendance rates for children in formal education decreased the older the children of households were, most frequently affecting 15 to 17-year-old boys and girls. 76% of 6 to 11-year-old boys and 88% of girls of that age range were reported to be enrolled education, while 65% of boys between 12 and 14 years, and 71% of girls of this age were in formal education. For 15 to 17-year-old boys, attendance rates of formal education dropped to a KR-I average of 37%, whereas 39% of girls between 15 and 17 years were in formal education.
- However, children being out of formal education disproportionately affected Syrian refugee households to the two other groups. Syrian refugee households showed a significant decrease in the attendance rate of older children, with 75% of 6 to 11-year-old Syrian boys and 88% of 6 to 11-year-old Syrian girls attending formal education, compared to 32% of 15 to 17-year-old Syrian boys and 35% of 15 to 17-yearold Syrian girls attending formal education.



⁵ 70 USD, or 85,000 IQD, per capita per month reflects the value of the Minimum Expenditure Basket in Iraq and is commonly used as an equivalent of the poverty threshold. See Cash Working Group (CWG), <u>Survival Minimum Expenditure Basket</u>, June 2018. Accessed 4 March 2019.

⁶ Deficit / surplus was calculated by deducting the reported total household expenditure in the 30 days preceding interview from the reported total household income from all income sources in the 30 days preceding interview.

- Iranian refugee households reported higher proportions of older children being in formal education compared to the other two refugee groups. This applied to older children (90% of 15 to 17-year-old boys and 76% of 15 to 17-year-old girls attending formal education), but not to younger ones. For the younger children, 86% of Iranian 6 to 11-year-old boys were reported to be in formal education. However, girls of that age-range (6-11) had slightly lower attendance rates (84% of them in formal education), compared to Turkish (90%) and Syrian (88%) peers of the same age.
- The most frequently reported reason for children not being in formal education was financial constraints (such as tuition, transportation, clothing, etc.), highlighting how financial insecurity might affect children of refugee households having access to education.

Protection

- At the KR-I level, 14% of refugee households reported having at least one member who never possessed a certain type of legal documentation and 12% reported having at least one member with missing or lost documentation. This was more frequently reported by Turkish households, with 25% reporting to have at least one member who never possessed and 22% reporting to have at least one member who never possessed and 22% reporting to have at least one member with missing legal documentation. Turkish households also frequently reported needing legal advice from aid providers (with 12% of Turkish households wishing to receive information related to legal advice), suggesting an increased vulnerability regarding legal documentation issues. The most frequently reported reason for not possessing legal documents was having applied, but not yet obtained the relevant document, as reported by 38% of all refugee households with at least one member with missing documentation or never having possessed legal documents.
- At the KR-I level, roughly a third of all refugee households reported decreasing levels of hospitality by the host community in the three months preceding the interview (33%), with households in Erbil more frequently reporting this than households in Dohuk (42% compared to 25%, respectively) and Sulaymaniyah (10%). These reported findings could suggest a lower level of social cohesion among refugees and the host community in Erbil over time.
- Among the households which were represented by female respondents (23% of all households or 367 households)⁷, half of them (50%) did not know where to go to for support in case a female household member suffered an incident of gender-based violence (GBV).
- At the KR-I level, 4% of all households reported child labour being practiced. Potential underreporting for this issue is highlighted by overlapping figures found in different sections of the interview. Thus, while 3% of all households reported having a child under the age of 18 years in employment (37 households, of which 6 were Iranian, 19 Syrian, and 12 Turkish households), a lower number of households separately reported using child labour as a coping mechanism (3% of all households, or 22 households of which 2 were Iranian, 13 Syrian, and 7 Turkish).⁸

Food Security

- At the KR-I level, 8% of households were found to be food insecure, as per the Food Security Index⁹. In addition, **70% of all households were found to be vulnerable to food insecurity, suggesting a need for improved access to food.**
- Food insecurity more frequently affected Iranian households. Overall, Iranian households were more frequently found to be 'food insecure' (21%) on the Food Security Index, compared to 7% of Syrian and 13% of Turkish refugee households.



⁷ This might be male- or female-headed households, but the question was only asked to households if a female member answered the survey questions, due to sensitivity of this particular topic.

⁸ Although the number of households reporting child labour either as source of income or as a coping mechanism varies here, the proportion of households is equal due to the weighting applied to respondents by governorate and refugee group during analysis.

⁹ The Food Security Index developed by WFP classifies households into three severity categories (food insecure, vulnerable to food insecurity, and food secure), based on reported figures of 1) the Food expenditure ratio, 2) Number and severity of coping strategies used to manage lack of food, and 3) Food Consumption Score.

This was supported by the majority of households reporting using coping strategies to either cut down food consumption (such as limiting portions or cutting down the amount of meals per day) or resorting to strategies to manage a lack of money to buy food (such as selling household assets or having children engage in child labour). The use of these strategies was especially prevalent in Erbil, where 76% of households reported using three or more different livelihood-based coping mechanisms in the seven days preceding the interview. In contrast, 59% of households in Sulaymaniyah and 42% in Dohuk reported using three or more livelihood coping strategies.

Health

- Roughly four out of ten households (40% of all households) reported needing to access healthcare services in the 30 days prior to interview. Furthermore, one out of three households (34%) reported having at least one member with a chronic disability.
- Of the 40% of households reporting a need access to healthcare services in the 30 days prior to interview, most reported financial problems as an obstacle to properly access healthcare services (92% of all households reporting needing healthcare access). This suggests households lacked financial means to cover regular or irregular medical costs, with 43% of all households reporting medical care as one of their priority needs.
- Gaps in healthcare service provision mostly affected households in Sulaymaniyah and Iranian households at the KR-I level. Lower proportions of these households reported to have healthcare centres or hospitals available in close proximity. For instance, 83% of Iranian households reported having access to a healthcare centre, compared to 95% of Syrian and 94% of Turkish households. At the governorate level, 80% of households in Sulaymaniyah reported having access to a healthcare centre, compared to 97% of households in both Dohuk and Erbil.
- Needing access to mental healthcare services was reported by 17% of all households. Of these households, roughly half of them reported facing problems in accessing these specialised services (52% of households needing access to mental healthcare services).
- Households in Erbil more frequently reported needing access to mental healthcare services (23%) than those in Dohuk (6%) or Sulaymaniyah (6%).

Shelter

- Most households reported renting their shelter (87%). This was more widespread among Syrian households (92%) than Iranian (56%) or Turkish ones (43%).
- Roughly four out of ten households renting their shelter reported having a written, valid rental agreement (41%), while the remaining 59% of households reported having either an expired written agreement, or a verbal agreement. The majority of households not having a written, valid agreement highlights that these households potentially face vulnerabilities related to security of housing.
- Furthermore, approximately a quarter of all households (23%) reported facing shelter problems. Households in Dohuk were particularly affected by this, with 39% of households reporting problems with their shelter.
- The reported shelter problems were mostly related to a household's shelter not being able to withstand seasonal changes, such as during hot summers or cold winter periods (leaking, bad insulation, or openings in walls being the three most frequently reported issues among all households).
- These vulnerabilities were reinforced by almost half of all households (48%) reporting they faced problems accessing heating fuel in the past winter period. Considering the aforementioned financial insecurity of many households, addressing such problems might not always be feasible for these households, which could potentially increase vulnerabilities related to shelter.



WASH

- Most households reported relying on tanks and networks for water, both for drinking as well as for other household purposes, with 87% reporting these sources for their household. 9% of all households reported purchasing drinking water in bottles from nearby shops.
- Almost half of households getting their drinking water from tanks and networks (47% of households) reported their drinking water needing filtration.
- However, of these households that reported their water needed filtration, roughly one third (32%) reported still not using any filtration system. This was more frequently reported by households in Dohuk (49%) and Sulaymaniyah (49%), compared to those in Erbil (24%). These findings could for instance suggest a lack of awareness of available water filtration systems or financial constraints in purchasing necessary filtration materials that might increase household vulnerabilities related to access to potable drinking water.
- Access to essential hygiene items was widespread, with two thirds of all households (65%) reporting all items¹⁰ being accessible. However, a lower proportion of households with a 'high income vulnerability' (52%) reported all items being accessible, compared to 71% of 'low income vulnerability' households reporting the same.
- Furthermore, items being expensive was the most frequently given reason for essential hygiene items being inaccessible (95% of households reporting not all being available). These findings suggest that lacking financial means could affect households' WASH needs.

Movement Intentions and Communication Needs

- Overall, the reported movement intentions from this assessment suggest that **most households intend to remain in their current location in the three months after the interview** (80% of all households).
- However, 16% of all households reported intending to move to another location within three months after the interview. Of these households that reported intending to move, 55% (72 households) reported wanting to move to another location within the KR-I, highlighting the protracted nature of displacement in the KR-I.
- The majority of households (95%) reported wishing to receive information from aid providers. The three most frequently mentioned topics on which households wished to receive information were livelihood opportunities and how to access them (79% of those reporting needing information), receiving assistance (52%), as well as information on safety and security (46%).

Longitudinal findings from the 2017 and 2018 MSNAs

This assessment also sought to examine if the needs of out-of-camp Syrian refugees have changed since the 2017 MSNA III. Thus, longitudinal analysis was conducted to compare the Syrian subset (577 households) interviewed in the 2018 MSNA IV and the entire caseload (1,198 Syrian households) interviewed in the 2017 MSNA III at the KR-I level, with relevant statistical tests being conducted. ¹¹ The households assessed in the 2017 MSNA III and 2018 MSNA IV are not the same, but different Syrian refugee households. The analysis only included indicators from the 2018 MSNA IV that remained unchanged from the 2017 MSNA III questionnaire (see Annex 2). Findings are representative at the KR-I level with 95% confidence and 5% margin of error; findings which were found to not be statistically significant are clearly indicated through this report. Due to a lower sample size for Syrian refugee

¹⁰ The following items were included in the questionnaire: Soap (liquid and bar); Disinfectant - surface cleaner (powder, liquid detergent); Toothpaste and clean toothbrushes; Baby diapers; Shampoo; Dishwashing liquid; Other (specified).
¹¹ MSNA III was conducted by IMPACT in collaboration with UNHCR in 2017.



households in this year's 2018 MSNA IV, findings of the longitudinal analysis are not representative with the same level of precision at the governorate level, and thus compared only at the KR-I level.

For most of these comparable indicators, only minor changes could be observed. However, one statistically significant difference between the 2017 MSNA III and 2018 MSNA IV could be found in the proportion of households reporting being in debt at the time of the interview. In the 2017 assessment, 68% of all households reported being in debt at the time of the interview.¹² Furthermore, the reported amount of total debt had increased as well, with Syrian households assessed in 2017 reporting an average of 1,540,000 IQD or 1,295 USD of total debt, while Syrian households assessed in 2018 reported debts levels of 2,060,000 IQD or 1,730 USD on average. This finding suggests that over time, not only did the proportion of households in debt grow, but that the amount of debt also increased, further highlighting that taking on debt continues to be a widespread coping mechanism to cover household expenditure.

As previously mentioned, Syrian refugee households in 2018 reported significantly lower attendance rates among their children for formal education, especially for older children, than Iranian and Turkish households. However, a slight increase in the attendance rate for younger children was found for Syrian refugee households in 2018 compared to in the 2017 MSNA III. However, for older children between the ages of 15 and 17, school attendance rates remained low across both years. Roughly one third of Syrian boys within this age bracket (32% in the 2017 MSNA III and 31% in the 2018 MSNA IV) and roughly four out of ten Syrian girls between 15 and 17 (45% in the 2017 MSNA III and 41% in the 2018 MSNA IV) reported to be attending formal education.

In addition, a small increase in access to electricity was observed between the two assessments, with 83% of Syrian households reporting ten hours or more of access to electricity in the 2017 MSNA III, compared to 99% of all Syrian households in 2018 MSNA IV, suggesting an improvement of electrical services for out-of-camp refugee households. This could be due to the general improvement of this service across the KR-I, or improved living standards for this refugee group. Nonetheless, while the longitudinal analysis between the two assessments highlighted certain findings, trends emerging after two years' worth of data were not significant enough to yield robust results and should be studied further, ideally with several years' worth of data.

¹² Disaggregation between 2017 MSNA III and 2018 MSNA IV was statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.



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Geographic Classifications

KR-I	Kurdistan Region of Iraq, a devolved federal entity in the north of Iraq	
Governorate	The highest administrative boundary below the national level. The KR-I has three governorates: Dohuk, Erbil, and Sulaymaniyah	
District	Governorates are divided into districts	
Host Community	Communities in their area of origin accommodating displaced persons (including both internally displaced persons and refugees)	
Refugee group	Group of refugee households according to their country of origin (including Turkish, Syrian and Iranian)	

Abbreviations and Acronyms

3RP	Regional Refugee & Resilience Plan
FCS	Food Consumption Score
HH filter	Hand-held filter
IDP	Internally displaced person
IQD	Iraqi Dinar
KR-I	Kurdistan Region of Iraq



MCNA	Multi-Cluster Needs Assessment
MSNA	Multi-Sector Needs Assessment
ODK	Open Data Kit
UNHCR	United Nations High Commissioner for Refugees
USD	United States Dollar
WASH	Water, Sanitation, and Hygiene
WFP	World Food Programme





Introduction

The Kurdistan Region of Iraq (KR-I) has faced several periods of displacement of both refugees from neighbouring countries, as well as of internally displaced persons (IDPs). Since 2011, the Syrian crisis has displaced more than 252,000 Syrians to Iraq, with 99% of them residing in the KR-I.¹³ Around 155,000 of these Syrian refugees in the KR-I currently reside outside of formal camps, across the three governorates of Erbil, Duhok and Sulaymaniyah. Although most of the refugee population in Iraq is Syrian, there are also approximately 44,000 non-Syrian refugees registered in the country.¹⁴ Among those non-Syrian refugees, more than 2,200 Iranian (approximately 6,600 individuals, and 2,000 Turkish refugee households (approximately 12,000 individuals) are currently residing in the three governorates.¹⁵

These displacement trends have placed increased demand on municipal service provision, placing additional pressure on local administrations, host communities and aid providers. While the local and international response has catered to the most urgent needs, household vulnerabilities persist. Considering the protracted nature of the Syrian crisis, closely studying the needs of other refugee groups that have been in the KR-I for an extended period of time is crucial, and made all the more urgent as the Syrian crisis enters its ninth year. Assessing the needs of Iranian and Turkish refugee households, alongside Syrian refugee households, could potentially shed light on which needs might persist in the case of long-term displacement.

Within this context, IMPACT Initiatives (IMPACT), in collaboration with UNHCR, conducted a fourth-round Multi Sector Needs Assessment (MSNA IV) of Syrian, Iranian, and Turkish refugees in the KR-I who reside outside of formal camps, to provide a household-level analysis of sector-specific needs and vulnerabilities. Building on the findings of previous MSNA reports, this report will assess any continued vulnerabilities of this subset of the refugee population in the KR-I. This assessment and its findings aim to inform the development of the Regional Refugee & Resilience Plan (3RP) 2019-2020, as well as relevant programming within the different sectors. Moving into its fifth year, this round of the 3RP focuses on durable solutions and how to sustainably address refugee households' vulnerabilities.

This report provides a detailed description of the methodology, followed by the key findings for the following sectors:

- 1) Demographics
- 2) Livelihoods
- 3) Protection
- 4) Education
- 5) Food Security
- 6) Health
- 7) Shelter
- 8) WASH
- 9) Intentions and Communication Needs

Within these sectors, key indicators are first presented at KR-I level. Notable comparisons across the three governorates and refugee groups, as well as between male- or female-headed households and between households classified as having higher and lower levels of income vulnerability follow.¹⁶ This is done to better understand if and how household income, sex of the head of households, as well as geographic location might affect sectoral vulnerabilities. For all applicable indicators, findings for the Syrian subset of the 2018 MSNA IV are compared with those of 2017 MSNA III.¹⁷

¹⁶ See distinction between 'high' and 'low income vulnerability' on page 24 and 25.



¹³ UNHCR, <u>Operational Portal Refugee Situations</u>. Figures as of 30 November 2018. Accessed 17 December 2018.

¹⁴ UNHCR, <u>Iraq Fact Sheet</u>. Figures as of November 2018. Accessed 17 December 2018.

¹⁵ Population numbers provided here are based on active cases (as of 31 July 2017) within the ProGres database, as reported by UNHCR. Number of Iranian and Turkish individuals are based on calculations using the average number of household members as found in this assessment.

¹⁷ MSNA III only covered out-of-camp Syrian refugees, so findings are only comparable for the Syrian subset of 2018 MSNA IV. See Annex 2 for all relevant indicators that were comparable for the Syrian refugee household subset of 2018 MSNI IV and 2017 MSNA III.

Methodology

The assessment was implemented through a quantitative approach, in which primary data was collected through a structured, multi-sectoral survey conducted at the household level. The questionnaire was shared before data collection for inputs from UNHCR and the sectoral leads. The survey was conducted with a random sample of active UNHCR-registered cases residing out-of-camp in KR-I host communities in the three KR-I governorates of Dohuk, Erbil and Sulaymaniyah.¹⁸ Data collection took place between 28 August and 16 September 2018. The assessment covered a total of 1,371 refugee households, of which 388 were Iranian, 577 Syrian, and 406 Turkish.

Objective

This year's MSNA provided a comprehensive, evidence-based understanding of multi-sectoral needs of refugees living out of formal camps in the KR-I to inform UNHCR and partners' Regional Refugee & Resilience Plan (3RP) for 2019-2020. ¹⁹ To achieve this, the following research questions guided the analysis:

- 1. What are the priority sectoral needs, and subsequent gaps in programming and service delivery, of refugees living out of formal camps in the KR-I (for Education, Protection, Livelihoods, Shelter, WASH, Food Security, Health, and other Priority Needs)?
- 2. What are the multi-sectoral priority needs of refugees living out of formal camps in the KR-I, and how do they vary by governorate and refugee nationality?
- 3. What are the key vulnerable subsets of the refugee population living out of formal camps in the KR-I (regarding economic vulnerability, food insecurity and other sectoral vulnerabilities)?
- 4. What are the movement intentions and information needs of refugees in KR-I host communities?
- 5. Have the needs of refugees living out of formal camps in the KR-I changed, compared to the 2017 MSNA?

Sampling

This assessment employed a stratified random sampling methodology. The sampling for this round was stratified by governorate (Dohuk, Erbil and Sulaymaniyah), as well as by refugee group (Syrian, Turkish and Iranian) at KR-I level. Therefore, while the sample was stratified at the governorate level, the objective was also to capture a representative sample of the individual refugee population groups across the KR-I. The sampling frame was produced using UNHCR data specifying the number of cases registered in Erbil, Dohuk, and Sulaymaniyah governorates (see Tables 1 and 2) and which have been 'active' in the ProGres database since 31 July 2017, in order to reduce the non-response rate for MSNA IV data collection.

Additionally, the sample in each governorate was proportionally distributed based on the number of cases for each refugee nationality, meaning that if the total refugee population in Governorate A comprised of 60% Syrians, 30% Turkish and 10% Iranian refugees, then the sample for Governorate A also included 60% Syrians, 30% Turkish and 10% Iranians. However, as some refugee groups residing in certain governorates were scarce (e.g.

A total of 1,371 households were interviewed. Findings are representative:

- At KR-I level: with a 95% confidence level and 5% margin of error
- 2. At **refugee population** group level: with a minimum of **95%** confidence level and **7%** margin of error
- At governorate level: with a minimum of 95% confidence level and 7% margin of error

However, due to small population sizes for some refugee groups within some governorates, findings are **not representative at governorate** <u>and</u> **refugee population group level**.

¹⁹ The assessment covered three refugee populations (Syrian, Turkish, and Iranian) living out of formal camps in the KR-I, as included in UNHCR-provided beneficiary lists. While there are other refugee populations within the UNHCR ProGres database, these have been excluded from this assessment due to low population numbers, and at the request of UNHCR.



¹⁸ 'Active' here refers to refugees for whom contact details are known to be correct within the last 12 months prior to data collection, due to having been in contact with UNHCR during this time period.

a total of 20 Iranian refugee cases in Dohuk), findings could not be disaggregated by both governorate and refugee group at the same time.

An additional 200% buffer of cases added per governorate and refugee population group. This large buffer was included based on lessons learned from MSNA III, to ensure that field teams were able to interview the required minimum number of cases per governorate and refugee population group and ensure findings are statistically representative.

Governorate	Dohuk	Erbil	Sulaymaniyah	Total
Population size	10,096	26,986	7,377	44,459
Target sample	377	522	432	1,331
Final sample (95% confidence and 7% margin of error)	378	552	441	1,371

 Table 1: MSNA sampling frame at governorate level 20

Table 2: MSNA sampling frame at refugee group level ²¹

Refugee group	Iranian	Syrian	Turkish	Total
Population size	2,293	40,157	2,009	44,459
Target sample	349	576	406	1,331
Final sample (95% confidence and 7% margin of error)	388	577	406	1,371

Data Collection

Data collection took place between 28 August and 16 September 2018. Interviews were conducted at household level with the head of case or, if unavailable, a case member who was 18 years of age or above. ²² A 'case' refers to the smaller family unit that is registered under one UNHCR registration ID, whereas a household may be multiple cases living together in a shelter and sharing resources. Duplicate checks were incorporated before (removing multiple cases living in one household based on duplicate registration IDs), during (at the beginning of the interview through screener questions) and after data collection (during data cleaning by cross-checking registration IDs in the dataset), to avoid interviewing multiple cases living in the same household. The case member was asked questions to reflect the entire household, which included answering on behalf of any non-case members living in the same household (including any family members and others under the case member's guardianship or responsibility, e.g. separated children, elderly or disabled relatives).

²⁰ Population numbers provided here are based on active cases (as of 31 July 2018) within the ProGres database, as reported by UNHCR.

²¹ Population numbers provided here are based on active cases (as of 31 July 2018) within the ProGres database, as reported by UNHCR.

²² While the selection of interviews was based on case-level, questions were asked on household-level, to include potential non-case members sharing the accommodation, expenses, and/or responsibilities regarding dependents).



Enumerators recorded interview responses digitally using KoBo Toolbox, a mobile data collection application. Field teams called cases a few days prior to deploying enumerators to data collection areas to confirm the specific location of their households, that the phone numbers were working, as well as cases' willingness and availability to participate. Field teams also confirmed whether there were any other cases within the household, and if so, their UNHCR registration details in order to cross-check these details against UNHCR-provided case lists. These additional checks were conducted to avoid potential duplication of households being interviewed twice (if for example, two cases resided in the same household), and to maximise resources for field data collection.

Enumerators were supervised by a team of IMPACT field coordinators, with overall management and oversight of data collection by the Operations Coordinator and Assessment Officer. Completed interview forms were uploaded to the UNHCR Kobo server hosted in Geneva and stored on the IMPACT HQ Kobo account. This account was managed by IMPACT HQ data focal points, and the IMPACT Iraq country team had access for the duration of data collection.

Data cleaning was carried out on a daily basis throughout the data collection period by the IMPACT Assessment Officer. Data that was deemed inconsistent was highlighted and shared with the relevant field coordinator for clarification/rectification, with all changes logged.

Analysis

During data analysis, data was aggregated to governorate level across all refugee populations and aggregated to KR-I level by each refugee population group (Syrian, Turkish and Iranian), as well as other key disaggregating factors (such as sex of head of household and level of income vulnerability). The key indicators for each assessed sector were established in bilateral discussions with sectoral leads. Weighting was calculated and applied by governorate and refugee population. Statistical testing was conducted for each indicator using ANOVA and Tukey's HSD multiple comparison statistical testing. Where differences between disaggregated variables were not statistically significant, this is clearly indicated in this report. To ensure the comparability of findings for out-of-camp Syrian refugees between 2017 MSNA III and 2018 MSNA IV, the findings for 2017 MSNA III were aggregated up to KR-I level where needed.

Once data collection was completed and the full dataset was processed and cleaned, IMPACT conducted a preliminary analysis of the data. This analysis was conducted in accordance with the Data Analysis Plan (Annex 1), which clearly linked overarching research questions with the relevant indicators and interview questions and which listed all variables used for aggregation and disaggregation of findings. Upon completion of the preliminary analysis, IMPACT presented the findings to UNHCR and sectoral leads in early October 2018, followed by bilateral meetings with sectoral leads in order to receive feedback and determine key indicators for further analysis.

These meetings and subsequent analysis formed the basis for a final presentation on key findings at the end of October 2018 with UNHCR and sectoral leads, which focused on only Syrian refugee households in order to inform the planning process for the 3RP, as this plan only addresses the needs of Syrian refugees. An additional presentation on key findings related to all three refugee groups was held in early November 2018 to inform relevant programming by UNHCR in its various field offices. This report presents findings for all three assessed refugee groups.

Changes from 2017 MSNA III to 2018 MSNA IV

While MSNA III (conducted in 2017) focused on only Syrian refugee households, 2018 MSNA IV assessed Iranian and Turkish refugee households in addition to the Syrian refugee population. Therefore, indicators suitable for the longitudinal comparative analysis only included the Syrian refugee household population of 2018 MSNA IV. Data collection for both 2017 MSNA III and 2018 MSNA IV took place between end of August and mid-September.

As the Syrian refugee population was only one subset of the entire assessed population (577 households) and therefore smaller than the 2017 MSNA III sample (1,198 households), longitudinal analysis of findings was only done at KR-I level. Where the subset was too small for sound statistical testing, this is highlighted as indicative in footnotes.



Not all indicators were directly comparable, as the 2018 MSNA IV questionnaire was partially aligned with this year's Multi-Cluster Needs Assessment (MCNA), undertaken by REACH. Only questions with clearly comparable response options were analysed to avoid misreporting.

Findings are representative at the KR-I level with 95% confidence and 5% margin of error. Due to a lower sample size for Syrian refugee households in this year's 2018 MSNA IV, findings for the longitudinal analysis are not representative at the governorate level, and thus only compared at the KR-I level.

Challenges and Limitations

- Due to low sample numbers for certain refugee groups in certain governorates, it was not possible to report representative findings for individual refugee groups in individual governorates (e.g. Iranians in Dohuk). Therefore, findings for individual refugee groups could only be reported at KR-I level.
- The sampling frame consisted only of cases that were registered as 'active' with UNHCR, thereby excluding any potential non-registered or inactive persons of concern from the assessment.
- Enumerators encountered a high non-response rate during data collection. Although target numbers for each governorate and for each refugee nationality were met, data collection was prolonged due to this high non-response rate (916 out of approximately 2,777 refugees called). While a call centre process prior to the household survey ensured an increased level of efficiency (e.g. enumerators only visiting households whose address could be pinpointed precisely and who agreed to be interviewed), an increased level of assessment fatigue (among Syrian refugee households) and lack of awareness for assessments from IMPACT (among Iranian and Turkish refugee households) were observed.
- As all information was self-reported, certain indicators may reflect either under- or over-reporting. For
 instance, figures for children out of school or assistance received might be affected by this, which needs
 to be taken into consideration for the interpretation of findings.
- The unit of assessment was the household, which was represented by the head of household. Often, this
 was an adult male household member, which may also have resulted in certain reporting bias. For
 instance, figures for issues such as problems accessing health services for women might be affected by
 the gender of the respondent. Sensitive questions regarding issues such as gender-based violence that
 might make a male respondent feel uncomfortable were only asked if the respondent was female.²³
- Due to protection guidelines, cases where the head of household was under the age of 18 and no adult household member was present to answer instead were not interviewed for this assessment. This excluded some refugee households and led to underrepresentation of such types of cases.
- For certain questions, findings were based on the responses of a subset of the sample population, which meant that these findings have a lower confidence level and higher margin of error due to lower sample sizes. For example, questions asked only to households with school-aged children, or only to households who reported needing access to healthcare services, may yield results with a lower precision. Where sample sizes were below a certain minimum threshold, statistical tests could not be performed properly, and findings based on such small subsets of the sample are thus indicative only. The relevant figures are noted as such in the report. Similarly, findings that are disaggregated by sex of head of household need to be treated with similar caution, as only 10% of all households reported being headed by a female member. ²⁴

²⁴ In total, 172 households were female-headed.



²³ For instance: 'Where do women and girls in your household feel safe and comfortable to receive services after a gender-based incident of violence directed towards them?'

Findings

This section presents the findings of the assessment across seven sectors (livelihoods, protection, education, food security, health, shelter, and WASH) and four cross-cutting issues (demographics, movement intentions, communication needs, and CRI priority needs).

Demographics

This subsection presents findings related to the demographic profiles of households, including country of origin, governorate of residence, year of first member of household arriving in the KR-I, household size, as well as multiple case households.

Country of Origin and Year of Arrival

Overall, Erbil was most frequently reported as governorate of residence for refugee households (61% of all households), followed by Dohuk (23%) and Sulaymaniyah (16%). Iranian refugee households mostly resided in Erbil governorate (64% of Iranian households), while around a third (35%) lived in Sulaymaniyah (see Figure 2). Of Syrian households, 62% resided in Erbil, 22% in Dohuk, and 16% in Sulaymaniyah. Just over half of all Turkish households (57%) resided in Dohuk, and another third in Erbil (36%); the rest were recorded in Sulaymaniyah (8%).

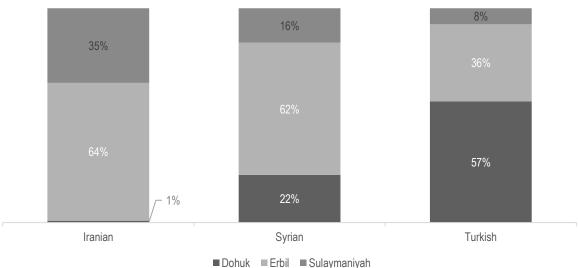


Figure 2: Governorate of residence, by refugee group

The different refugee groups reported vastly different years of arrival into the KR-I, with the most frequent years of arrival for each group reflecting historical and political developments in their respective countries of origin at the time of departure: ²⁵

- Iranian refugee households reported arriving in the KR-I from 1975, with the highest proportion (22%) arriving between 1975 and 1989 (see Figure 3).²⁶ This first set of arrivals of households in this report coincided with increased tensions between the new Iranian authorities after 1979 and the Kurdish population of Iran, forcing many to flee into the KR-I.²⁷
- The majority of Syrian refugee households arrived between 2010 and 2014 (79%), which corresponds with the onset of the conflict in Syria. With the country-wide escalation of violence in

²⁷ Migration Policy Institute (MPI), Iran: A Vast Diaspora Abroad and Millions of Refugees at Home. 1 September 2006. Accessed 21 January 2019.



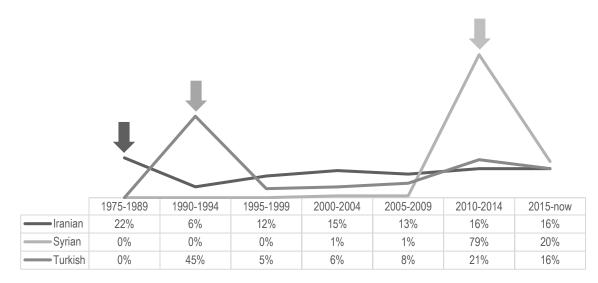
²⁵ Year of arrival refers to the year when the first household member displaced into the KR-I.

²⁶ The first recorded date of arrival for households assessed in this survey was May 1975.

2013, the number of Syrian refugees arriving in the KR-I peaked. Similarly to the households assessed for the 2017 MSNA III, 2013 was the most frequently reported year of arrival, with 40% of households in the 2017 MSNA III, and 37% in this year's MSNA reporting 2013 to be their year of arrival in the KR-I.

Almost half of all Turkish refugee households arrived in the early 1990s (45%), with a second wave
of arrivals between 2010 to 2014 (21%). These figures are closely tied to intensified tensions between
the Turkish government and Kurdish actors in the southeast in the early 1990s and more recent
developments in the beginning of the 2010s.²⁸ After decades of ongoing clashes, violent incidents
between authorities and militias intensified again in the early 2010s, forcing more people to seek refuge
in the KR-I.²⁹ This renewed round of violence could explain an increasing number of Turkish refugees
seeking to enter the KR-I (see Figure 3).

Figure 3: Time period of first household member arriving in the KR-I, by refugee group ³⁰



Household Demographics

On average, Iranian refugee households were smaller than Syrian and Turkish ones: with three members, compared to five and six (See Table 3). Female-headed households were on average slightly larger, with an average of six members, compared to male-headed households, which had on average five members. Similarly, households classified as highly vulnerable regarding income were on average bigger with six members, compared to less vulnerable households, with an average of five members.³¹

Table 3: Average size of household, by refugee group

Refugee group	Average number of household members	
Iranian	3	
Syrian	5	
Turkish	6	
All refugee groups	5	

²⁸ BBC, <u>Who are the Kurds?</u> 31 October 2017. Accessed 21 January 2019.



²⁹ International Crisis Group, Turkey's PKK Conflict: The Death Toll. 20 July 2016. Accessed 21 January 2019.

³⁰ Syrian and Turkish refugee households add up to 101% due to rounding issue.

³¹ Households have been classified into 'high income vulnerability' and 'low income vulnerability' for this analysis. 'High income vulnerability' households reported a total household income in the 30 days prior to interview which was below 70 USD or 85,000 IQD per capita (the equivalent of the Minimum Expenditure Basket). More details on this classification can be found in the livelihoods section on pages 24 and 25.

At KR-I level, on average 40% of refugee household members were under 18 (See Figure 4). The average household size for Iranian refugees was not only smaller, but the average proportion of children was smaller than for Turkish and Syrian households. On average, Turkish and Syrian refugee households had a higher percentage of children under 18 (average of 45% and 41%, respectively), than Iranian households (32%). Having a smaller household size might impact the number of members being able to work and contributing to the household's income, but also might affect the amount of money being spent on a monthly basis. Conversely, having a higher proportion of children, especially young children, may lead to a higher dependency ratio. Household composition factors such as size and number of children may translate to different sectoral or cross-sectoral needs of vulnerabilities across refugee population groups.

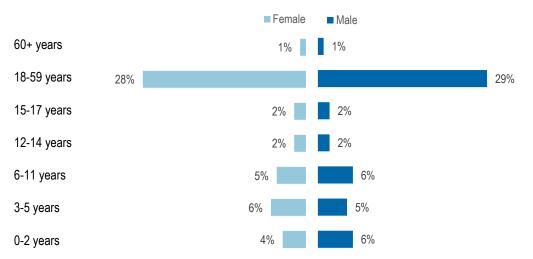


Figure 4: Population demographics, at KR-I level

Overall, 36% of all households contained more than one case. Syrians more frequently reported this to be the case (39%) compared to Iranian and Turkish refugee households (9% and 20% respectively). Furthermore, households in Dohuk (43%) and Erbil governorate (39%) more frequently contained more than one case than those in Sulaymaniyah (17% of refugee households). Households containing more than one case was reported more frequently by female-headed households (60%) and those being labelled 'high income vulnerability' (41%).

Overall, 96% of households reporting living with one or several other cases reported another refugee case being in their household, while 4% were living with someone from the host community, and less than 1% (6 households in total) reported living with Iraqi IDP cases. Turkish refugee households were more likely to live with members of the host community (28% of Turkish households reporting several cases living together) than Syrian refugees (3%). This could be due to longer displacement of this group compared to Syrian households and could suggest better integration into the host community. Syrian refugees more often reported sharing their living space with other refugee cases (97%³²) than Turkish households (69%). These figures highlight that refugee groups tended to cluster together, with even households that arrived many years ago often remaining among households from the same country of origin.

³² Most Syrian refugee households living with other cases reported living with other Syrians (95%).



Livelihoods

This section gives an overview of the livelihood needs of households, by first providing a breakdown of monthly household income and expenditure, amount of and reasons for debt incurred, as well as access to, distance and condition of the closest functioning market place.

Income and Expenditure

All households were asked to report how much income from different sources their household had, as well as how much they spent on a range of expenditure items over the 30 days prior to the assessment. These figures were then used to calculate total household income and total household expenditure. More details on income sources and expenditure items are discussed further down this section.

The reported average household income³³ for refugees across the KR-I in the 30 days prior to interview was 690,000 IQD, or 580 USD, while reported average household expenditure in the same time period was 695,000 IQD, or 585 USD (see Figure 5).³⁴ This indicates a small household deficit of -5,000 IQD. This household deficit suggests a certain level of economic vulnerability and limited resilience to potential economic shocks.

Figure 5: Total income and total expenditure (in IQD³⁵) in the 30 days prior to interview, at KR-I level

Sulaymaniyah governorate, where cost of living are on average lower than in Erbil and Dohuk.



Turkish and Iranian households on average reported a bigger monthly deficit than Syrian refugee households (see Figure 6). Iranian household overall had a lower monthly income (395,000 IQD, or 330 USD) as well as lower monthly expenditures (475,000 IQD, or 400 USD).³⁶ Syrian refugee households reported an average of 705,000 IQD, or 590 USD, monthly income in the 30 days prior to interview and 700,000 IQD, or 590 USD, total monthly expenditures. Turkish refugee households reported having an average monthly income of 700,000 IQD, or 590 USD, and having spent 785,000 IQD, or 660 USD, in total in the same time period.³⁷ These differences in income and expenditure can to some extent be explained by average household size, with Iranian households generally being smaller than Syrian and Turkish ones. In addition, Iranian households often resided in

On average, households in Sulaymaniyah not only reported a lower total household income (440,000 IQD, or 370 USD), **but also lower total household expenditure** (430,000 IQD, or 360 USD). Households in Erbil reported an average total household income of 725,000 IQD, or 610 USD, and average total household expenditure of 745,000 IQD, or 625 USD., while households in Dohuk reported an average total household income of 775,000 IQD or 650 USD, and household expenditures of 745,000 IQD, or 625 USD.

However, looking at only total household income obstructs the different sources of income. Income was reported in two different categories: employment and non-employment.³⁹ **Reported average income from employment** across the KR-I in the 30 days prior to interview was 455,000 IQD, or 380 USD, (72% of the total household income), whereas income from other sources than employment in the same time period was 235,000 IQD, or 195 USD (28% of total income).⁴⁰



³³ Includes non-employment income sources such as assistance or remittances.

³⁴ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019. ³⁵ Figures in IQD have been rounded to the closest 5,000 mark.

³⁶ Iranian refugee households were on average smaller (three members) than Syrian (five) and Turkish refugee households (six). Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

³⁷ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

 ³⁸ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.98 IQD, using XE currency converter. Accessed 12 May 2019.
 ³⁹ Includes income sources such as assistance or remittances but excludes savings and debt.

⁴⁰ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

Turkish households reported a larger proportion of their total monthly income coming from nonemployment sources than Syrian and Iranian households. For Turkish refugee households, the reported income from employment sources in the month preceding the interview was 63% of the total household income (440,000 IQD, or 370 USD).⁴¹ Syrian refugee households reported making 72% of their total income (465,000 IQD, or 390 USD) through employment in the 30 days prior to interview.⁴² For Iranian refugee households, the amount of income made was significantly lower⁴³ with 73% of total household income (295,000 IQD, or 250 USD) made through employment during the 30 days preceding the survey.⁴⁴ These figures show that households added a substantial amount of income from non-employment sources to their monthly budget, to be able to cover monthly expenses. On average, Turkish households reported a greater reliance on non-employment income sources than Syrian and Iranian households.

It was noticeable that households in Sulaymaniyah on average reported a larger proportion of their total household income to be from employment. In Sulaymaniyah, the average reported employment income was 410,000 IQD, or 345 USD, which represented 92% of total household income. In Erbil, employment income was reported to be 500,000 IQD, or 420 USD, which made up 74% of total household income. In Dohuk, employment income and other income sources made up the same proportion of total household income, with 380,000 IQD, or 320 USD, and 50% of total household income reportedly being earned from employment.⁴⁵ This suggests that households in Sulaymaniyah were more frequently able to cover monthly expenditures by income generated through employment alone, and that households in Dohuk more often reported to supplement employment income with additional sources.

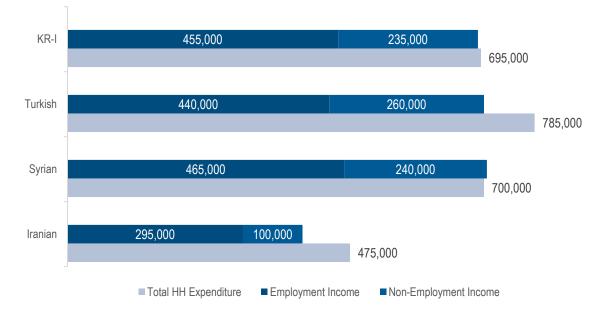


Figure 6: Household expenditure vs. income (in IQD⁴⁶) in the 30 days prior to interview, by refugee group

Based on the reported household income figures, households were split into two income vulnerability groups, one classified as having 'high income vulnerability' and the other as having 'low income vulnerability'. This calculation is based on the Minimum Expenditure Basket (MEB) of 70 USD or 85,000 IQD per household member per month.⁴⁷ 'High income vulnerability' households fall below, 'low income vulnerability' households above the MEB line. **To**

⁴⁴ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019. ⁴⁵ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.98 IQD, using XE currency converter. Accessed 12 May 2019.

⁴⁶ Figures in IQD have been rounded to the closest 5,000 mark.

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 ⁴¹ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
 ⁴² Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
 ⁴³ Total household income for Iranian refugee households was significantly lower than both other refugee groups, and employment income of Iranian households was significantly lower than Syrian households' employment income.

⁴⁷ World Food Programme (WFP), <u>Minimum Expenditure Baskets Interim Guidance Note</u>. July 2018. Accessed 24 January 2019. Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

assess how more economically vulnerable households are affected by different sectoral needs, this threshold of high and low income vulnerability according to the MEB line is consequently used as disaggregating factor throughout this report.48

At the KR-I level, when analysing total household income,⁴⁹ 33% of households fell into the 'high income vulnerability' category, while 67% were classified as a lower income vulnerability household (see Figure 7). When only including employment income, 50% fall above and 50% of households fall below the vulnerability threshold of 85,000 IQD, or 70 USD, per capita per month (see Figure 8).⁵⁰ This indicates that **based only on income from** employment, half of all households fail to meet the threshold of the Minimum Expenditure Basket (MEB)⁵¹ of 85,000 IQD, or 70 USD, per capita per month limit and were labelled as 'high income vulnerability'. However, when adding additional income sources to their budget, 17% of households manage to pass this threshold. These findings suggest that adding income sources in addition to employment can make a difference in households being able to meet expenditures and not being able to do so.

Figure 7: Proportion of households qualifying as 'high Figure 8: Proportion of households qualifying as 'high income vulnerability' or 'low income vulnerability' income vulnerability' or 'low income vulnerability' total household income, at KR-I level employment income, at KR-I level 33% 50% 50%

When examining total household income, a noticeably higher proportion of Iranian (44%) and Turkish refugee households (42%) fall into the 'high income vulnerability' category than Syrian households (32%). In addition, a higher proportion of female-headed households reported an income that gualified them as highly vulnerable (40%) than male-headed households (32%). These findings suggest that female-headed households might be more vulnerable regarding livelihood needs. At the governorate level, there was no significant difference in the proportion of households found to be classified as 'high income vulnerability', indicating that economic insecurity may be more influenced by population group or household profile, than by geography.

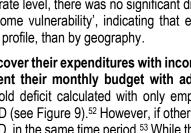
These figures suggest that refugee households were not able to cover their expenditures with income from employment alone, making it necessary for them to supplement their monthly budget with additional income sources. At the KR-I level, the reported average household deficit calculated with only employment income in the 30 days prior to interview was 235,000 IQD, or 195 USD (see Figure 9).52 However, if other sources of income were added, this deficit was reduced to 5,000 IQD, or 5 USD, in the same time period.⁵³ While this figure

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⁵⁰ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019. ⁵¹ WFP defines the Minimum Expenditure Basket as follows: "A MEB is defined as what a household requires in order to meet their essential needs, on a regular or seasonal basis, and its average cost." Source: World Food Programme (WFP), Minimum Expenditure Baskets Interim Guidance Note. July 2018. Accessed 24 January 2019. Concretely, a compilation of essential items and services and their cost are added together to a minimum amount of money needed for a household per month. For this assessment, the threshold agreed for Iraq is 70 USD or 85,000 IQD per capita per month.

⁵² Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019. ⁵³ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.





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⁴⁸ For subsequent disaggregation of certain indicators, the total household income was used as the unit to assess income vulnerability. Rather than only including income from employment, the rationale to use total household income (incl. assistance or remittances) was to assess the households based on all available income sources, all while keeping in mind that some of these sources might be unsustainable.

⁴⁹ Including employment and non-employment income.

suggests that even by adding additional income sources on a monthly basis would not allow households to save for future expenses, additional income sources are highly necessary to cover monthly expenses. Crucially, this deficit puts households further at risk of accumulating debt, especially in case of emergencies (i.e. medical costs, loss of job, shelter problems, etc.).

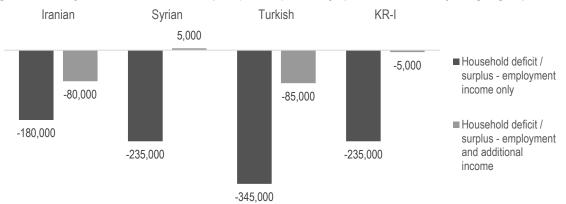


Figure 9: Monthly household deficit vs. surplus (in IQD⁵⁴) in 30 days prior to interview, by refugee group

At refugee group level, Syrian refugee households, in contrast to Turkish and Iranian ones, reported being able to cover all monthly expenses with the income available to them. For Syrian refugee households, adding non-employment sources to the household budget pushed them just out of deficit, with a surplus between total household income and total household expenditure of 5,000 IQD, or 5 USD, for the difference between reported total income and expenditures of the last 30 days prior to being interviewed (see Figure 9).⁵⁵ Both Iranian and Turkish households reported not being able to cover their total expenditure, even by adding non-employment sources to their income from employment. Iranian refugee households reported a deficit of 180,000 IQD, or 150 USD, for employment-only income, and 80,000 IQD, or 65 USD, for employment only income sources⁵⁶. Turkish households reported 345,000 IQD, or 290 USD, deficit for employment only income sources and expenditures, and 85,000 IQD, or 70 USD, for the deficit calculated with the total reported household income in the 30 days before the interview.⁵⁷

At the governorate level, households in Dohuk and Erbil reported larger deficits when only taking into account employment income, compared to households in Sulaymaniyah. In Dohuk, the reported deficit between employment-only income and expenditures was 365,000 IQD, or 305 USD, whereas in Erbil this deficit was reported to be 245,000 IQD, or 205 USD. Households in Sulaymaniyah reported a small deficit of 20,000 IQD, or 15 USD, between income generated through employment and total household expenditures. When adding additional income sources, households in Dohuk reported a small surplus of 30,000 IQD, or 25 USD, and households in Sulaymaniyah reported a small surplus of 10,000 IQD, or 10 USD. In Erbil governorate, households reported a small deficit of 20,000 IQD, or 15 USD, even after adding additional resources to the household budget.

If the reported expenditure and employment-based income in the 30 days preceding the assessment remained constant each month, households would face a deficit, potentially indicating chronic accumulation of debt. Supplementary income sources, such as assistance or remittances were reported to mitigate this average deficit somewhat, and for Syrian households, on average, balanced the monthly household budget out to a small surplus. However, this suggests that to meet basic household needs and expenditures, households are relying on non-sustainable income sources and negative livelihoods coping strategies, leaving them more vulnerable to economic shocks. Furthermore, even when accounting for non-sustainable income sources, an average monthly deficit resulted for Iranian and Turkish households, indicating more acute



⁵⁴ Figures in IQD have been rounded to the closest 5,000 mark.

 ⁵⁵ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
 ⁵⁶ Excluding savings and debt. Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

⁵⁷ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

⁵⁸ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.98 IQD, using XE currency converter. Accessed 12 May 2019.

income vulnerability compared to Syrian households, and possibly greater accumulation of household debt.

Income Sources

Households reported different sources of income in the 30 days prior to interview. While the vast majority of households reported employment as a primary source of income (89%), coping mechanisms (58%) such as using savings or accumulating debt, or private assistance (17%) such as support from family or the community were often reported as additional means to cover household expenditures (see Figure 10). Assistance provided by NGOs or the government were reported by 1%⁵⁹ and <1%⁶⁰ respectively of all households. Notably more Syrian refugee households reported employment as a primary income source (90%), compared to their Iranian (74%) and Turkish (83%) counterparts. In light of average reported income, these findings suggest that although at least three quarters of households were able to access employment, earned-income did not suffice to cover all monthly household expenses.

Households in Sulaymaniyah most frequently reported employment as an income source, with 95% of households stating to have generated income through employment in the 30 days prior to interview, while 86% of households in Dohuk and 88% of households in Erbil reported employment as an income source. While 64% of Dohuk-based households and 68% of Erbil-based households reported at least one coping mechanism as a means to cover household expenditures, merely 15% of households in Sulaymaniyah reported such a use of coping mechanisms in the 30 days before the interview.

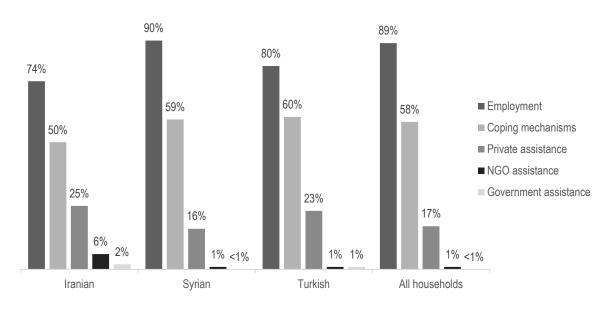


Figure 10: Proportion of households reporting different types of income sources⁶¹ in 30 days prior to interview, by refugee group⁶²

Employment as an Income Source

Employment was the most frequently reported income source, with almost nine out of ten households (89%) reporting to have at least one working member, while the remaining 11% of households reported not having any member in employment. A higher proportion of households in Sulaymaniyah reported this to be the

⁶² Multiple responses were possible, so findings might exceed 100%.



^{59 0.8%} represents 23 households.

^{60 0.3%} represents 15 households.

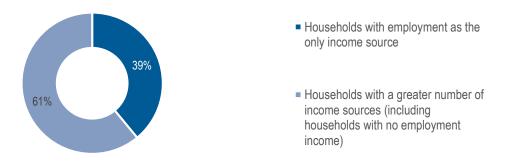
⁶¹ Response options were categorized as follows: employment, coping strategies (using savings, selling household assets, selling assistance received, loans and debt, illegal or socially degrading activities (e.g. unlawful sales, survival sex, begging, etc.)), private assistance (remittances, support from community, friends and family, mosque or church donations), NGO assistance, and government assistance (retirement fund or pension, MODM cash assistance, social service (disability allowance)).

case (94%), compared to Erbil (88%) and Dohuk (86%). Similarly, Syrian refugee households more frequently reported having at least one employed member (90%) than Iranian (74%) and Turkish households (80%). This figure for Iranian households could be due to the older age of Iranian household members potentially reducing the number of able-bodied members working. Further, as Iranian households on average were smaller, this also suggests less members being available for income-generation through employment.

Female-headed households reported having no working member more frequently (32%) than male-headed households (9%). Even bigger was the reported difference between the different income vulnerability levels, with 4% of 'low income vulnerability' households reporting having no working member and 27% of 'high income vulnerability' households stating this to be the case. These findings suggest that having access to employment is a crucial factor to the level of economic vulnerability of households. This is supported by 70% of all households reporting employment as a priority need, which highlights the findings as discussed earlier, that there was either not enough employment available or the income generated through employment did not suffice to cover all expenditures.

Four out of ten households did not report having any income source other than employment (39% of all households) in the 30 days prior to interview (see Figure 11). Inversely, 61% reported using complementary sources of income to employment or not receiving income through employment at all. However, relying solely on employment as an income source was significantly more commonly reported in Sulaymaniyah (81%) than in Erbil (28%) and Dohuk (38%). Similarly, female-headed households reported using a mix of income sources more frequently (77%) than male-headed households (59%). Only 23% of female-headed households were able to rely solely on employment income, which suggests these households have a higher level of dependency on other sources of income, and a potentially higher level of economic vulnerability.

Figure 11: Proportion of households with employment as the <u>only</u> income source, at KR-I level



Employment for refugees more often than not was found in labour-intensive and often seasonal fields. Construction was the most frequently reported sector of employment in all three governorates and for all three refugee groups (52% at the KR-I level⁶³), which was followed at the KR-I level by 21% of households reporting being employed in the service industry and 18% having a vocational job.⁶⁴

Agriculture was the third most frequently reported employment sector in Sulaymaniyah (11% of households reporting having at least one member employed in this sector), which was noticeably higher than in Erbil (2%) and Dohuk (1%). Iranian refugee households more frequently reported agriculture as a sector of employment (10%) compared to Turkish (6%) and Syrian refugee households (3%).

In Erbil, vocational jobs made up the second most frequently reported sector (22%), around double the proportion of households in Dohuk (12%) and Sulaymaniyah (10%). In Dohuk, employment in the service industry was the second most prevalent sector of employment among refugee households, as reported by 27%, which was more common than in Erbil and Sulaymaniyah (19% of households in each governorate reporting at least one member being employed in the service industry).

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⁶⁴ I.e. carpenter, electrician, plumber, or other professionals.



⁶³ Subset of all households reporting employment as a primary income source (subset of 1,135 households).

Furthermore, 7% of Turkish households reported working as teachers, engineers or lawyers, which was more common than among Syrian (2%) and Iranian households (1%).

Mostly being employed in low-wage jobs in a region with a lack of investment and opportunities creates an additional level of vulnerability for the affected households. However, even if households reported employment as an income source, this income was often not sufficient to cover monthly household expenses. So, while employment could be found, this was often irregular and temporary, as reported by the majority of households (70%) (see Figure 12). No statistically significant comparative differences could be established between the different refugee groups for this indicator. However, in Dohuk, refugee households more frequently reported their employment being temporary (76%) compared to households in Erbil (68%) and Sulaymaniyah (60%).

Households in the 'high income vulnerability' category more frequently reported employment being temporary (81%) compared to those households in the 'low income vulnerability' bracket (with 64% of these households reporting employment being temporary). This suggests that 'high income vulnerability' households might face continuous difficulties trying to access sufficient employment opportunities.

Female-headed households more frequently reported their employment source being permanent (54%) compared to their male-headed counterparts (29%). However, as previously stated, female-headed households more frequently reported additional income sources, suggesting that the income generated through employment, whether permanent or not, still did not suffice to cover monthly expenditures.

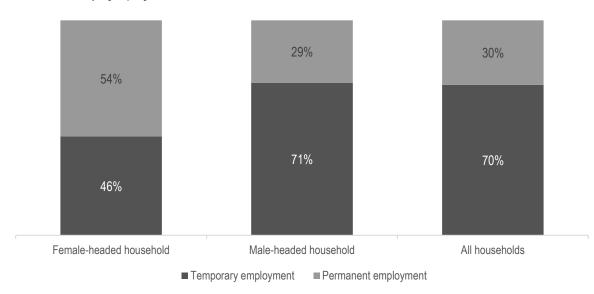


Figure 12: Proportion of households with temporary or permanent employment (of households reporting at least one member to be employed), by sex of head of household⁶⁵

In addition to employment income not being sufficient to meet household expenditure on a monthly basis, most households also reported facing obstacles when trying to access employment, thereby adding to the economic vulnerability of these households. Of all households reporting employment as an income source, only 16% reported not encountering obstacles when trying to access jobs. This was more frequently reported by households in Sulaymaniyah (25%) and Dohuk (20%), compared to those in Erbil (12%), suggesting a more difficult to access job market in Erbil.

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65 Subset of all households reporting employment as a primary income source (subset of 1,135 households).



The most frequently reported barrier to employment⁶⁶ was increased competition and not enough jobs being available on the market, which was the case for 84% of households which reported facing obstacles to finding employment⁶⁷ (see Figure 13). The availability of only inadequate and socially degrading jobs⁶⁸ was more frequently reported in Erbil, by 49% of households encountering difficulties on the job market, compared to households in Dohuk (14%) and Sulaymaniyah (22%). Language differences as a barrier to employment were reported by 10% of households with at least one member in employment in Sulaymaniyah, but merely by 1% in Erbil and less than 1% in Dohuk (one household). Fourteen percent (14%) of household in Dohuk, 21% of households in Erbil and 2% in Sulaymaniyah reported denial because of the refugee status being an obstacle.

One notable difference could be established for employment obstacles faced by the different refugee groups: Turkish refugee households more frequently reported facing problems due to lack of residency documents (5%) when compared to Syrian households (less than 1%) and Iranian refugee households (2%), suggesting legal documentation issues could affect access to income from employment for Turkish refugee households.

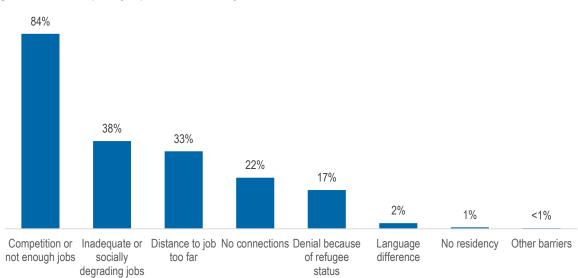


Figure 13: Most frequently reported barriers to jobs, at KR-I level 69

These findings show that there were potential obstacles for households to access employment, creating job insecurity. This vulnerability regarding employment was further exacerbated by the nature of potential employment often being temporary. As discussed previously, salaries generated through employment still did not cover all monthly expenditures among three refugee groups.

Non-employment Income Sources

In addition to income through employment, households reported having other income sources. Other income sources were categorised into the following groups: private assistance⁷⁰, NGO assistance⁷¹, and government assistance. **Private assistance was more frequently reported as a primary income source by households in Erbil (20%) and Dohuk (16%) than in Sulaymaniyah (6%).** In addition, 2% of Iranian, 1% of Turkish refugee and less than 1% of Syrian refugee households⁷² reported government assistance as a primary income source. Iranian households also more frequently reported NGO assistance being an income source (6%) than Syrian households (1%).

⁷² Only 1 Syrian refugee household reported this.



⁶⁶ Subset excluding those reporting 'none' to the question of barriers to employment (subset of 864 households). Multiple responses were possible, so findings might exceed 100%.

⁶⁷ Subset excluding those reporting 'none' to the question of barriers to employment (subset of 864 households).

⁶⁸ Inadequate and socially degrading = only low-skilled, socially degrading or low-paid jobs were available, for which the person working was overqualified.

⁶⁹ Subset excluding those reporting 'none' to the question of barriers to employment (subset of 864 households). Multiple responses were possible, so findings might exceed 100%.

⁷⁰ Private assistance includes remittances, support from community, friends and family, mosque or church donations.

⁷¹ NGO assistance includes all assistance (cash or in-kind) received from NGO actors.

Female-headed households frequently reported receiving private assistance as an income source (40%) compared to male-headed households (14%), suggesting support from the community and relatives are important income sources for these households. The same was observed for NGO assistance, with 3% of female-headed households reporting this as an income source compared to 1% of male-headed households. This could be due to female-headed households being identified as more vulnerable and thus eligible for assistance.

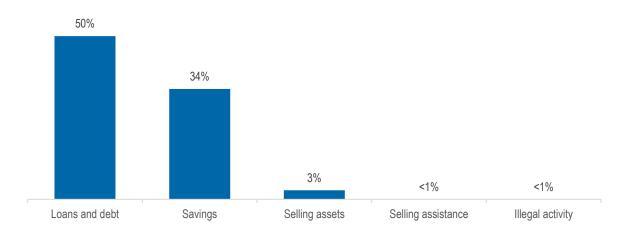
Additionally, 4% of all households (59 households) responded affirmatively to having received assistance in the 30 days prior to the interview.⁷³ Eight per cent (8%) of Turkish refugee households reported having received assistance, compared to 4% for both Syrian and Iranian households, which highlights that that even households in protracted displacement still were targeted with assistance.

Use of Livelihoods-based Coping Strategies

In addition to income from employment or assistance, households reported using a number of livelihoodbased methods or coping strategies to supplement income and cover monthly household expenditures. The following coping strategies were reportedly used: using savings, selling household assets, selling assistance received, reliance on loans and debt, engaging in illegal or socially degrading activities (e.g. unlawful sales, sex work, begging, etc.).

More than half of all households (58%) reported using at least one or several of these strategies in the 30 days prior to interview (see Figure 14). This figure was significantly higher in Dohuk (64% of households) and in Erbil (68%) than in Sulaymaniyah (15%). There was no significant difference in the prevalence of this between the different refugee groups or sex of head of household. However, 70% of the 'high income vulnerability' households reported using livelihood-based coping mechanisms, compared to 53% of the 'low income vulnerability' households, suggesting 'high income vulnerability' households more frequently resorted to such means to cope with an insufficient income to cover monthly expenditures. These findings suggest that while employment was an income source for most households, a substantial proportion of households had to resort to at least one coping mechanism to supplement income from employment and assistance; the lower the average household income, the more prevalent the reported use of strategies.

Figure 14: Proportion of households reporting using livelihood-based coping strategies as income source in the 30 days prior to interview, at KR-I level ⁷⁴



73 Of the 59 households reporting to receive assistance, 42 reported receiving cash, 37 food, 6 winterization items, 3 fuel and 1 shelter support.

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⁷⁴ Multiple responses were possible, so findings might exceed 100%.

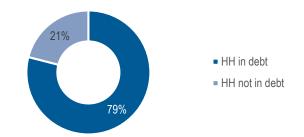


Loans and Debt

Accumulating debt as a livelihood-based coping strategy was reported by 79% of households at the time of the interview (see Figure 15). A noticeably higher proportion of households in Dohuk (82%) and Erbil (79%) reported this than in Sulaymaniyah (72%). No significant difference could be established between the three refugee groups or different genders of the head of household. However, 92% of households classified having 'high income vulnerability' reported being in debt, compared to 73% of 'low income vulnerability' households.

In addition to 79% of all households being in

Figure 15: Proportion of households in debt at time of interview, at KR-I level



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debt at the time of the interview, half of all households (50%) also reported having used loans or debts as a way of covering expenses in the 30 days prior to interview. This was the most frequently mentioned way of covering expenses after employment. Loans and debts were more frequently reported by 'high income vulnerability' households (64%), than by households with 'low income vulnerability' (44%).

Compared to findings from the 2017 MSNA III, there has been an increase in the proportion of Syrian refugee households in debt: from 68% to 79% reporting some level of debt. When considered in light of the marginal surplus of 5,000 IQD or 5 USD for total household income, this **further indicates that refugee households are burdened with chronic debt that, without more durable livelihoods solution, will continue to accumulate.** Furthermore, the amount of debt as reported by Syrian households in 2017 MSNA III and 2018 MSNA IV has increased significantly over the course of one year. **In the 2017 MSNA III, Syrian refugee households reported a total amount of 1,540,000 IQD, or 1,295 USD, while in 2018 MSNA IV this figure was 2,060,000 IQD, or 1,730 USD.**⁷⁵ This steep increase within one single year suggests that Syrian households will continue to further accumulate debt. If Syrian households solely rely on employment income (see Figure 9), or in case of accruing extraordinary expenditures such as health incidents or fixing shelter issues, accumulating more debt potentially remains a frequently used coping mechanism and the amount of debt accumulated by refugee households could potentially increase further.⁷⁶

The average reported amount of debt of households at the KR-I level exceeded 2 million IQD per household, or 1,675 USD, at the time of the interview.⁷⁷ Turkish households on average had almost double the amount of debt compared to Syrian households (see Figure 16). Syrian households reported a debt level of 2,060,000 IQD, or 1,730 USD, on average, while Turkish households had significantly higher levels of debt at 3,920,000 IQD, or 3,290 USD.⁷⁸ Iranians reported having a debt level of 2,435,000 IQD, or 2,045 USD.⁷⁹ In Sulaymaniyah, the average reported debt was significantly lower (1,415,000 IQD, or 1,190 USD) than in Erbil (2,240,000 IQD, or 1,880 USD) and Dohuk (2,435,000 IQD, or 2,045 USD).⁸⁰

Female-headed households reported a noticeably higher amount of total debt (2,935,000 IQD, or 2,465 USD) than male-headed households (2,070,000 IQD, or 1,740 USD).⁸¹ Households classified as having 'high income vulnerability' reported a debt of 2,495,000 IQD, or 2,095 USD, which was notably higher than lower income vulnerability-bracket households at 1,955,000 IQD, or 1,640 USD.⁸²

⁸² Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.



⁷⁵ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
⁷⁶ As there is no available comparable dataset for Iranian and Turkish refugee households, no indication can be made as to their continued accumulation of debt. Considering the high amount reported, it is assumed that this process will continue for these refugee groups as well.

⁷⁷ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,195.53 IQD, using XE currency converter. Accessed 25 January 2019.

⁷⁸ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

⁷⁹ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

⁸⁰ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

⁸¹ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

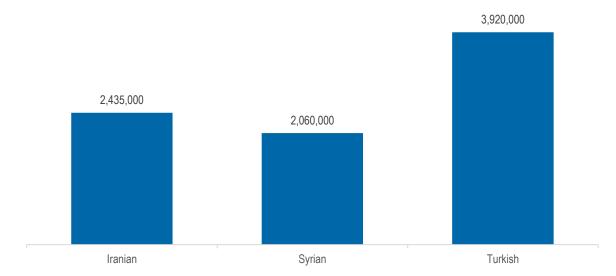


Figure 16: Total amount of debt (in IQD⁸³) at time of the interview, by refugee group

Comparing these figures with the monthly deficit as reported previously suggests that households seem to be accruing debt continuously (chronic debt), with the total amounts reflecting findings of monthly household deficits. This reliance on debt is not restricted to Syrian refugee households, which might be using debt to cope with the first few years of displacement, but to all refugee groups, as highlighted by the amount of debt accrued by Iranian and Turkish households. Rather, this is an issue that is closely tied to the protracted nature of displacement and a lack of access to sustainable income sources.

Households most frequently reported taking on debt to pay for basic household expenditures such as rent, utilities, and food (63%), followed by health-related costs (23%) and food (12%) (see Figure 17). Slight variations between the refugee groups and governorates of residence could be established, yet the primary reason for all groups was basic expenses, suggesting that debt was not a coping mechanism for emergencies, but mostly for basic, regular expenses.

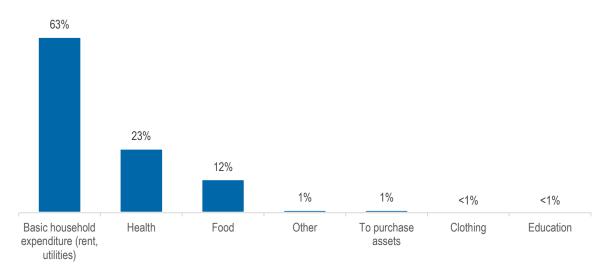


Figure 17: Primary reason for debt, at KR-I level 84

The predominant source of debt, as reported by households, was through informal networks, rather than official institutions. The vast majority of households in debt at the time of the assessment reported primarily

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83 Figures in IQD have been rounded to the closest 5,000 mark.

⁸⁴ Subset of households reported being in debt at time of the interview (subset of 1,044 households).



borrowing from friends or relatives (93%), followed by shopkeepers (42%) (see Figure 18). Only 4% reported borrowing from a bank or credit institute. The use of such institutions was more frequently reported in Erbil (by 6% of households) than in Dohuk and Sulaymaniyah (1% and less than 1% respectively). Conversely, borrowing from shopkeepers was less frequently reported in Erbil (36%) than in Dohuk (46%) and Sulaymaniyah (63%). Households borrowing from friends and family, and informal channels such as shopkeepers, both suggest a certain level of flexibility in paying debt back, but also show a lack of existing legal procedures and protection mechanisms for those that borrow and lend.

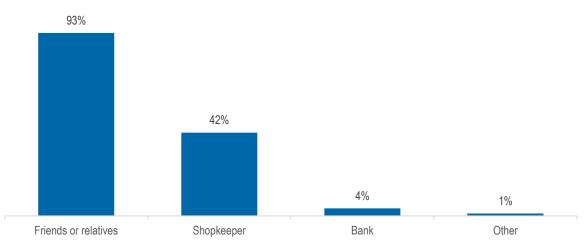


Figure 18: Most frequently reported sources for borrowing money, at KR-I level 85

Monthly Expenditure Items

Of the average total household expenditure in the 30 days before interview, refugee households reported on average spending 37% of all expenditure on food, followed by rent at 26% and medical costs at 9% (see Figure 19). Some differences could be established between the three governorates. In Dohuk, refugee households on average spent less on rent (20%), but more on medical costs (13%). In Sulaymaniyah, households spent noticeably more on food (43%) than in Erbil (36%) and Dohuk (35%), but less on medical costs (6%). In Erbil, households reported spending on average 28% of their monthly expenses on rent and 8% on medical costs.

Iranian (20%) and Turkish households (16%) on average spent less on rent than Syrian households (27%), due to a larger proportion of Iranian and Turkish households owning their accommodation and thus not spending money on rent.⁸⁶ However, Iranian households reported spending more on food (44%) than Syrian ones (37%). This might be due to a bigger proportion of Syrian households having monthly rent expenses, which diminished other expenditure categories. However, food still made up roughly a third of all monthly expenses at the KR-I level. Considering the struggles households reported facing in generating income through employment sources, households spending such a large proportion of monthly expenditures on basic needs suggests a high vulnerability to economic shocks in case of emergency expenses (medical costs, fixing shelter issues, etc.).

Households with a high level of income vulnerability on average reported spending more on healthcare-related costs (11%) than 'low income vulnerability' households (8%). Findings from the health sector suggest healthcare costs were a large burden for already economically vulnerable households.⁸⁷ Similarly, the finding that households with a higher level of income vulnerability reported higher levels of debt (with healthcare costs being the second most frequently reported reason for this debt) suggests that healthcare expenses constitute a monthly cost that could put these households under additional financial strain despite already limited resources.

⁸⁷ See health section, page 58.



⁸⁵ Subset of households reported being in debt at time of the interview (subset of 1,044 households). Multiple responses were possible, so findings might exceed 100%.

⁸⁶ See shelter section (figure 63), page 63.

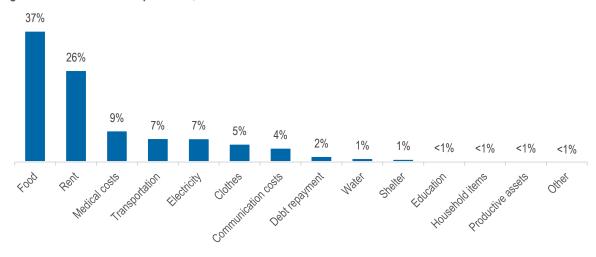


Figure 19: Breakdown of expenditure, at KR-I level 88

Access to Markets

The majority of all households (94%) reported access to the closest functioning market place to be within 5 kilometres (km) (see Figure 20). A higher proportion of households in Sulaymaniyah reported the closest market to be between 2-5 km away (42%) compared to Erbil (12%) and Dohuk (20%).

Figure 20: Distance to closest functioning market place, at KR-I level

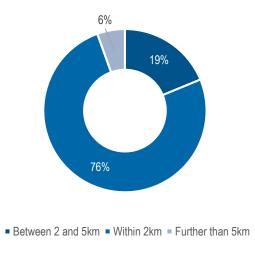
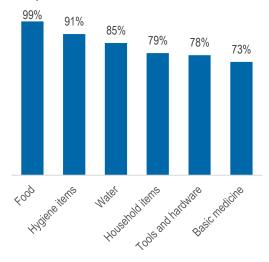


Figure 21: Items available at closest functioning market place, at KR-I level ⁸⁹



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Findings from this assessment suggest that food and other basic items are available for most households (see Figure 21). **Ninety-nine per cent (99%) of households reported food being available at their closest market.**⁹⁰ Considering the findings regarding income, expenditure and debt as previously discussed, problems accessing food are more closely linked to persistent household economic vulnerability, with food being the third most frequently mentioned reason for debt by all households being in debt at time of the interview (see Figure 17 on page 33). A significantly lower proportion of households in Sulaymaniyah reported basic medicine being

⁹⁰ 1,361 out of all 1,371 assessed households.



⁸⁸ Percentage of each category of total expenditures.

⁸⁹ Multiple responses were possible, so findings exceed 100%.

available at the closest market place (60%) compared to the KR-I level average (73%). This corresponds to households in Sulaymaniyah reporting a more severe level of need in the health sector-related questions.⁹¹

Protection

This section gives an overview of different protection needs of refugee households, by first outlining household vulnerability factors, then elaborating on legal documentation needs, access to legal services and safe places, as well as perceived community support and social cohesion.

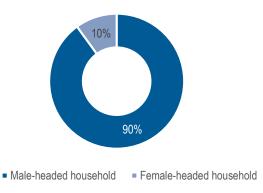
Household Vulnerability Factors

Sex of Head of Household

The vast majority of refugee households reported the head of household being male (90%) (see Figure 22).⁹² No significant difference could be established between the three governorates. However, Iranian households more frequently reported being female-headed (22%) than Turkish (8%) and Syrian households (10%).

Female-headed households are often considered to be more vulnerable as the implication is that there is no adult male able to work or earn income, and due to cultural norms surrounding female domestic labour, are thus more restricted in generating income. This vulnerability might be increased in case of absence of male adult household members, or for 'single-female headed households'. Indeed, this is

Figure 22: Proportion of male- and female-headed households, at KR-I level



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reflected in findings in the livelihood section on income vulnerability which demonstrated a higher proportion of female-headed households being classified as having 'high income vulnerability' (40%) compared to male-headed households (32%)⁹³.

Marital Status of Head of Household

Single-headed households could carry heavier burdens than those with a married couple, having to bear both the duties inside the household as well as income-generation. Female-headed households more often reported not being married (51%), compared to male-headed households (14%). Twenty-two per cent (22%) of female-headed households reported their head being single⁹⁴, 22% being widowed, 4% divorced, and 4% separated. These figures suggest an increased level of vulnerability for female-headed households, as they could be responsible for possible child-rearing as well as income-generating duties at once, increasing their daily workload.

Age of Head of Household

Similarly, higher levels of vulnerability are assumed for households headed by elderly members (60 years or older), as health issues more frequently affect elder persons and the ability to work (especially in labour-intensive jobs)

⁹² Head of household is defined as the principal applicant of the UNHCR case and the main decision-maker regarding the household budget and expenditures. ⁹³ Households have been classified into 'high income vulnerability' and 'low income vulnerability' for this analysis. 'High income vulnerability' households reported a total household income in the 30 days prior to interview which was below 70 USD or 85,000 IQD per capita (the equivalent of the Minimum Expenditure Basket). More details on this classification can be found in the livelihoods section on pages 24 and 25.

⁹⁴ Of all households, 3% (66 households) reported being a single, female-headed household with no adult males in the household.



⁹¹ Refer to the section on health.

decreases.⁹⁵ At KR-I level, 5% of all households were headed by an elderly member. This was more frequently reported by Iranian households (12%), which also reported a higher average age for their head of household at 44 years (see Table 4). Female-headed households more often reported being headed by an elderly member (10%) than male-headed ones (5%), adding to their level of vulnerability. In addition to female members of households often being responsible for child-rearing and housekeeping tasks, older age might increase difficulties to access income-generating activities.

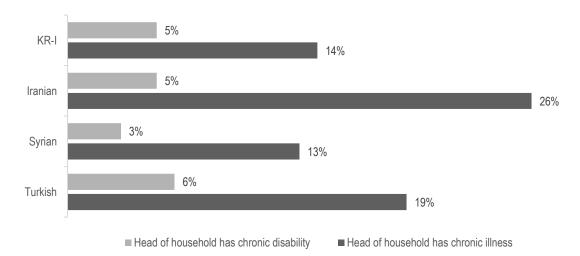
Refugee group	Average age of head of household
Iranian	44
Syrian	35
Turkish	42
All refugee groups	36

Table 4: Average age of head of household, by refugee group

Head of Household with Chronic Illness or Disability

Furthermore, households that were headed by a member with a chronic disability or illness could be considered more vulnerable due to limited livelihood opportunities and increased expenses related to healthcare. Across the KR-I, 5% of all households reported their head of household having a chronic disability, while 14% reported the head of household suffering from a chronic illness (see Figure 23). No significant difference could be established for head of households with physical disabilities among the three governorates or the different refugee groups.

Figure 23: Proportion of households with head of household with chronic disability or illness, by refugee group



However, a higher proportion of heads of households reported suffering from a chronic illness in Sulaymaniyah (20%) than in Erbil (12%). In Dohuk, 16% of heads of households were reported to have a chronic illness. Similarly, 26% of Iranian households reported their head of household to have a chronic illness, which was noticeably more than for Syrian heads of household at 13% and Turkish heads of household at 19%. This could be due to Iranian heads of household being older on average (44 years), when compared to Syrian households (35 years). In addition, female-headed households more often reported their head of household having a chronic

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⁹⁵ As figures from the reported employment sectors showed, jobs such as construction or agricultural workers prevailed among the refugee households, indicating increased difficulties for elder household members.

disability (8% of all female-headed households) or a chronic illness (30%), compared to 3% of male-headed households reporting they had a chronic disability and 12% of male-headed households reporting their head of household had a chronic illness. These figures further highlight an increased level of vulnerability among female-headed households, as disability and illness could impede the ability of adult household members to work, and lead to the household having higher healthcare expenses.

Households with Members with a Chronic Disability

Similarly, other household members with a chronic disability might also affect the degree of vulnerability of a household, for instance due to increased healthcare costs or time spent caring for these members or making sure the accommodation is accessible for them.

Less than one out of ten households reported having one or more members with a disability (9%). Findings did not vary significantly between governorates of residence, refugee group, sex of head of household and levels of income vulnerability. Increased vulnerability related to chronic disabilities could be due to having a household member with increased need for support both decreasing the time available for income-generating activities and potentially increasing medical costs for treatment.

Child Protection Issues⁹⁶

Child protection-related issues affected a minority of refugee households, though it is important to note that there may have been underreporting due to the sensitivity of the topic. One percent (**five households**) reported caring for unaccompanied minors (see Table 5). Of these, two households were Syrian, two Iranian and one Turkish.

Child protection	% of households reporting issue	# of households reporting issue	
Caring for separated children	1%	5	
Child marriage	1%	9	
Child labour	4%	44	

Table 5: Child protection issues, reported by number of households, at KR-I level⁹⁷

Nine households reported child marriage⁹⁸, five of which were Syrian refugee households and two each Iranian and Turkish. More frequently reported than child marriage was child labour, with 44 households reporting at least one minor member being engaged in child labour, of which 6 were Iranian, 23 Syrian and 15 Turkish households.⁹⁹ This was more frequently reported in Erbil, with 22 households, compared to 12 in Dohuk and 10 in Sulaymaniyah.

Legal Documentation Needs

Possessing certain legal documentation is crucial to households accessing various services or employment opportunities. Households lacking certain types of documentation¹⁰⁰ or registration with UNHCR were likely more vulnerable regarding access to government or NGO services. Overall, 14% of households

¹⁰⁰ Such as KR-I residency card or passports.



⁹⁶ Because of the low figures in this section, reporting was done on household level. Under-reporting bias due to the sensitive nature of the topic needs to be taken into account for these findings.

⁹⁷ Households reporting at least one member being affected by the relevant child protection issue.

⁹⁸ This sensitive topic was approached in two different questions, one on the protection section with 2 households reporting so, and one in the food security sector to ask about livelihood coping strategies, with 9 households reporting this strategy being used (1% of all households).

⁹⁹ Similarly, to the question of child marriage, this topic was approached in two different sections: the livelihood section with 37 households reporting at least one minor member being engaged in employment (3% of all households), and in the food security section where livelihood coping strategies were assessed, and 22 households reported using child labour as such (3% of all households). Accounting for overlapping reports, a total of 44 households reported either having a minor member working in employment in the 30 days prior to interview in the livelihood section or reported using child labour as a coping strategy to make up for missing income in the food security sections. These contradicting reports further suggest an increased level of underreporting of these issues, which makes these findings indicative and to be used with caution.

reported having at least one member who never possessed legal documentation, and 12% of households reported a member having lost or missing legal documentation¹⁰¹ (see Figure 24). Furthermore, nearly one out of ten households (9%) reported having at least one member who was not registered with UNHCR at the time of the interview.

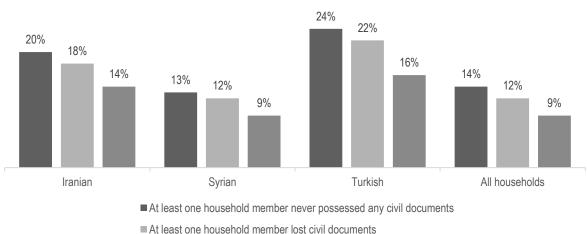


Figure 24: Proportion of households reporting issues with legal documentation, by refugee group

At least one household member is not registered with UNHCR

Findings suggest that Turkish refugee households faced higher levels of vulnerability regarding missing legal documentation, as a higher proportion of households reported members not having, or having lost, documentation. This finding was further supported by Turkish households significantly more frequently reporting legal documents as a priority need (29% compared to the KR-I average of 13%). Syrian refugee households less frequently reported being affected by all three legal documentation issues previously mentioned. Furthermore, for households that have resided in the KR-I for a prolonged period of time (mostly Iranian or Turkish), inter-marriage with the host community and children with Iragi nationality were frequently reported as reasons for members not being registered with UNHCR.¹⁰²

The most frequently mentioned missing documents were the KR-I residency card and national ID card (see Table 6). For Iranian and Turkish households, members also reported missing passports (33% of Iranian households and 26% of Turkish households).

Document type missing	Proportion of households reporting
	document type as missing
KR-I residency card	51%
National ID card	36%
UNHCR registration card	18%

Table 6: Top three most frequently reported types of missing documentation, at KR-I level ¹⁰³

103 Subset of households reporting having household members who have never possessed some legal documentation or have missing or lost legal documents (subset of 311 households). Multiple responses possible, so findings may exceed 100%.



¹⁰¹ The difference between 'lost or missing' and 'never possessed' lies in a household member once having had the relevant document and then subsequently lost it or the document going expired, and in a member never having had the relevant document.

¹⁰² As reported for reasons of why household members were not registered with UNHCR, 'other' predominantly included 'spouse Iraqi' or 'child possessing Iraqi nationality' (55 households in total).

The most frequently cited reason for a household member not possessing a certain type of legal documentation was not yet having obtained a document the household already applied for (38% of households with missing documentation, see Figure 25).¹⁰⁴ This suggests that for over a third of households missing documentation, they had been able to apply. However, 62% of households reported that they had not been able to apply. For instance, 15% of households missing documents states not being able to apply because the area of origin was inaccessible and 12% reported authorities being uncooperative as an obstacle to apply for or renew documents. **This indicates that a considerable proportion of households missing or needing to apply for documentation may be in need of support to navigate the legal process. Of concern were the 14% of Iranian households that reported the reason for not having documents as 'confiscated', which was significantly more than 1% of Syrian households and 6% of Turkish refugee households reporting so, suggesting increased vulnerabilities of Iranian refugee households to authorities confiscating legal documentation. Turkish refugees more frequently reported not wanting to renew expired documents (22%), compared to 12% of Iranian and 15% of Syrian households reporting this.**

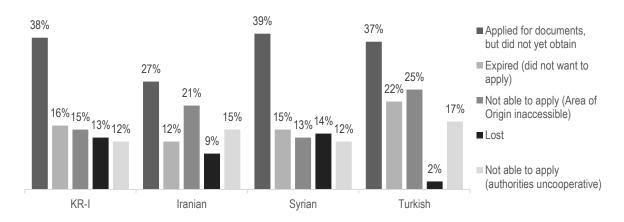


Figure 25: Five most frequently reported reasons for missing documents, by refugee group ¹⁰⁵

Perceived Community Support, Social Cohesion, and Safety in the Street

Overall, while levels of perceived discrimination were reported by a minority of households and perceived levels of support from the community were generally neutral or positive, a slight decrease in perceived levels of hospitality could be established. This applied mostly to Syrian refugee households.

Overall, perceived levels of support on arrival were mostly neutral or positive, with roughly half of all households rating support either 'good' or 'extremely helpful' (48%), or as 'neutral' (49%) (see Figure 26). Three per cent (3%) of all households perceived the level of support as 'bad'. This was more pronounced in Erbil (5%) than in Sulaymaniyah (<1%). Iranian households (56% reporting 'extremely helpful' or 'good') as well as households in Dohuk and Sulaymaniyah more frequently reported perceiving the host community as supportive since arriving in the KR-I.¹⁰⁶ For both Dohuk (33%) and Sulaymaniyah (34%), households more frequently reported the host community support being 'very helpful', compared to 21% of households in Erbil reporting this.

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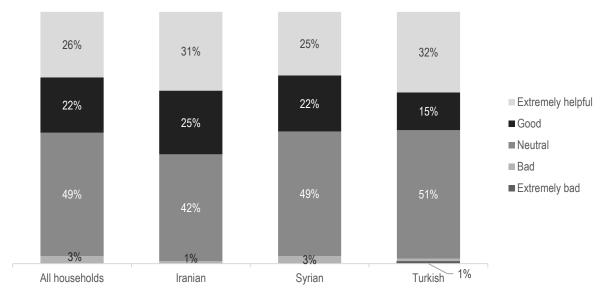
¹⁰⁴ Subset of households reporting having household members who have never possessed some legal documentation or have missing or lost legal documents (subset of 311 households). Multiple responses possible, so findings may exceed 100%.

¹⁰⁵ Subset of households reporting having household members who have never possessed some legal documentation or have missing or lost legal documents (subset of 311 households). Multiple responses possible, so findings may exceed 100%. Forth most frequently mentioned reason for Iranian refugee households was 'confiscated', reported by 14% of Iranian households.

¹⁰⁶ Disaggregation between different refugee groups were not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.

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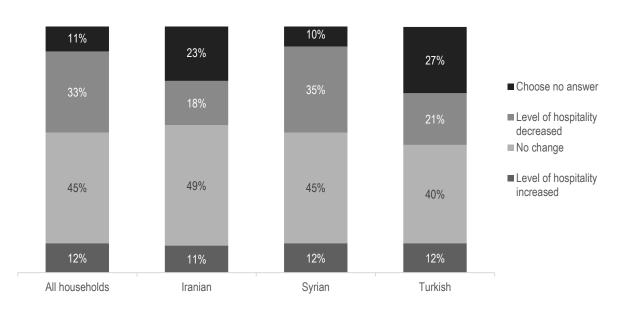
Reported figures regarding support from the local community as perceived by Syrian households show a slight shift from more neutral opinions in 2017 MSNA III (56% of households reporting perceiving support from the local community as neutral in 2017 MSNA III) towards more pronounced – either positive or negative – opinions in 2018 MSNA IV (49% of Syrian households perceiving the local community's support as neutral in 2018 MSNA IV). ¹⁰⁷ This indicates that there might be an increasing polarisation of perceptions of support for Syrian out-of-camp refugee households.

Households reported perceiving levels of hospitality as decreasing in the three months prior to interview, which was more pronounced among Syrian households (see Figure 27). One third of this refugee group (35%) reported decreased levels of hospitality, compared to 18% of Iranian and 21% of Turkish refugee households reporting this. Across the three refugee groups, slightly more than one out of ten households (12%) reported hospitality levels increasing. Roughly half of the households reported not feeling a change (45%). Households in Erbil significantly more often reported feeling the levels of hospitality decrease (42%), compared to households in Dohuk (25%) and Sulaymaniyah (10%). These findings could suggest increased tensions in Erbil governorate.

¹⁰⁷ Differences in answers were within the margin of error and should be taken as indicative.

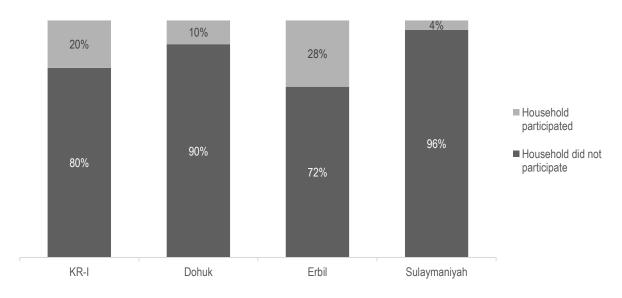


Figure 27: Perceived change in level of hospitality towards refugees in the three months prior to interview, by refugee group



Interestingly, while support of the host community and changes in hospitality more frequently were perceived as increasingly negative in Erbil than in the other governorates, participation in community-led support activities was more widespread there. More than one out of four refugee households residing in Erbil reported to have participated in such activities (28%), compared to 10% of households in Dohuk and 4% in Sulaymaniyah (see Figure 28). Most of these activities were livelihoods-related (93% of households reporting participating in community-led activities)¹⁰⁸, which suggests that refugee households could need support in accessing livelihoods activities.

Figure 28: Proportion of households participating in community-led support activities, by governorate



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¹⁰⁸ Subset of households not reporting 'none' for participating in community-led support activities (subset of 195 households).



Movement restrictions during daylight hours were not reported frequently, with 1% of all households stating to have experienced this. This was most frequently due to the need to obtain security clearances (reported by 22 households) or to provide reasons for movement before travelling (13 households). These restrictions might affect the household's ability to access proper employment, services or medical providers, and add an additional layer of vulnerability.

The reported level of perceived risk on the street was low, with 94% of all households stating that they did not perceive being in the street to be risky. This was different in Dohuk, where 20% of households reported facing verbal discrimination. More than half of the households (57% or 36 households that reported feeling at risk in the street) indicated girls being affected most by these issues (see Table 7).

Groups	Number of households reporting this
Girls	36
Men	25
Women	22
Boys	9

Table 7: Age and gender of people affected by discrimination in the street, at KR-I level ¹⁰⁹

Across all three refugee groups, in 2018 MSNA IV, 1% of all households (nine households) reported facing civil disputes. Three of these were Iranian, three Syrian and three Turkish refugee households. In the 2017 MSNA III, eight Syrian households reported facing civil disputes in the three months prior to interview, suggesting there was no statistically significant change regarding civil dispute issues between 2017 MSNA III and 2018 MSNA IV.¹¹⁰

Legal Services and Safe Places

A considerable part of refugee households in the KR-I reported not needing access to legal services offered by different organisations (Asayesh, local courts, police, NGOs; 35% of all households). Among the other households reporting needing legal advice (65% of all households), Asayesh was the most frequently reported (77% of all households reporting needing legal advice), followed by humanitarian NGOs (46%) (see Figure 29).¹¹¹ NGOs were more often consulted by households in Erbil (60% of households, compared to 24% in Dohuk and 19% in Sulaymaniyah). Syrian refugee households were more likely to approach a humanitarian NGO for legal advice (48%) than Iranian (26%) or Turkish households (25%).¹¹² These figures suggest Syrian refugee households could have more exposure to NGOs offering legal advice.



¹⁰⁹ Subset of households reporting facing discrimination in the street (subset of 67 households).

¹¹⁰ Sample size of 577 households for 2018 MSNA IV and 1,198 households in 2017 MSNA III.

¹¹¹ Subset of households reporting not approaching any of the listed organisations for legal advice, excluding households who answered 'approached none' (subset of 889 households).

¹¹² Subset of households reporting not approaching any of the listed organisations for legal advice, excluding households who answered 'approached none' (subset of 889 households).

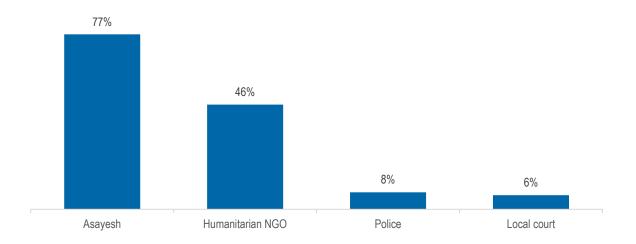


Figure 29: Proportion of households using the following organisations for legal advice, at KR-I level ¹¹³

The vast majority of households (92%) reported they felt comfortable¹¹⁴ when approaching all of the following organisations: Asayesh, local police, Directorate of Combating Violence Against Women (DCVAW), the municipality office or courts. In general, findings suggest that Turkish households feel more uncomfortable with approaching organisations providing legal services. Twelve percent (12%) of Turkish households reported not feeling comfortable approaching at least one of the above-mentioned services, compared to 7% of Iranian and Syrian refugee households respectively. In general, fewer households in Dohuk (82% of all Dohukbased households) reported feeling comfortable approaching all of the services mentioned¹¹⁵ than in Erbil (96%) and Sulaymaniyah (93%). This suggests there might be increased levels of mistrust in legal service providers among Turkish refugee households and those residing in Dohuk.

Half of all households represented by a female respondent (23% of all households were represented in the interview by female members) reported not knowing a safe place for women and girls in case of a genderbased incident of violence (50%). While this question was only asked to female respondents, there might still be underreporting due to fear or lack of trust. However, this might also be due to women being unaware of where to go. Twenty-seven percent of households (27%) reported health facilities and 17% women's centres as the places to approach in such a situation (see Figure 30).¹¹⁶ The high proportion of households not knowing where to go in such an incident suggest a lack of awareness of refugee households, which might for instance be due to lack of information, interest or trust.

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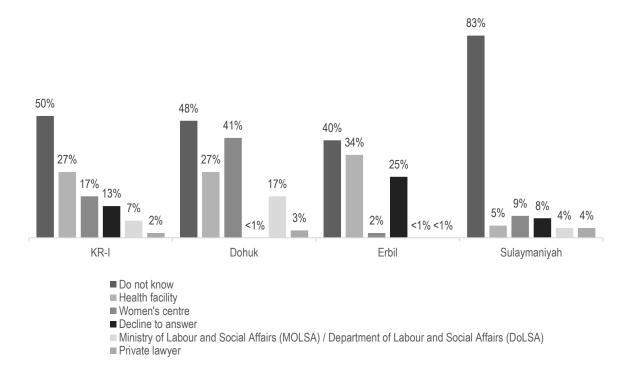
¹¹³ Subset of households reporting not approaching any of the listed organisations for legal advice, excluding households who answered 'approached none' (subset of 889 households).

¹¹⁴ Respondents were specifically asked: 'Which of the following service providers or institutions do you not feel comfortable approaching?'

¹¹⁵ Including: Asayesh, local police, DCVAW, municipality office, courts.

¹¹⁶ Subset of households with female respondents (subset of 367 households). Female respondents are not necessarily head of household, but might have answered the questionnaire on behalf of the male head of household who was unavailable at time of the interview.

Figure 30: Proportion of households reporting places where women and girls feel safe in case of an incident of gender-based violence, by governorate ¹¹⁷



Education

This section gives an overview of the education needs of refugee households, by first providing school attendance levels, reasons for children not being in (formal) education, as well as the accessibility and condition of the closest primary and secondary schools. Questions of this entire section – except the findings on tertiary education which include all households – were only addressed to households with at least one child of school-age (45% of all households).

Attendance Rate for Children of School-Age ¹¹⁸

Overall, 45% of households reported having at least one child of school-age, meaning a boy or a girl between 6 and 17 years old. Across all refugee groups, 11% of people in the refugee population were of primary school-age (meaning between 6 and 11 years) and 8% of secondary school age (2% between 12 and 14 years and 2% between 15 and 17 years). Consequently, 19% of the refugee population were children of school-age.

Across all three refugee groups, 82% of all 6 to 11-year-old children are reported to attend formal education. Among 12 to 14-year-old children, 68% were reported to be enrolled in school, whereas 36% of the oldest age-range of children (15 to 17 years) were in formal education. This shows that reported figures of school-aged children attending formal education in the past school year¹¹⁹ decreased with increasing age of children).

Attendance Rate for Children per Refugee Group

However, decreasing attendance rate for older children were significantly more pronounced for Syrian refugee households (see Figure 31). Eighty-one percent (81%) of younger Syrian children (6 and 11 years) were

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¹¹⁹ Data collection took place in late August and early September 2018, so the past school year was 2017/2018.



¹¹⁷ Subset of households with female respondents (subset of 367 households).

¹¹⁸ All percentages in the following subchapter are calculated as follows: Number of children of relevant age and gender in formal education / total number of children of relevant age and gender in household.

reported to be in school. For 12 to 14-year-old Syrian children, the attendance rate was 66%. The most noticeable difference between Syrian refugee households and the other two refugee groups could be seen for children between 15 and 17 years, with 32% of Syrian children of that age group being enrolled in school.

For Iranian refugee children, reported attendance was on a constantly high level for all age-groups and both genders (with 84% of children between 6 and 11 years, 86% of 12 to 14-year-old children, and 85% of children between 15 and 17 years in school). For Turkish refugee children, attendance rates decreased from 90% for children between 6 and 11 years and 87% of 12 to 14-year-old children, to 69% for children between 15 and 17 years.

The higher attendance rates reported by Iranian and Turkish households may be a reflection of the greater length of time they have spent in protracted displacement in these host communities and could indicate a higher level of integration into host community education systems. Complementary to Iranian households more frequently reporting positive levels of perceived support of the local community, high attendance rates for formal education might reflect more fluid integration into the host community. **Overall, a trend could be established that older children were more likely to not be in formal education than younger children, with the notable exception of Iranian households.**¹²⁰

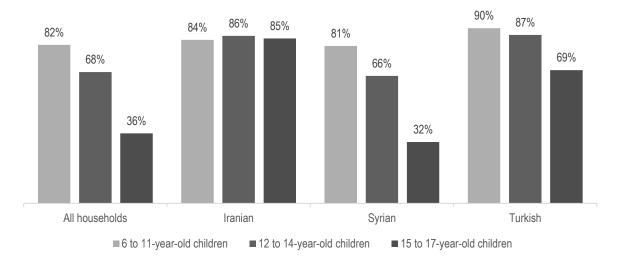


Figure 31: Attendance rate of formal education for children, by refugee groups

Attendance Rate for Children per Gender

Overall, attendance rates for girls were slightly higher across all age groups, but this difference between boys' and girls' school attendance shrank for older children. While 88% of 6 to 11-year-old girls and 76% of boys in the same age group were reported to be enrolled in school, 39% of boys between 15 and 17 years and 39% of girls in the same age were in school (see Figure 32).

A notable exception for lower attendance rates for girls were Iranian children between 15 and 17 years, where it was observed that boys were more frequently reported to be enrolled in school (90% of all boys between 15 and 17 years), compared to 76% of Iranian girls of that age being in school. For younger children, differences between Iranian boys and girls were minor, with 86% of boys between 6 and 11 years and 84% of girls of that age group attending school, and 86% of boys between 12 and 14 years and 87% of girls of this age group being enrolled in school.

Syrian boys in the 6 to 11-year-old age group had noticeably lower attendance rates (75% reportedly being in school) than Syrian girls of primary school age (88% of girls that age being in school). The difference between boys' and girls' attendance rate decreased for the older age bracket, with 70% of girls and 62% of boys between

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¹²⁰ With the notable exception of Iranian boys.



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12 and 14 years reported to be in school and 35% of Syrian girls and 32% of Syrian boys between 15 and 17 years being enrolled in school.

For Turkish households, attendance rates for boys and girls were at the same level for the youngest children between 6 and 11 years (90% of all children that age were reported to be in school), but slightly higher for older girls (90% of all 12 to 14-year-old and 70% of all 15 to 17-year-old girls in school) than for older boys (83% of all 12 to 14-year-old and 68% of all 15 to 17-year-old boys in school). These findings suggest that different refugee group households could have different priorities as to which children to send to school.

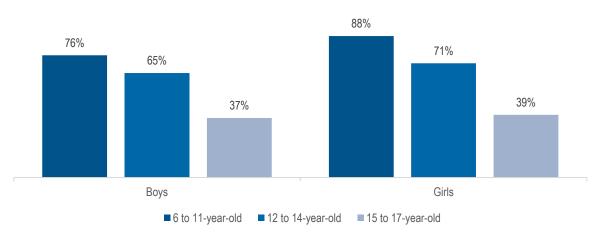


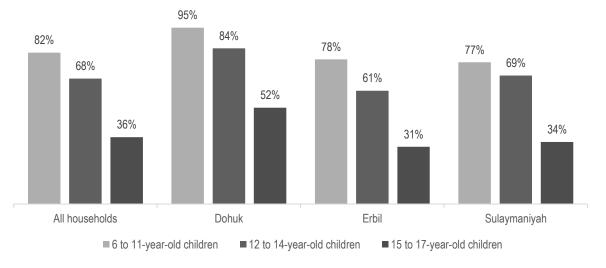
Figure 32: Attendance rate of formal education for boys and girls, at KR-I level

Attendance Rates for Children per Governorate

Differences in attendance rates for formal education varied across the three governorates in the KR-I (see Figure 33). **Overall, rates were highest in Dohuk for all age groups.** In Dohuk, 95% of all children of primary schoolage (6 to 11 years) reported to be attending formal education. Attendance rates for children of the same age group were significantly lower in Erbil (78%) and Sulaymaniyah (77%). The difference in attendance rate between Dohuk and the two other governorates persist for older children. While 84% of 12 to 14-year-old children in Dohuk were reported to be in school, 61% of children in that age group in Erbil and 69% of children between 12 and 14 years in Sulaymaniyah were enrolled in school. Fifty-two percent (52%) of children between 15 and 17 years residing in Dohuk were enrolled in formal school, while 31% of their peers in Erbil and 34% of children in this age group in Sulaymaniyah were in formal education. **This indicates a gap in education needs in Sulaymaniyah and Erbil for children of all age groups.**



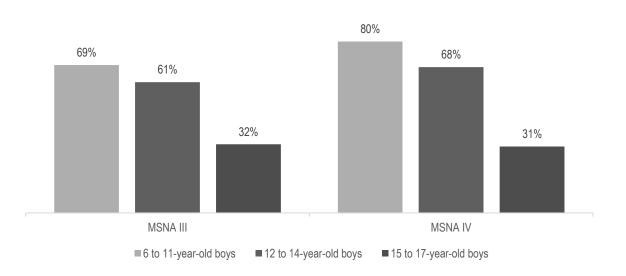




Change in Attendance Rate for Children from 2017 MSNA III to 2018 MSNA IV

While Syrian children's school attendance rates were noticeably lower than those of the two other refugee groups, a certain increase could be established compared to 2017 MSNA III (see Figures 34 and 35). However, this increase only showed for younger children, while children between 15 and 17 years showed a relatively constant level of attendance rate with 32% for boys in 2017 MSNA III and 31% in 2018 MSNA IV, and 45% for girls in 2017 MSNA III and 41% for girls in 2018 MSNA IV. These findings were not statistically significant and need to be studied further and over more consecutive years to show more robust results.

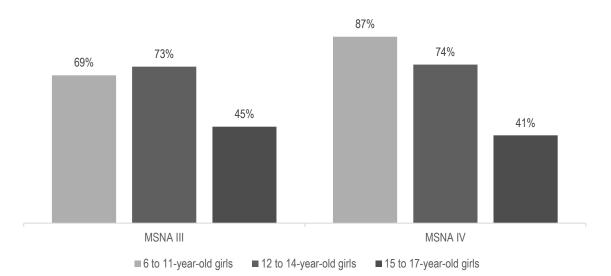
Figure 34: Attendance rate of male children of Syrian refugee households, by MSNA assessment ¹²¹



¹²¹ Disaggregation by MSNA assessment was not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.







Attendance Rate of Informal Education

In addition to formal education, refugee children sometimes had the opportunity to attend informal education activities. Of the three refugee groups, Iranian households most frequently reported their children attending such educational activities, with 22% of 12 to 14-year-old children reportedly being enrolled in informal education activities, compared to the KR-I average of 5% of children in that age-range attending such schooling (see Figure 36). Combined with the attendance rate of formal education, this could suggest a better integration of Iranian refugee children into the host communities' education system. This might be due to a greater emphasis on the importance of education in Iranian households, or it might indicate that Iranian households (being on average smaller than Syrian or Turkish ones) might face fewer financial constraints to send all of their children to school. As the issue of children's school attendance rates has shown a high level of underreporting as observed by enumerators and seen in the data cleaning process, links between reasons for dropping out and lower attendance rates should be taken as indicative.

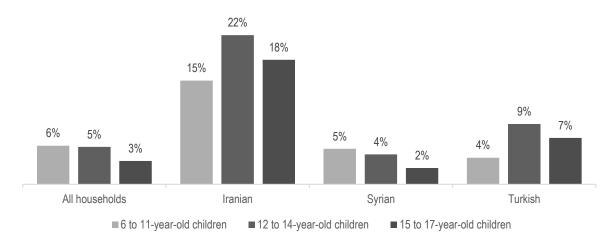


Figure 36: Attendance rate of informal education for children, by refugee group 123

¹²² Disaggregation by MSNA assessment was not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.
 ¹²³ Attending informal education does not exclude formal education, as children could be attending both types of educational activities at the same time. Thus, adding figures for formal and informal education might exceed 100%.



Similarly to children's school attendance rate, being enrolled in tertiary education was more frequently reported by Iranian refugee households, with 5% of all Iranian adult household members attending university or other tertiary educational activities. This was lower for Syrian (1%) and Turkish households (2%).

Reasons for Children Not Being in School

Findings suggest that a lack of sufficient financial means affected household's decision to send children to school. Although the subset of households with children not attending was too small to be representative, there are some indicative findings related to reasons for not attending that may help explain challenges to accessing education. Households reported being unable to afford sending their children to school as the primary reason for both primary (21 households with children not in school) and secondary school-aged children (36 households). This could include school fees, but also school material, transportation, or necessary clothing items for school.

For older children (between 12 and 17 years old), helping in income-generating activities was the secondmost frequently reported reason for children being out of school (11 households), supporting findings of child labour as presented in the previous section.¹²⁴ This indicates that there could be a direct link between limited amount of financial means of the household and school enrolment rates; but also an indirect link to education being a lower priority than income-generation with support of (especially older) children of the household.

Distance and Condition of Schools

Only a few households with school-aged children reported not having access to a functioning primary or secondary school, with 1% of households reporting to not have access to a primary school and 1% of households to not have access to a secondary school. Overall, most households reported having access to a functioning primary school (99% of households with children of school-age) or secondary school (99%). More households in Dohuk reported schools to be at a closer distance (69% of households with school-aged children reporting a primary school within 2 kilometres of their residence) than those in Erbil (33% reporting a distance of less than 2km for a primary school) and Sulaymaniyah (27%, see Figure 37).

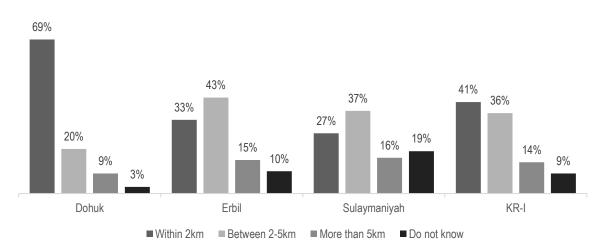


Figure 37: Distance to closest functioning primary school, disaggregated by governorate ¹²⁵

¹²⁴ See protection section on child protection issues, page 38.

125 Subset of households with school-aged children and excluding those reporting 'none' for access to a primary school (subset of 621 households).

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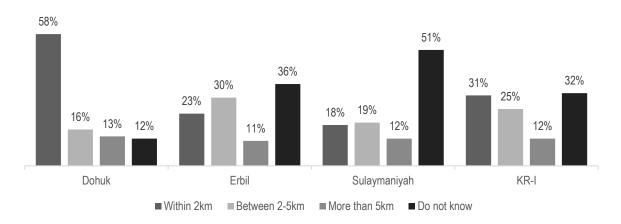


Figure 38: Distance to closest functioning secondary school, by governorate ¹²⁶

Half of the households reported the closest primary school (50% of households that knew where the closest primary school was located¹²⁷) and secondary school (49% of households that knew where the closest secondary school was located¹²⁸) to be fully functional (see Figure 39). However, more than a quarter of households (27%) also indicated the primary school being overcrowded, and one out of five households stating the same for secondary schools (20%). Interestingly, even after only asking households knowing where the closest primary school was located, 25% of households did not know the condition of the closest primary school and 29% did not know those of the closest secondary school.

In addition, 2% of households (20 households¹²⁹) reported that the closest primary school to them did not have functional latrines, with 1% of households (9 households¹³⁰) reporting the same for their closest secondary school, highlighting that a **lack of proper sanitary facilities for school-aged children potentially remains an issue for a small minority of refugee households**.

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¹³⁰ Subset of households with children of school-age (6-17 years old) and reporting access to a secondary school (subset of 479 households).



¹²⁶ Subset of households with school-aged children and excluding those reporting 'none' for access to a secondary school (subset of 617 households).
¹²⁷ Multiple responses were possible, so findings might exceed 100%. Response option 'do not know condition' could not be selected with another response option.

¹²⁸ Subset of households with school-aged children and excluding those reporting 'do not know' for access to a secondary school (subset of 467 households). Multiple responses were possible, so findings might exceed 100%. Response option 'do not know condition' could not be selected with another response option.

¹²⁹ Subset of households with children of school-age (6-17 years old) and reporting access to a primary school (subset of 572 households).

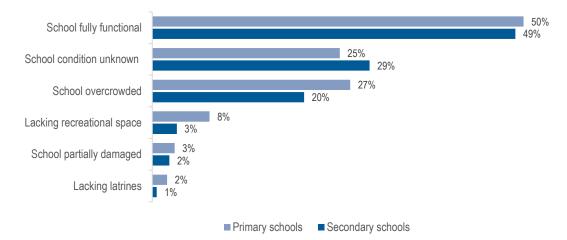


Figure 39: Condition of closest functioning primary and secondary school, at KR-I level ¹³¹

Food Security

This section will give an overview of food security, including the Food Security Index and its components (food expenditure ratio and the Food Consumption Score), households' food sources, and the frequency of use of consumption-based and livelihood coping strategies.

Food Security Index

The Food Security Index is composed of three factors: 1) Food expenditure ratio, 2) Number and severity of coping strategies used to manage lack of food, and 3) the Food Consumption Score. For this assessment, all households were categorised into three groups: food secure, vulnerable to food insecurity, and food insecure. Food secure households are considered to be able to meet the household's food and non-food needs without using severe coping mechanisms. Households which are considered vulnerable to food insecurity¹³² are considered to have gaps in their food consumption or have to apply problematic coping strategies to meet minimal food needs. Food insecure households show extreme food consumption gaps, sometimes even the loss of livelihood assets and may use extreme coping mechanisms, all of which affect food consumption.¹³³

Findings highlight that households in longer-term displacement do not necessarily have an increased level of food security. On the contrary, Iranian households – which were on average displaced in the KR-I for longer than the other groups¹³⁴ – were more likely to be food insecure than Syrian households (see Figure 40). Twenty-one percent (21%) of Iranian households were found to be food insecure, compared to 7% of Syrian and 13% of Turkish households.

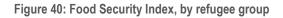
¹³⁴ See demographics section, page 21.

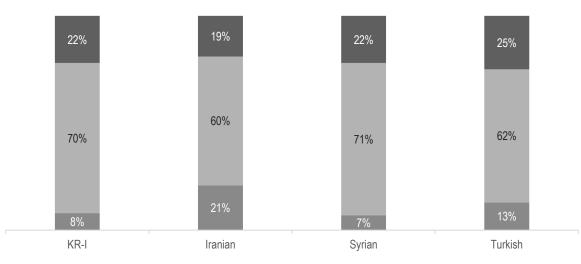


¹³¹ Subset of households with school-aged children and excluding those reporting 'do not know' for access to a primary school (subset of 564 households). Multiple responses were possible, so findings might exceed 100%. Response option 'do not know condition' could not be selected with another response option.

¹³² The WFP index distinguishes between 'marginally food secure' and 'marginally food insecure' households, but these have been (aligned with REACH's 2018 MCNA and after consulting the food security cluster) merged into one single category of households 'vulnerable to food insecurity'.

¹³³ Food expenditure is calculated as follows, based on recommendations of the <u>WFP's Consolidated Approach to Reporting Indicators of Food Security</u> (CARI): 1) Food expenditure ratio, 2) Number and severity of coping strategies used to manage lack of food, and 3) the Food Consumption Score. Proportion that food expenditure makes up of total household expenditure in the 30 days prior to interview, which is then categorized into four groups, 1) low (0 to 50%), medium (51 to 65%), high (66 to 75%) and very high (76 to 100%). Severity of coping strategies are calculated as follows: 1) no coping strategies used, 2) Stress coping strategies (buying food on credit, spending savings to buy food, reducing non-food expenditures), 3) Crisis coping strategies (selling property, selling means of transportation, child labour, changing to a cheaper accommodation), and 4) Emergency coping strategies (children dropping out of school, adults engaging in illegal activities, whole family migrates, attending social events for food, child marriage, forced marriage for adults, begging). The most 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.





■ Food insecure ■ Vulnerable to food insecurity ■ Food Secure

At the governorate level, households in Dohuk more frequently found to be food secure (43%), compared to 23% in Sulaymaniyah, and 14% of households in Erbil. At the same time, 7% of households in Erbil, 10% of households in Dohuk and 13% of households in Sulaymaniyah were found to be food insecure. These findings suggest that households in Dohuk, while reporting the highest levels of food security, were still more frequently found to be food insecure compared to households in Erbil.

However, a substantial proportion of all refugee households were still found to be vulnerable to food insecurity. Considering the economic vulnerabilities and a prevalence of being in debt at the time of the interview affecting households, this might be indicative of increased potential of being affected by food insecurity. All of this suggests a need to address food insecurity and underlying economic vulnerabilities.

Food Expenditure Ratio

Across all refugee groups, 85% of households reported a low proportion of their total monthly expenditure (less than 50%) being spent on food, while 1% of all households reported spending a high proportion (more than three quarters) of their monthly expenses on food (see Table 8). On average, Syrian households reported spending a lower proportion of their monthly expenditures on food than Turkish and Iranian households, with 87% of Syrian households spending less than 50% of all expenditures on food (compared to 67% of Iranian households and 73% of Turkish households reporting the same). Sixteen percent (16%) of Iranian households spend on other expenditures and unanticipated costs (such as medical emergencies, for example).

Refugee group	Low	Medium	High	Very High
	(0 to 50%)	(51 to 65%)	(66 to 75%)	(76 to 100%)
Iranian	67%	17%	9%	7%
Syrian	87%	11%	2%	1%
Turkish	73%	16%	6%	5%
All refugee groups	85%	11%	2%	1%

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Table 8: Monthly food expenditure share groups, by refugee group 135

¹³⁵ Syrian refugee households add up to 101% and total figure of all refugee groups add up to 99% due to rounding issue.



Food Consumption Score

Overall, more than nine out of ten refugee households (91%) were found to have an acceptable food consumption score, while 9% scored 'borderline' or 'poor' (see Figure 41). This score is based on the number of days in the week prior to interview a household was able to eat items from eight standard food groups and composes one third of the Food Security Index.¹³⁶ The food consumed per number of days was then weighted for the nutritional value of each food group, to indicate how balanced a household's diet was. **On average, Iranian households scored lower on the Food Consumption Score than Syrian and Turkish households**. Twenty-three percent (23%) of Iranian households scored 'poor' or 'borderline' in this index, compared to 8% of Syrian households and 14% of Turkish households.

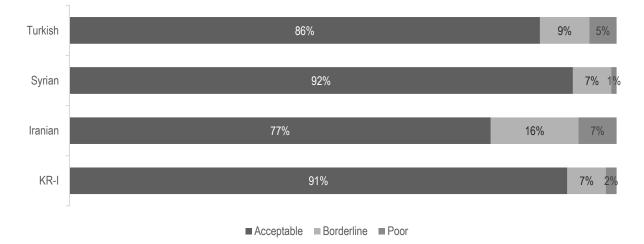


Figure 41: Food Consumption Score, by refugee group

Sources of Food

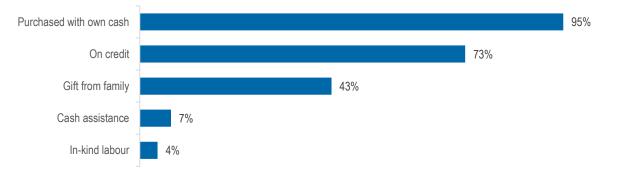
While almost all households (95%) purchased food with their own cash, roughly three quarters (73%) had to buy food on credit in the seven days prior to interview (see Figure 42). These figures correspond with previous findings about food being the second most frequently reported reason for going into debt (see page 33), and further highlights that households were not able to meet monthly expenditures with income, which could potentially explain the need to take on debt to cover basic needs such as food. The third most reported source for food was through gifts from their extended families (mentioned by 41% of households), highlighting a need for additional support to cover basic needs.



¹³⁶ The nine food groups were: 1) Cereals, grains, roots and tubers (rice, pasta, bread, potato); 2) Legumes / nuts (beans, peanuts, lentils, nut, soy, and / or other nuts); 3) Milk and other dairy products (fresh milk / sour, yogurt, cheese, other dairy products); 4) Meat, fish and eggs (goat, beef, chicken, fish, including canned tuna, and / or other seafood, eggs); 5) Vegetables and leaves (spinach, onion, tomatoes, carrots, peppers, green beans, lettuce, cabbages, egg plants, etc); 6) Fruits (banana, apple, lemon, mango, watermelon, apricot, peach, pineapple, passion, gishta, orange, avocado, wild fruits etc); 7) Oil, fat and butter (vegetable oil, palm oil, margarine, other fats / oil); 8) Sugar, or sweet (sugar, honey, jam, cakes, candy, cookies, pastries, cakes and other sweets). Condiments / Spices: tea, coffee / cocoa, salt, garlic, spices, yeast / baking powder, lanwin, tomato / sauce, meat or fish as a condiment, condiments including small amount of milk / tea coffee.

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Figure 42: Five most frequently reported sources of food in the seven days prior to interview, at KR-I level ¹³⁷



Consumption-based Coping Strategies

Two types of coping strategies were assessed in this year's MSNA: **Consumption-based and livelihoods-based coping strategies**. This subsection examines consumption-based coping strategies, in which households were asked how many days in the week leading up to the interview they employed one of the following strategies:

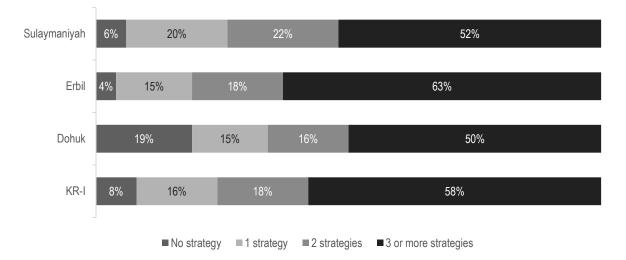
- Relying on less expensive food
- Limiting portions
- Reducing meals per day
- Borrowing food
- Reducing portion size for adults

Findings for this indicator reflect previous findings that households in Dohuk were less vulnerable to food insecurity, while those in Erbil were more likely to be food insecure. At the KR-I level, more than half of all households (58%) reported using three or more of the above strategies at least once in the week preceding the interview. This figure was higher in Erbil, with 63% of households reporting they used three or more consumption-based coping strategies than in the other two governorates, with 50% of households in Dohuk and 52% of households in Sulaymaniyah reporting to have used three or more such strategies (see Figure 43).

¹³⁷ Up to three responses possible. Findings might exceed 100%.

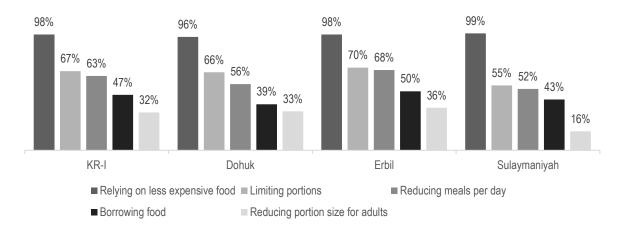


Figure 43: Proportion of households using a number of consumption-based coping strategies in the seven days prior to interview, by governorate



Findings suggest that more households reported using strategies limiting the intake of food (by means of limiting portions or reducing meals per day) than relying on support from others (see Figure 44). Almost all households reported buying cheaper food at least once a week (98%), with only small differences between the different governorates.

Figure 44: Proportion of households reporting using following types of consumption-based coping strategies, by governorate ¹³⁸



Livelihood-based Coping Strategies

The second type of coping strategies examined in this assessment was the use of livelihood-based coping strategies to buy food. Households were asked whether they had used any of the following coping strategies in the 30 days preceding the interview, which were categorised by level of severity:

¹³⁸ Households were asked how many days out of the seven prior to interview they had to apply each coping strategy. This graph shows the proportion of all households applying each strategy at least one day out of the seven prior to interview, so findings might exceed 100%.



Table 9: Classification of livelihood coping strategies ¹³⁹

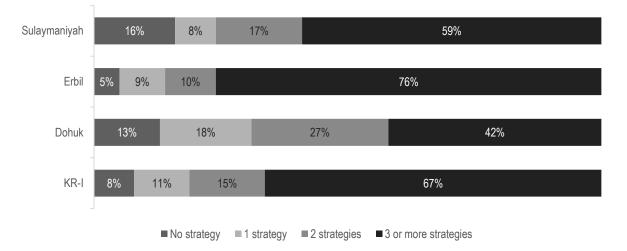
Classification	Type of coping strategy
Stress coping strategy	Buying food on credit
	Spending savings to buy food
	Reducing non-food expenditures
Crisis coping strategies	Selling property
	Selling means of transportation
	Child labour
	Changing to a cheaper accommodation
Emergency coping strategies	Children dropping out of school
	Adults engaging in illegal activities
	Whole family migrates
	Attending social events for food
	Child marriage
	Forced marriage for adults
	Begging

As with consumption-based coping strategies, the majority of households reported relying on multiple coping strategies. Two out of three households (67%) reported using three or more such strategies because they did not have enough money to buy food in the 30 days prior to interview (see Figure 45). Only 8% of households reported they did not need to resort to any coping strategies to be able to buy enough food. Correspondingly with previous findings, households in Erbil more frequently reported relying on three or more coping strategies (76%), compared to the other two governorates.



¹³⁹ The response options were: yes; no (because already used before the 30 days); no (not used); no (not applicable). The last option was selected if households did i.e. not possess a means of transportation to sell, did not have children in school-age to drop out of school, etc. For the analysis, the coping strategies were sorted into yes ('yes' and 'already used') and no ('not used' and 'not applicable'). For this report, the severity ranking of coping strategies was based on the Food Security Index developed by the World Food Programme (WFP) and aligned to the one used in the Multi-Cluster Needs Assessment IV (MCNA), undertaken by REACH in 2018, as this was developed with the Food Security Cluster, in accordance to the Iraq-specific context. More information here: <u>WFP's Consolidated Approach to Reporting Indicators of Food Security (CARI)</u>.

Figure 45: Proportion of households using a number of livelihood coping strategies in the 30 days prior to interview, by governorate



While a higher proportion of households in Erbil used multiple coping strategies, households in Sulaymaniyah more frequently reported using strategies with a higher severity classification (see Figure 46). For instance, 11% of households in Sulaymaniyah reported children dropping out of school to support incomegeneration or to reduce education-related costs to buy food instead, compared to 6% in Dohuk and 4% in Erbil. At the same time, more households in Sulaymaniyah (16%) and Dohuk (13%) reported using no coping strategies than in Erbil, where 5% of households reported using no livelihood coping mechanism at all.

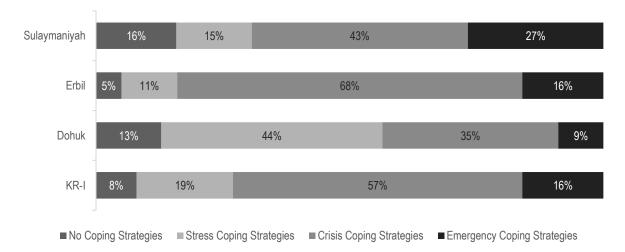


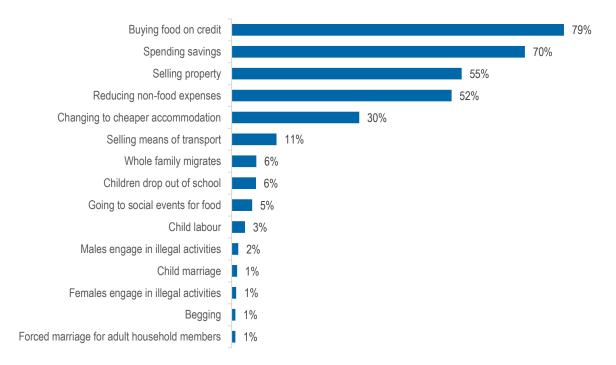
Figure 46: Severity of coping strategies used by household, by governorate ¹⁴⁰

In order to buy food, purchasing food on credit (used by 79% of all households) and using savings (70%) was widespread among households (see Figure 47). Food being the second most reported priority need (by 61% of all households) as well as the second most reported reason for households being in debt (by 12% of all households, see page 33), and more than half of all households often relying on multiple coping strategies to meet their food needs highlights that **food is a major monthly expenditure that these households are struggling to meet.**

¹⁴⁰ Most severe strategy determines overall household categorisation.



Figure 47: Proportion of households using types of livelihood coping strategies, at KR-I level 141



These figures reflect findings from other sectors regarding economic vulnerabilities of households impacting their ability to meet basic needs, such as food. Indeed, households which have already spent their savings or incurred large debts to meet basic needs such as food potentially risk being unable to absorb economic shocks, such as loss of a livelihood source, or unanticipated expenditures, such as emergency medical needs.

Health

This section gives an overview of the health needs of households, including recent and chronic health issues, reported access, and need for general healthcare services, specialised women's health services, as well as mental healthcare services.

Recent and Chronic Illnesses

Approximately half (49%) of all households reported having at least one member who suffered from a health issue in the month prior to being interviewed for this assessment (see Figure 48). The most frequently reported types of health issues were inflammation of the throat (44% of households reporting a health issue in the month prior to interview), followed by gynaecological issues (38%).¹⁴²

The proportion of households that reported a member having suffered from a health issue did not vary significantly by country of origin. However, this figure was slightly higher among households in Dohuk at 63%, but noticeably lower among those in Sulaymaniyah at 31% (see Figure 48). Almost half of all households in Erbil (49%) reported having at least one member with a health issues in the 30 days prior to interview. This suggests that the extent to which households incur medical expenses might vary geographically. Indeed, households in Dohuk reported an

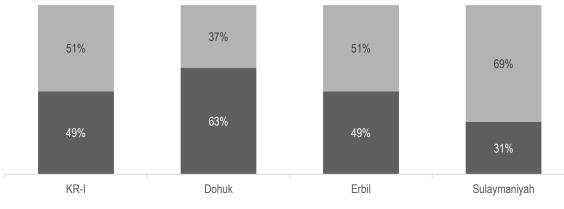
¹⁴² Multiple responses possible, so findings exceed 100%.



¹⁴¹ Subset of households reporting at least one member with a chronic illness (subset of 487 households). Multiple responses possible, so findings exceed 100%.

average of 13% of all monthly expenditure being spent on medical costs, compared to 8% in Erbil and 6% in Sulaymaniyah.

Figure 48: Proportion of households with at least one member suffering from a health issue in the last 30 days prior to interview, by governorate



■ Health issue ■ No health issue

In addition to these reported health issues, households reporting that at least one member was suffering from a chronic illness was relatively widespread in the KR-I, with one third of all households reporting at least one member suffering from a chronic illness (34%; see Figure 49). Households in Dohuk more frequently reported having a member with a chronic illness (41%), compared to Erbil (31%) and Sulaymaniyah (33%). Households in Dohuk reported spending a bigger proportion of their total monthly expenses on healthcare, (13% of total monthly expenditure), compared to 8% of the total expenditure reported by households in Erbil and 6% in Sulaymaniyah, further supporting the gaps related to medical care for households residing in this governorate. Iranian households more frequently reported having member with a chronic illness (41%), compared to Syrian (33%) and Turkish (35%) ones.¹⁴³ A possible explanation for this might be the higher proportion of older household members in Iranian households, which could suggest a higher level of vulnerability for these households regarding health needs due to potentially higher medical costs, more frequent visits to healthcare centres, and – if ill household members are possibly unable to contribute to household income through employment, for example.



31%

Erbil

No member with chronic illness

Figure 49: Proportion of households with at least one member with a chronic illness, by governorate

¹⁴³ Disaggregation by refugee group was not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.

41%

Dohuk

Member with chronic illness



34%

KR-I

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33%

Sulaymaniyah

Over half of the households with at least one member with a chronic illness reported this illness to be hypertension¹⁴⁴ (53%), followed by diabetes (38%) and heart disease (36%; see Figure 50).

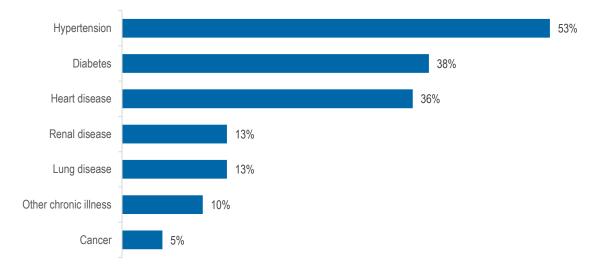


Figure 50: Most frequently reported types of chronic illness, at KR-I level 145

Syrian refugee households in 2018 MSNA more frequently reported chronic illnesses (33%) compared to 29% of households in the 2017 MSNA. However, when comparing the figures for the heads of these households suffering from chronic illnesses, there was a slight decrease from 17% in the 2017 MSNA to 13% in this year's assessment. So, while there was a higher proportion of Syrian households with at least one member suffering from a chronic illness, this issue was less frequently reported for heads of households in this year's assessment, which may impact upon the earning potential of Syrian refugee households, and therefore levels of economic vulnerability.

Availability of and Access to Health Services

This section is split into findings about primary healthcare provider of all households (see Figure 51), physical access to healthcare centres and hospitals for all households (see Figure 52), and households needing access to healthcare services in the 30 days prior to interview (see Figure 53). These findings include all households.

Approximately half of all households reported private clinics to be their primary healthcare provider (51%), while roughly four out of ten households used public facilities (41%) (see Figure 51). This figure was slightly higher for Iranian refugee households, of which 50% used public facilities. These figures highlight that although they have access to free, public healthcare as refugees, households reported choosing private healthcare services instead, which potentially adds an increased financial pressure to household expenditure.

145 Subset of households reporting at least one member with a chronic illness (subset of 487 households). Multiple responses possible, so findings exceed 100%.

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¹⁴⁴ Hypertension = high blood pressure.

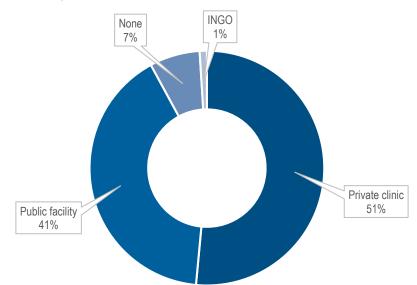


Figure 51: Primary healthcare provider, at KR-I level

In addition to Iranian households more frequently having at least one member suffering from a chronic illness, they also most frequently reported not having access to healthcare centres and hospitals. While 95% of Syrian households and 93% of Turkish households reported having access to hospitals and 95% of Syrian households and 94% of Turkish households to healthcare centres, a lower proportion of Iranian households reported having access to healthcare centres (83%) and hospitals (89%) (see Figure 52). In addition, households in Sulaymaniyah less frequently reported having access to hospitals (86%), compared to 96% of households in Erbil and 97% of those in Dohuk. Similarly, fewer households in Sulaymaniyah (80%) reported having access to a healthcare centre, compared to 97% of households in both Erbil and Dohuk. This suggests a higher level of vulnerability regarding medical access in this governorate, which could also potentially lead to greater costs of transportation in case of having to travel far to reach facilities offering healthcare services.

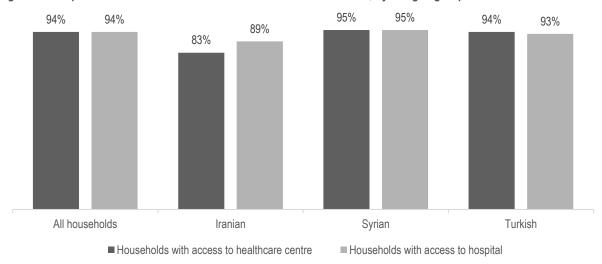
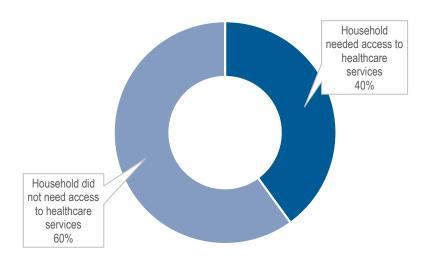


Figure 52: Proportion of households with access to healthcare services, by refugee group ¹⁴⁶

¹⁴⁶ Disaggregation by refugee group for the question of access to a hospital was not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.



Figure 53: Proportion of households needing access to healthcare services in the 30 days prior to interview, at KR-I level



Four out of ten households (40%) needed access to health facilities in the 30 days before the interview (see Figure 53). Correspondingly, 49% of households reported having health issues in the same time period, indicating a certain level of vulnerability of the affected households.

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Often, households needing access to healthcare services faced problems when trying to do so. **Overall, 74% of** households needing access to healthcare services in the 30 days prior to interview (40% of all households)¹⁴⁷ reported having problems when accessing healthcare services (see Figure 54). This figure was significantly higher in Sulaymaniyah (94%) than in Erbil (72%) and Dohuk (70%). As previously stated, reported availability of healthcare centres and hospitals was lower among households in Sulaymaniyah than in the other governorates (see page 61), which might explain households in Sulaymaniyah reporting they faced problems accessing healthcare services.

Similarly, Iranian households more frequently reported facing problems (85%) than Syrian (74%) and Turkish households (77%), which was also in line with less access to facilities (see Figure 52 on page 61). Furthermore, 'high income vulnerability' households more frequently reported problems (80%) than 'low income vulnerability' households (71%). This further reinforces the notion of Iranian households and households with 'high income vulnerability' being more vulnerable regarding medical needs. Also, accessing healthcare services was reportedly more difficult for households reporting having a private primary healthcare provider (51% of all households), of which 82% reported problems of access, compared to 61% of households that reported having a public primary healthcare provider (41% of all households) facing problems.

These findings suggest that Iranian households, those residing in Sulaymaniyah and 'high income vulnerability' households were most vulnerable regarding health issues, which was supported by 43% of all households reporting healthcare as one of their top priority needs.

¹⁴⁷ Subset of households needing access to healthcare services in the 30 days prior to interview (subset of 499 households).



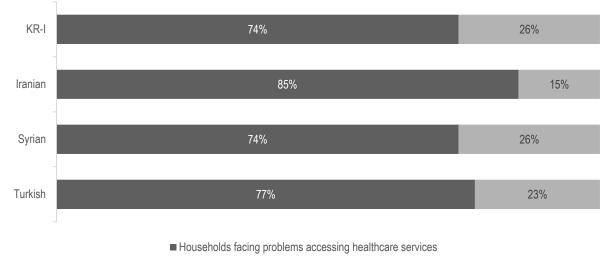


Figure 54: Proportion of households facing problems accessing healthcare services, by refugee group ¹⁴⁸

Households not facing problems accessing healthcare services

Reported problems accessing healthcare related to both physical access and limited financial means. While availability of healthcare centres and hospitals might impede households trying to access healthcare services, reported problems were primarily of a financial nature. Ninety-two percent (92%) of households facing problems accessing healthcare services (40% of all households) reported high healthcare costs¹⁴⁹ as a major barrier to access, followed by high medicine costs (34%) (see Figure 55). Syrian households more frequently reported high medicine cost as a problem (36% of those facing problems) than Iranian (11%) and Turkish households (26%). Furthermore, households accessing private healthcare providers more frequently mentioned high healthcare costs as a problem (96%) than those with a primary public healthcare provider (79%), reinforcing the fact that private healthcare providers offen cause a bigger financial burden. Households choosing private healthcare providers might lack awareness of free services at public health clinics, seek services that did not qualify for free treatment or it might be due to existing practices of preferring private services. However, to properly understand why households choose private healthcare services when public ones would be available, despite the additional cost incurred and household economic vulnerability, requires further assessment.

¹⁴⁸ Subset of households needing access to healthcare services in the 30 days prior to interview (subset of 499 households). Both disaggregation by refugee group and sex of head of household were not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.
¹⁴⁹ Although health services at public health facilities are free of charge, this may reflect perceived cost due to a lack of awareness of service entitlements, or additional costs associated with semi-private services, medication, or specific treatments.

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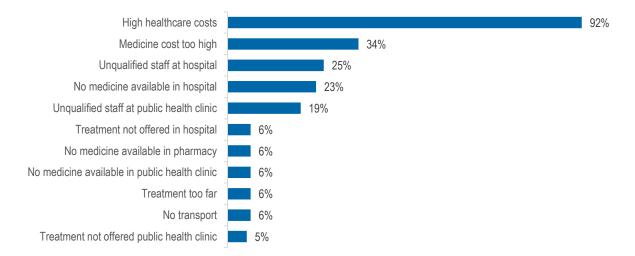


Figure 55: Most frequently reported problems when accessing healthcare services, at KR-I level ¹⁵⁰

Women's Specialised Healthcare Services

Roughly 17% of all households with girls or women over the age of 12 (1,167 households) reported being unaware of female members having access to specialised services for women (see Figure 56). This figure could in part be due to male respondents simply not knowing if female household members were able to access these services, or due to a general lack of awareness of male and female household members on this issue.¹⁵¹

Overall, 62% of households with female members of 12 years or older reported access to such services, which was significantly higher for Syrian households (64%) than Iranian ones (38%). For Turkish households, 50% of all households with a female member over 12 years reported access to specialised women's health services. In Dohuk, a higher proportion of households reported access (76%), compared to Erbil (60%) and Sulaymaniyah (47%), with these findings corresponding with a lower reported access to other healthcare services by Iranian households and those in Sulaymaniyah, as discussed above.

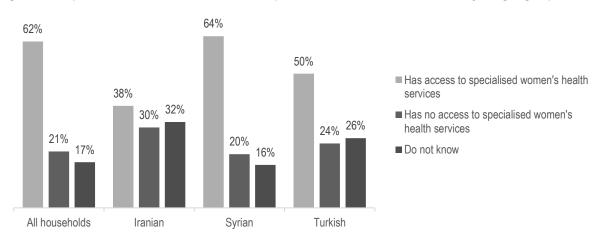


Figure 56: Proportion of households with access to specialised women's health services, by refugee group ¹⁵²

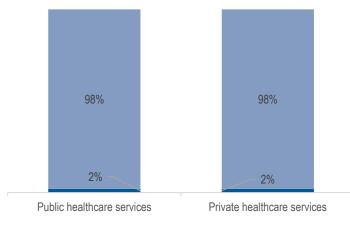
150 Subset of households needing access to healthcare services in the 30 days prior to interview (subset of 499 households). Multiple responses possible, so findings exceed 100%. Less frequently mentioned problems were: Refused treatment (1%), language barriers (1%), no referral from public health clinic (1%), gender discrimination and no support from family (both < 1%). ¹⁵¹ Disaggregating the findings across gender of the respondent did not give a statistically significant result (17% do not know for both male and female

¹⁵² Subset of households with female member of the age 12 or above (subset of 1,167 households).



respondents).

Figure 57: Proportion of households with female members of the age 12 years or older facing problems accessing public and private healthcare services, at KR-I level ¹⁵³



Women did not face problems accessing specialised healthcare services

■ Women faced problems accessing specialised healthcare services

The majority of female respondents (23% of all households were represented by a female member) did not report having any problems accessing public or private healthcare services (see Figure 57). However, even though this question was only asked to female respondents, a certain level of under-reporting may be assumed, due to the sensitive nature of this topic. In total, 2% of households reported that their female members over the age of 12 faced problems accessing public or private healthcare services.

There were two primary types of problems women faced when trying

to access healthcare services: denigratory comments and sexual harassment. A total of eight households (of the 364 households represented by female respondents that have at least one female household member of 12 years and older) reported that their female members faced denigratory comments when accessing public healthcare services, while two households reported encountering sexual harassment. Seven households (of the 364 households represented by female respondents that have at least one female household member of 12 years and older) reported by female respondents that have at least one female household member of 12 years and older) reported receiving denigratory comments and two households reported sexual harassment when accessing private healthcare services. This indicates that the type of healthcare provider did not have a significant influence on the prevalence of discriminatory treatment for women when accessing healthcare services.

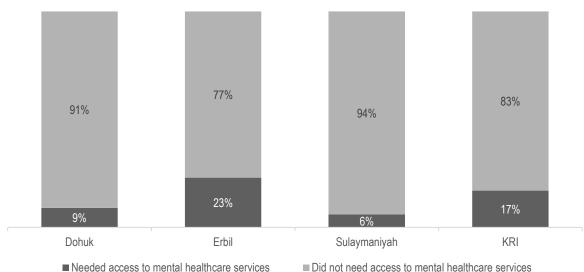
Access to Mental Healthcare Services

At the KR-I level, 17% of households reported at least one member needing access to mental healthcare services in the three months preceding the interview. The need to access mental healthcare services was more frequently reported by households in Erbil than in the other governorates (see Figure 58). Roughly a quarter (23%) of households in Erbil indicated this being needed, while in Dohuk this was 9% and in Sulaymaniyah 6%. However, considering that there might be a level of stigma around mental health issues, under-reporting might be a possibility.

¹⁵³ Subset of households with female respondents and female household members of 12 years and older (subset of 364 households).

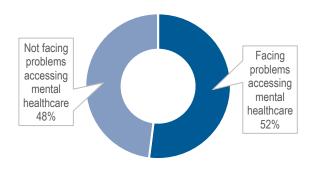


Figure 58: Proportion of households needing access to mental healthcare in the three months prior to the interview, by refugee group



Needed access to mental healthcare services

Figure 59: Proportion of households facing problems accessing mental healthcare, at KR-I level ¹⁵⁴



Similarly to other healthcare services, many households reported facing problems accessing mental healthcare services, with roughly half (52%) of the households needing access to such services reporting this to be the case (see Figure 59).

High costs were predominantly mentioned as the biggest obstacle to accessing these services (as reported by 98% of households reporting facing problems to access mental healthcare

services), highlighting that the problems faced by households in accessing all types of healthcare services were of a similar nature (see Figure 60). This suggests that economic vulnerabilities lie at the core of problems when households try to access mental healthcare services. The second and third most frequently mentioned types of problems households faced in accessing mental healthcare services were 'unqualified staff at hospital' (45% of households reporting facing problems) and 'unqualified staff at healthcare centre' (44% of households reporting facing problems).

154 Subset of households needing access to mental healthcare in the three months prior to interview (subset of 169 households).



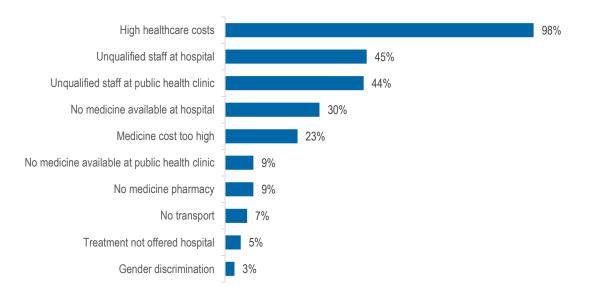


Figure 60: Most frequently reported problems when trying to access mental healthcare, at KR-I level ¹⁵⁵

These findings highlight the healthcare needs and vulnerabilities of households, with Iranian households and those in Sulaymaniyah particularly susceptible to challenges in accessing healthcare services. Furthermore, economically vulnerable households reported more problems in accessing healthcare. Additionally, as households in Dohuk more frequently reported household members having a chronic illness and indicated spending a larger proportion of monthly expenses on healthcare costs, this suggests households residing in Dohuk might be more economically vulnerable due to health needs.

Collectively, these findings give further understanding to the high frequency of households reporting medical care as a priority need (43%). Considering medical costs could potentially not only accrue on a regular basis (i.e. through doctor's visits and medication for chronically ill household members, check-ups for children, etc), but also in cases of emergencies (i.e. accidents, illnesses), these needs potentially place a further financial strain on these households, which is further compounded by high levels of debt (as highlighted by 79% of all households already in debt at the time of the interview).

Shelter

This section gives an overview of the needs regarding shelter, including the most prevalent types of accommodation and rental agreements, access to electricity and fuel, as well as the types of shelter problems as reported by households.

Accommodation Type

Most households reported residing either in houses (73%) or apartments (20%) (see Figure 61). Other types of accommodation (such as makeshift shelters, unfinished or damaged buildings, hotels, public or other non-residential buildings, containers or tents) were reported by a minority of refugee households (7% of all households at the KR-I level). Iranian refugee households more frequently reported living in houses (88%) than Syrian and Turkish households (72% respectively). Similarly, a higher proportion of Syrian (21%) and Turkish (22%) households reported living in apartments than Iranians (4%). As for differences between the three



¹⁵⁵ Subset of households needing access to mental healthcare in the three months prior to interview (subset of 169 households). Multiple responses possible, so findings exceed 100%. Less frequently reported problems were: Refused treatment (1%), treatment not offered at public health clinic (1%), problems with legal documentation and treatment too far away (< 1 %).

governorates, apartments were more frequently reported as an accommodation type in Dohuk (40%) than in Erbil (15%) and Sulaymaniyah (14%).

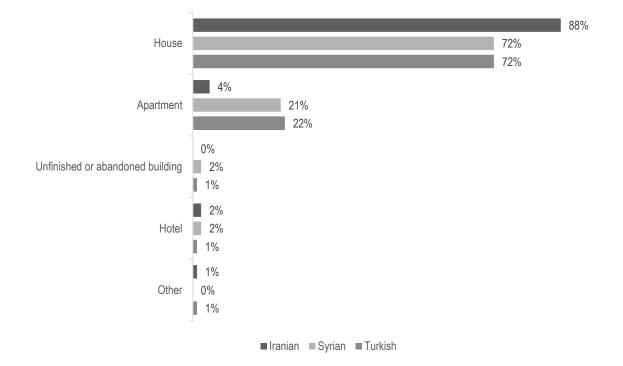


Figure 61: Five most frequently reported accommodation types, by refugee group 156

Rental Costs and Rental Agreements

For the majority of all households, rent comprised a considerable proportion of their monthly expenditure; 87% of households reported they rented using their own resources. This was noticeably more prevalent among Syrian households (at 92% of these households) compared to 56% of Iranian and 43% Turkish households (see Figure 62).

Correspondingly, owning their accommodation was reported by 26% of Turkish households and 17% of Iranian households, with a noticeably lower proportion of Syrian households reporting the same (1%). In addition, 10% of Turkish refugee households indicated providing for their accommodation through other means,¹⁵⁷ compared to 2% of Iranian households¹⁵⁸. While 11% of Iranian refugee households reported staying at their accommodation for free, 2% of all Syrian and 3% of all Turkish households reported this.¹⁵⁹ These findings highlight that there are some variations in the accommodation situations of the three different refugee groups, which could also reflect differences in shelter needs (for example, regarding tenancy rights) between the groups.¹⁶⁰

¹⁶⁰ More on this in the section on rental agreements, pages 67 and 68.



¹⁵⁶ Other accommodation types include: four households specifying 'room', two households 'fuel station shop', two households 'homeless', and one household 'restaurant'.

¹⁵⁷ This included 24 households that reported living in informal settlements in Dohuk governorate.

¹⁵⁸ No Syrian household reported paying for their accommodation with other means.

¹⁵⁹ For free = neither owning nor paying rent for their accommodation (for instance being hosted by family or friends).

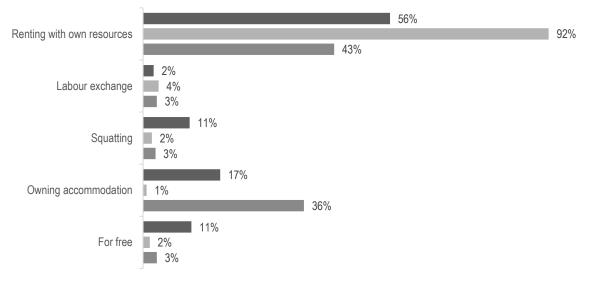
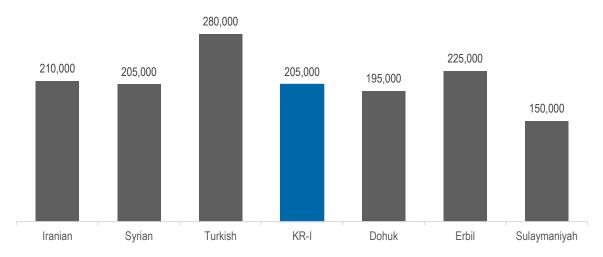


Figure 62: Five most frequently reported means of providing for accommodation, by refugee group

■ Iranian ■ Syrian ■ Turkish

On average, households reported spending 205,000 IQD, or 170 USD, per month on rent (see Figure 63).¹⁶¹ Turkish households reported paying a noticeably higher amount on monthly rent on average (280,000 IQD, or 235 USD) than Syrian households (205,000 IQD, or 170 USD).¹⁶² Iranian households spent on average 210,000 IQD, or 175 USD, on monthly rent. However, regarding how much rent as an expenditure item made up of the total monthly expenditure, Syrian refugee households. However, as roughly one third of all Turkish households reported owning their accommodation, this suggests high rent prices affect a smaller subset of this population.





Furthermore, the amount of money spent on rent per month varied significantly between the three governorates. In Erbil, households reported spending on average 225,000 IQD, or 190 USD, on rent per month, in Dohuk 195,000 IQD, or 165 USD, and in Sulaymaniyah noticeably less at 150,000 IQD, or 125

¹⁶² Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019. ¹⁶³ Figures in IQD have been rounded to the closest 5,000 mark.

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¹⁶⁴ Subset of households reporting renting their accommodation with their own means or with assistance (subset of 1,210 households).



¹⁶¹ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

USD.¹⁶⁵ Female-headed households reported spending on average 230,000 IQD, or 195 USD, on rent, while maleheaded households spent 205,000 IQD, or 170 USD.¹⁶⁶ Households with higher income vulnerability reported spending 195,000 IQD, or 165 USD, on monthly rent and households with lower income vulnerability 210,000 IQD, or 175 USD.¹⁶⁷

Reported average expenditure on rent prices did not significantly vary from reported rent figures in the 2017 MSNA III. In the past round of MSNA III in 2017, Syrian households reported spending 210,000 IQD, 175 USD, per month on rent, while in 2018 MSNA IV this figure was 205,000 IQD, or 170 USD.¹⁶⁸ However, the proportion of monthly expenditure on rent as reported by Syrian refugee households decreased slightly from 33% to 27% between 2017 and 2018.

The type of reported rental agreements varied considerably across governorates, which highlights differences in rental arrangements throughout the KR-I. Overall, 20% of households that rented their accommodation (949 or 88% of all households) did not have any verbal or written rental agreement (see Figure 64). This figure was significantly higher in Sulaymaniyah, with 47% of these households reporting not having any kind of agreement, while only 9% of households in Erbil reported not having an agreement. In Dohuk, 32% of households renting their accommodation reported not having a rental agreement at all.

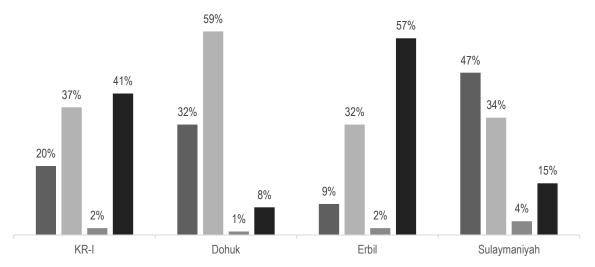


Figure 64: Type of rental agreements held by households, at KR-I level and disaggregated by governorate ¹⁶⁹

However, roughly one third of all households (27%) reported having a verbal agreement with the owner of their accommodation, with this type of agreement more frequently reported by households in Dohuk (59%), compared to 32% in Erbil and 34% in Sulaymaniyah. In Erbil, 57% of all households renting their accommodation reported having a valid, written agreement, which was significantly more than in Dohuk (8%) and Sulaymaniyah (15%). Absence of valid, written rental agreements could potential increase a household's vulnerability to being evicted or offer fewer legal options in addressing problems with their shelter.

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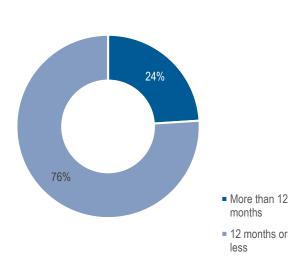


[■] No rental agreement ■ Verbal rental agreement ■ Written expired rental agreement ■ Written valid rental agreement

 ¹⁶⁵ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
 ¹⁶⁶ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
 ¹⁶⁷ Both disaggregation by sex of head of household and level of income vulnerability variations were not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing. Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.

¹⁶⁸ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.
¹⁶⁹ Subset of households reporting renting with their own resources or cash assistance (subset of 1,210 households).

Figure 65: Length of rental contracts, at KR-I level



Differences in length of rental contracts were only significant between the governorates, not for refugee groups.¹⁷⁰ Approximately three quarters (76%) of all households with a written agreement reported having contracts for 12 months or less (see Figure 65). Contracts tended to be longer in Sulaymaniyah, where 57% of households with a written agreement had a contract for more than 12 months. Longer renting agreements were notably less reported in Erbil (21% of households with a written agreement) and Dohuk (36%).

These figures highlight potential household vulnerabilities in regard to shelter. The absence of a written, valid rental agreement potentially opens doors to threats of eviction, unaddressed shelter issues, to a general insecurity regarding households' shelter situation.

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When comparing findings from the 2017 MSNA III, no significant change could be found for Syrian refugee households regarding the issue of a threat of eviction in the three months preceding data collection (4% in 2018 compared to 2% in 2017). Furthermore, in this year's assessment, the most frequently reported reason of households facing eviction (4% of all households) for receiving eviction threats was lack of funds (74% of households facing eviction), highlighting that economic vulnerabilities can potentially compound those faced by households in regard to their shelter situation.¹⁷¹

Access to Electricity and Fuel

Access to electricity was reported by almost all households (99%). Of households reporting to have access to electricity, many reported a mix of sources for electricity.¹⁷² These sources were primarily through a municipal connection (as reported by 98% of households) and a communal diesel generator (97%, see Figure 66). Only 4% of all households across the KR-I reported using private diesel generators as an electricity source.

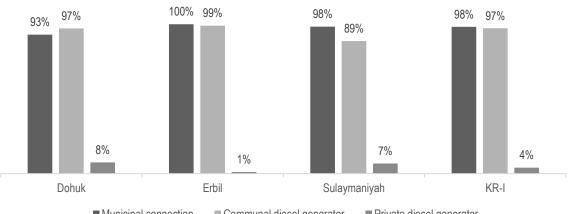
¹⁷¹ Subset of those households reporting facing eviction threats (subset of 40 households). Due to the small subset, these figures were not disaggregated at governorate or refugee group level. Multiple responses were possible, so findings might exceed 100%.

¹⁷² Subset of household reporting having access to electricity (subset of 1353 households). Multiple responses were possible, so findings might exceed 100%.



¹⁷⁰ Subset of households reporting having a written valid or expired rental agreement (subset of 326 households).

Figure 66: Source of electricity, by governorate ¹⁷³





Across all households assessed in 2018 MSNA IV, the period of time to which households had electricity was 10 hours or more for almost all households (99%). In Dohuk, 3% of households had less than 10 hours of daily electricity, which was a slightly higher proportion of households than in Sulaymaniyah (2%) and Erbil (1%). No significant difference could be established between the three refugee groups.

Compared to reported figures in the 2017 MSNA III, Syrian refugee households assessed in 2018 MSNA IV more frequently reported using private diesel generators as one of multiple sources of electricity (19%), and less often communal diesel generators (75%) and municipal connections (92%). Furthermore, households more often reported having longer access to electricity, with 99% of Syrian households reporting 10 hours or longer of electricity in 2018 MSNA IV compared to 83% in 2017 MSNA III, indicating an improvement in electricity services.

Cooking fuel was purchased most frequently as gas from either private vendors (76%) or the municipality (22%). In Sulaymaniyah, almost all households purchased their gas from private vendors (98%), which was also the case with the majority of Iranian and Turkish refugee households (86% and 82% respectively).

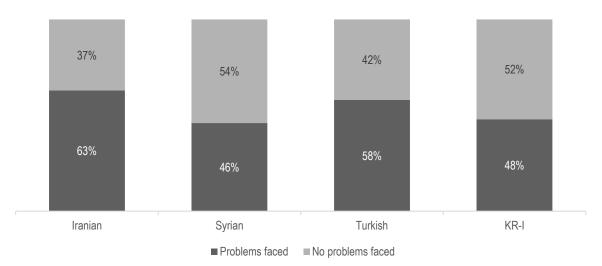
At the KR-I level, the vast majority of households (82%) reported heating with kerosene. This was more frequently reported by households in Sulaymaniyah (90%) than in Erbil (79%) and Dohuk (82%).

However, problems to access heating fuel for the households in the past winter period were reported by almost half of all households (48%), with this reported by a higher proportion of households in Sulaymaniyah (59%) than in Dohuk (42%) and Erbil (47%). Problems accessing heating fuel was also more frequently reported by Iranian (63%) and Turkish (58%) than by Syrian households (46%) (see Figure 67). That 'high income vulnerability' households also more frequently reported a shortage of fuel (55%) than 'low income vulnerability' households also more frequently reported a shortage of fuel (55%) than 'low income vulnerability' households also more frequently reported a shortage of fuel (55%) than 'low income vulnerability' households (44% reporting fuel shortage) might suggest that these households are limited in their financial means to purchase kerosene. These findings suggest that Iranian households and households in Sulaymaniyah were the ones predominantly reporting problems accessing fuel in the past winter period. In addition, with difficulties in accessing heating fuel reported by all three refugee groups, this suggests that even in a long-term protracted displacement, these kinds of shelter issues still remain a crucial need for refugee households.

¹⁷³ Subset of household reporting having access to electricity (subset of 1353 households). Multiple responses were possible, so findings exceed 100%.



Figure 67: Proportion of households facing problems accessing heating fuel in the last winter period, by refugee group



A third of all households that reported experiencing a heating fuel shortage did not heat their homes at all as a coping mechanism (see Figure 68). While households in Sulaymaniyah were more frequently affected by a heating fuel shortage, resorting to not heating homes at all was more widespread in Erbil (46%) than in Dohuk (23%) and Sulaymaniyah (5%).¹⁷⁴

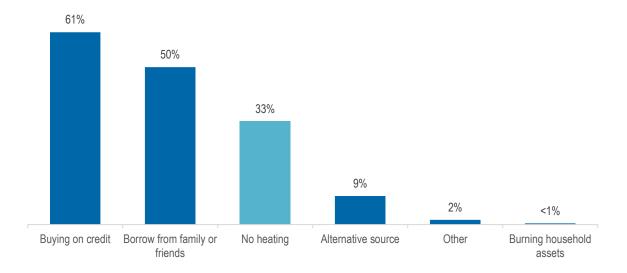


Figure 68: Most frequently reported coping mechanisms to manage shortage of heating fuel, at KR-I level ¹⁷⁵

Shelter Problems Observed

Even though households reported high proportion of monthly income being spent on rent, for roughly a quarter of all households (23%) the accommodation they inhabited was not in acceptable shape, with problems with their shelter being reported by households. Households in Dohuk were disproportionately affected by this, with 39% of households reporting problems, compared to households in Erbil (17%) and Sulaymaniyah (23%). No significant difference could be established between the three refugee groups. However,



¹⁷⁴ Subset of households reporting experiencing a shortage of heating fuel in the past winter period (subset of 745 households). Multiple responses were possible, so findings might exceed 100%.

¹⁷⁵ Subset of households reporting experiencing a shortage of heating fuel in the past winter period (subset of 745 households). Multiple responses were possible, so findings might exceed 100%.

households with a higher level of income vulnerability more frequently reported such problems than less vulnerable households (29% compared to 20% respectively), suggesting limited financial resources could impede households in fixing problems with their shelter. In addition, households that held a written, valid rental agreement (41% of all households) less frequently reported having shelter problems (15%). Of the households that only had a verbal agreement (37% of all households), 25% of households reported facing shelter problems. Of households that held no agreement at all (20% of all households), 30% of households reported facing shelter issues, which highlights an increased level of vulnerability regarding shelter conditions. This could be both due to lack of financial means to afford acceptable living standards, as well as lack of legal security due to absence of a valid, written rental agreement.

Of the shelter problems observed (See Figure 69), half of the most frequently reported shelter issues related to ensuring that the shelter was able to withstand seasonal changes, such as hot summers or cold winter periods; the five most frequently reported shelter issues¹⁷⁶ were leaking (as reported by 38% of all households), bad insulation (27%), openings in walls (27%), broken windows (22%) and no heating (14%). Considering the notable proportion of households reporting problems accessing winter fuel in the past winter period, these observed issues indicate that the severity of shelter vulnerabilities may vary seasonally.

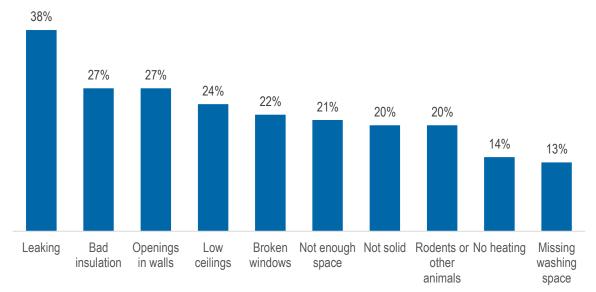


Figure 69: Ten most frequently reported shelter problems affecting households, at KR-I level ¹⁷⁷

This is further emphasized by findings concerning household core relief item (CRI) needs. The most frequently mentioned items were heating fuel (as reported by 42% of households) and blankets (32%). Additionally, winter kits (24%) and shelter support (21%) were among the top priority needs reported by households (see Figure 70). These findings suggest an increased level of vulnerability of households during the winter period, which could potentially be compounded by additional economic, legal and other shelter vulnerabilities faced by refugee households.

¹⁷⁶ Subset of HHs that reported facing shelter problems (subset of 342 households). Multiple responses possible, so findings may exceed 100%.
 ¹⁷⁷ Subset of HHs that reported facing shelter problems (subset of 342 households). Multiple responses possible, so findings may exceed 100%.

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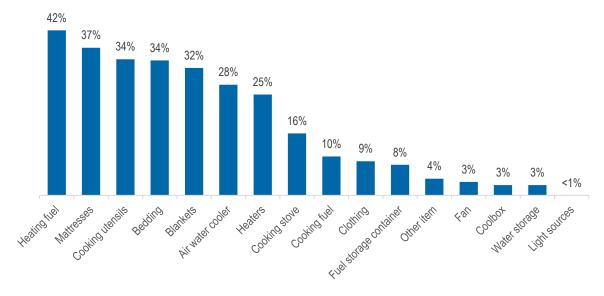


Figure 70: Most frequently reported CRI needs, at KR-I level ¹⁷⁸

WASH

This section gives an overview of the reported WASH needs of refugee households, including water access and quality, means and frequency of waste disposal, access to sanitary facilities, and access to hygiene items.

Water Access and Quality

Most households reported relying primarily on water (for both drinking and other household purposes) from networks and tanks, with only 13% of households relying on water from other sources (see Figures 71 and 72).¹⁷⁹ There were slight variations in drinking water sources among the three refugee groups, with Iranians primarily making use of private networks (46%), Syrians from tanks (43%), and Turkish from communal networks (31%). 9% of all households reported purchasing drinking water in the shop (see Figure 71).

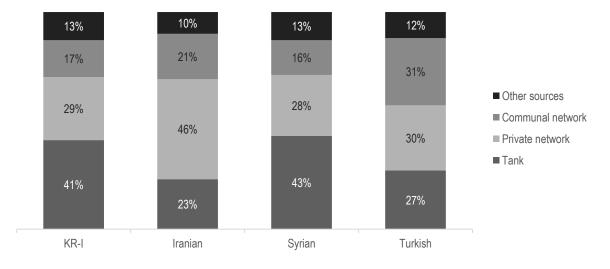


Figure 71: Primary source for drinking water, by refugee group 180

¹⁷⁸ Subset of households not choosing 'no CRI items needed' (subset of 1,211 households). Multiple responses possible, so findings may exceed 100%.

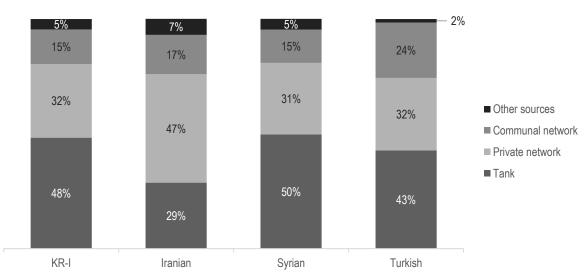
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¹⁷⁹ Other sources of drinking water include (% on KR-I level): Shop (9%), Water trucking (2%), Dug well (2%), River or spring (< 1%).

180 Other sources of drinking water include (% on KR-I level): Shop (9%), Water trucking (2%), Dug well (2%), River or spring (< 1%).



Figure 72: Primary source for household water, by refugee group 181



While sources from the WASH sector usually consider 50 litres per capita per day as the minimal standard for water (both for drinking and other hygiene use),¹⁸² findings from this year's MSNA indicated an average of 16 litres of drinking water per capita per day at KR-I level (see Table 10). It should be noted that this figure was self-reported (compared to the estimations of WASH experts), with households relying mostly on networks and tanks, and therefore potentially not measuring the exact amount of water available to them.

Refugee group	Average amount of drinking water available per
	capita per day (in litres)
Iranian	25
Syrian	15
Turkish	14

Table 10: Average amount of drinking water (in litres) available per capita per day, by refugee group 183

Roughly half of all households (47%) perceived their drinking water to be safe to drink without treatment (see Figure 73). Significant differences could be established between Sulaymaniyah governorate and the two other governorates. Households in Sulaymaniyah mostly perceived their water to be safe to drink without treatment (82%), compared to households in Dohuk (37%) and Erbil (41%).

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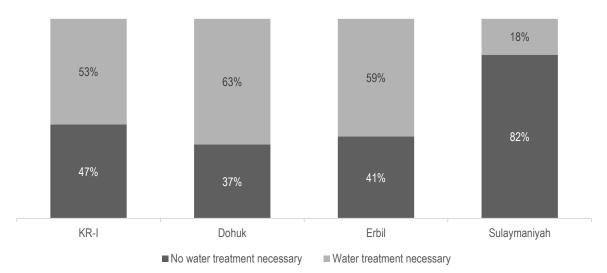


¹⁸¹ Other sources of household water include (% on KR-I level): Water trucking (2%), Dug well (2%), Shop (1%), River or spring (< 1%).

¹⁸² Cluster-defined minimum, see: REACH, MCNA VI WASH Factsheet, September 2018. Accessed 24 January 2019.

¹⁸³ Compared to other assessments and after discussion with sectoral leads on Shelter and WASH, these figures are significantly lower than usual. This suggests a problem in the data. It is suggested to take these figures as indicative only.





The use of a filtration system for drinking water was not reported to be widespread among refugee households (see Figure 74). Even though 53% of households reported treatment being necessary, 32% of these households still did not use any water treatment,¹⁸⁵ which suggests that even though households acknowledged their drinking water needed treatment, not all were able or willing to use a treatment method. Considering the observed financial pressure faced by households to meet basic expenditures, one reason for this could be a lack of financial means to purchase a filter system or drinking water from shops. Of those households that needed treatment of their water (53% of all households), the hand-held filter (HH filter) was the most frequently reported method (64%).

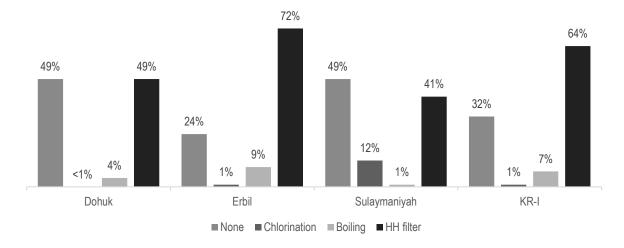


Figure 74: Frequently reported types of water filtration system, by governorate 186

Waste Disposal

Waste was collected at least once per week for most households, except for a minority of households. The majority of all households reported that household waste was mostly collected (93%) or thrown into a



¹⁸⁴ Subset of households excluding those buying drinking water from the shops (subset of 1,259 households). Households had the possibility to either choose 'not necessary' or multiple options of filtration procedures. Those choosing 'not necessary' could not choose a second option.

¹⁸⁵ Subset of households reporting water treatment being necessary (subset of 550 households).

¹⁸⁶ Subset of households reporting water treatment being necessary (subset of 550 households). Multiple responses were possible, so findings might exceed 100%.

communal bin (5%). The latter was frequently reported by households in Dohuk (21%), while a minority of households in Dohuk also reported throwing garbage into the street (5%; see Figure 75). **Most households reported waste being disposed at least once per week (97%)**. Two out of three households in Erbil indicated weekly waste disposal (64%), compared to 29% of households in Dohuk and 9% in Sulaymaniyah reporting waste being collected once per week. In Sulaymaniyah, 91% of households indicated waste being disposed every day, compared to 65% of households in Dohuk and 34% of households in Erbil having a daily waste disposal.

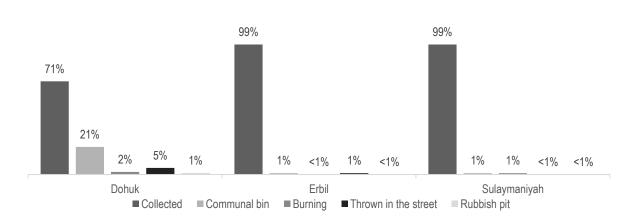
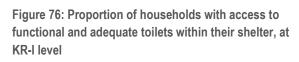


Figure 75: Most frequently reported methods of waste disposal, by governorate 187

Access to Sanitary Facilities

Access to functional and adequate toilets was wide-spread, with almost all (98%) households reporting this to be the case for them (see Figure 76). Two percent (2%) of households reported not having access, of which 15 households were in Erbil, 8 in Dohuk and 1 in Sulaymaniyah.

Overall, the vast majority of households reported having access to functional and adequate showers in their shelter (97%) (see Figure 77). Of the households with no access (3%), 16 households were in Erbil, 10 in Dohuk and 6 in Sulaymaniyah.



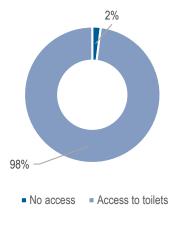
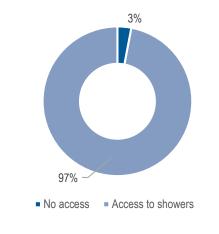


Figure 77: Proportion of households with access to functional and adequate showers within their shelter, at KR-I level

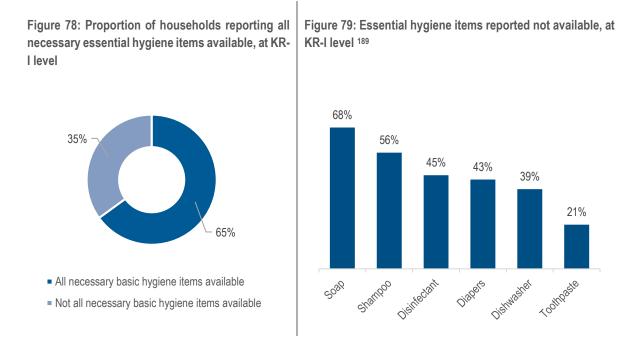


¹⁸⁷ Multiple responses possible, so findings may exceed 100%.



Access to Essential Hygiene Items

Overall, 65% of all households reported that all essential hygiene products were accessible to them (see Figure 78). Among the 35% households that were not able to access one or more essential hygiene items, the most frequently reported items were soap (68%), shampoo (56%), followed by disinfectant, as being inaccessible (see Figure 79).¹⁸⁸



Although most households reported having access to menstrual hygiene products (90% of households with female members of the age 12 or older and represented by a female respondent), this varied among the different governorates. In Dohuk and Sulaymaniyah only a small minority of households reported having no access (3% and 6% respectively), while a noticeably higher proportion of households in Erbil (18%) reported that they were not able to access menstrual hygiene items.

Access to essential hygiene items depended on the economic situation of the household. This could be seen in the significant difference between households with 'high' and 'low income vulnerability' if they were able to access all necessary essential hygiene items. Only half of all households classified as 'high income vulnerability' reported all items being accessible (52%), compared to 71% of 'low income vulnerability' households stating so. This is supported by findings that at the KR-I level, 95% of households not being able to access all essential hygiene items (35% of all households) reported the items being too expensive as the reason (see Figure 80).¹⁹⁰

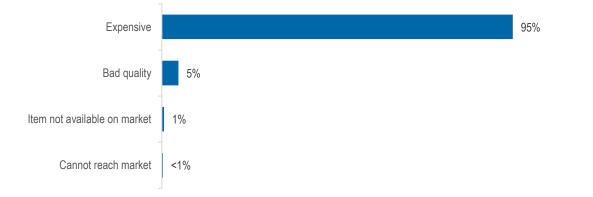
¹⁹⁰ Households responding 'none / all are available' to the question 'Which of these essential hygiene items is not accessible to your household?'.



¹⁸⁸ Subset of households excluding those reporting 'no essential hygiene items missing' (subset of 434 households). Multiple responses possible, so findings may exceed 100%.

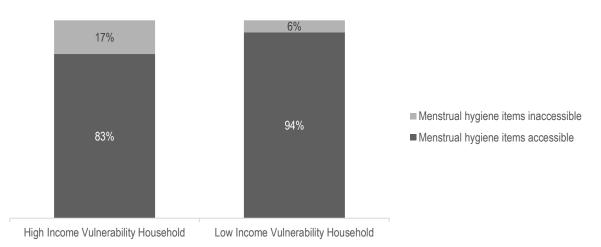
¹⁸⁹ Subset of households excluding those reporting 'no essential hygiene items missing' (subset of 434 households). Multiple responses possible, so findings may exceed 100%.

Figure 80: Most frequently reported reasons for essential hygiene items being inaccessible, at KR-I level ¹⁹¹



Similarly, 'high income vulnerability' households reported not having access to menstrual hygiene items (17% of households with female members of the age 12 or older, being classified as 'high income vulnerability'), compared to 6% of 'low income vulnerability' households reporting so (see Figure 81).¹⁹²

Figure 81: Proportion of households reporting access to menstrual hygiene items, by income vulnerability threshold ¹⁹³



Movement Intentions and Communication Needs

This section gives an overview on the movement intentions of households within the three months after data collection, reported needs and preference for communicating with aid providers, as well as most frequently reported CRI and priority needs.

Movement Intentions

Findings about future movement intentions showed that only 16% of households reported intending to move to another location within the three months following data collection (see Figure 82). This figure did not vary significantly between the different refugee groups, with 16% of both Syrian and Turkish and 14% of Iranian

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¹⁹² Subset of households with a female respondent for this survey and female household members older than 12 years old (subset of 364 households).
¹⁹³ Subset of households with a female respondent for this survey and female household members older than 12 years old (subset of 364 households).



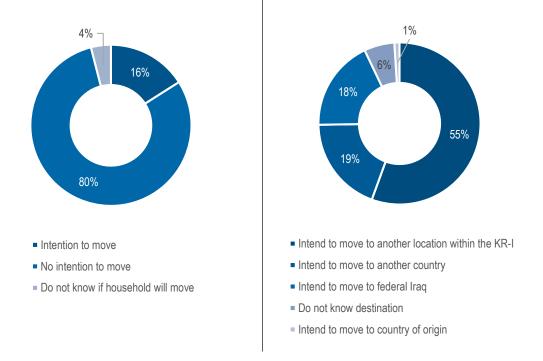
¹⁹¹ Subset of households excluding those reporting 'no essential hygiene items missing' (subset of 434 households). Multiple responses possible, so findings may exceed 100%.

Figure 83: Destination of intended move, at KR-I level

households reporting they intended to move with three months at the time of data collection¹⁹⁴, thereby highlighting the protracted nature of displacement by refugee households in the KR-I, regardless of country of origin.

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Figure 82: Proportion of households intending to move to another location within the three months following data collection, at KR-I level



Of the households reporting that they intended to move within the three months following the assessment (16% of all households), the intended place of movement was primarily in the KR-I, with 55% of households with movement intentions reporting so (see Figure 83). Three households reported intending to move back to their country of origin, of which two were Syrian and one was Turkish. Households in Sulaymaniyah frequently reported they were likely to move to another country (72%), while the majority of households in Erbil reported they intended to move within the KR-I (76%). In Dohuk, the intention to move to federal Iraq (37%) was higher than for households in Erbil (11%) and Sulaymaniyah (14%). Furthermore, Syrians intended to move within the KR-I significantly more often (59%) than Turkish (35%) and Iranian refugee households (8%).¹⁹⁶ Of all households intending to move within the KR-I, 12 households reported wanting to move to a camp.¹⁹⁷

Overwhelmingly, households intended to move for financial reasons, with a high cost of living (87%) and better work opportunities elsewhere (51%) being the two most frequently mentioned drivers across all three governorates¹⁹⁸, suggesting that financial pressures contribute to movement intentions (see Figure 84). However, in Sulaymaniyah, households also frequently mentioned wanting better service access (58%) and safety concerns (50%) as reasons why they wanted to move, compared to 21% of households in Erbil mentioning service access and 3% reporting security concerns as reasons to move. In Dohuk, 23% of households wanting to move mentioned better service access as an underlying reason, and 3% mentioned safety concerns.



¹⁹⁴ Refugee group variations were not statistically significant using ANOVA and Tukey's HSD multiple comparison statistical testing.

¹⁹⁵ Subset of all households indicating an intention to move to another location within the three months following data collection (subset of 232 households).
¹⁹⁶ Subset of all households indicating an intention to move to another location within the three months following data collection (subset of 232 households).

¹⁹⁷ Subset of all households intending to move within the KR-I (subset of 72 households).

¹⁹⁸ Subset of all households indicating an intention to move to another location within the three months following data collection (subset of 232 households). Multiple responses possible, so findings might exceed 100%.

Similarly, Iranian households more frequently cited service access (67% of Iranian households intending to move citing this as a movement reason) and safety concerns (41%) as movement reasons than the other two refugee groups, with 25% of Syrian households mentioning service access and 10% safety concerns. Forty-five percent of Turkish households indicating a moving intention reported better service access as a reason, and 11% safety concerns. These findings could indicate different community-level issues faced by Iranian refugee households.

Because of high cost of living87%For better employment opportunities51%For better service access28%To access healthcare27%To be closer to family18%Safety concerns11%Other reason1%

Figure 84: Most frequently reported reasons for a household intending to move to another location, at KR-I level ¹⁹⁹

Overall, the reported movement intentions suggest that most households will remain in their current location in the short term, indicating that needs that have been established in this assessment continue to be relevant, and established trends from 2017 to 2018 might well continue into 2019 and beyond.

Communication Needs

A majority of households reported wanting to receive information by aid providers on different support activities (95% of all households), which suggests that communication between aid providers and out of camp refugee communities is appreciated (see Figure 85). Of these 95% of households that expressed a desire to receive such information from aid providers, the most frequently reported type of information sought related to livelihoods (access to employment, income, etc.), as reported by 79% of households being open to receive information (95% of all households).

In addition, of the households wishing to receive information (95% of all households), many households also reported needs which often generate additional expenses such as healthcare (38%) and status of housing²⁰⁰ (28%). Despite the majority of households having been displaced for a number of years (68% of Iranian and 63% of Turkish refugee households having arrived in the KR-I at least ten years prior to this assessment), more than half of households still wished to receive information about assistance (52%). This suggests that there still might be gaps of knowledge regarding how to access certain services and livelihood opportunities.

These figures did not vary significantly between the three refugee groups, with the exception of Turkish households more often reporting requiring to receive information on where to get legal services (12%) or housing, land and property services (7%). This is supported by findings about Turkish household's increased legal documentation needs as discussed in the protection section. For instance, Turkish households more frequently reported having household members who never possessed legal documentation (24% of all Turkish households), had missing documentation (22%) or were not registered with UNHCR (16%).²⁰¹

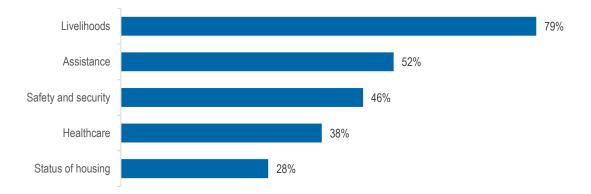
²⁰¹ See findings in protection section, page 38.



¹⁹⁹ Subset of all households indicating an intention to move to another location within the three months following data collection (subset of 232 households). Multiple responses possible, so findings might exceed 100%.

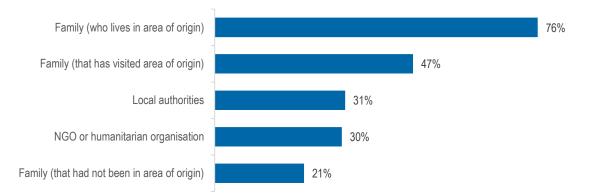
²⁰⁰ Status of housing = providing information about the household's shelter in their area of origin.

Figure 85: Five most frequently reported types of information households would like to receive from aid providers, at KR-I level ²⁰²



Across all refugee groups, the majority of all households reported relying on their family to receive information on the topics previously mentioned (72% of households mentioned close family as their information source (see Figure 86). Roughly a third of all households reported local authorities (31%) or NGOs and humanitarian organisations (30%) to be information sources.²⁰³

Figure 86: Five most frequently reported preferred sources of information, at KR-I level 204



The preferred mode of information as reported by households was by phone (71%). Half of all households also reported face to face communication as an important means to receive information. This suggests that both phone calls as well as direct communication were well-accepted means of communication for out-of-camp refugee households (see Figure 87).²⁰⁵

INPACT Shaping practices Influencing policies Impacting lives

²⁰⁴ Up to three responses possible, so findings may exceed 100%.

²⁰⁵ Up to three responses possible, so findings may exceed 100%.



²⁰² Subset of households not selecting 'none' to what type of information they wished to receive from aid providers (subset of 1,269 households). Multiple responses possible, so findings may exceed 100%.

²⁰³ Up to three responses possible, so findings may exceed 100%.

IMPACT Shaping practices Influencing policies Impacting lives

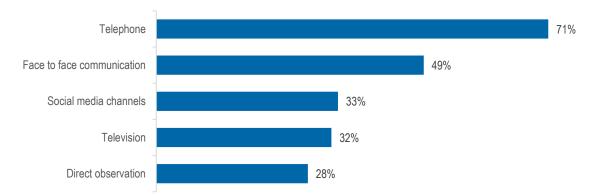


Figure 87: Five most frequently reported preferred mode of information for aid, at KR-I level ²⁰⁶

The three refugee groups reported different preferences for giving feedback to humanitarian actors regarding their services. Iranians most frequently reported preferring complaint boxes (38%), while Syrian households mostly reported the same for hotlines (44%). Almost half of all Turkish households (47%) reported that they preferred contacting aid providers directly to voice a complaint (see Figure 88).

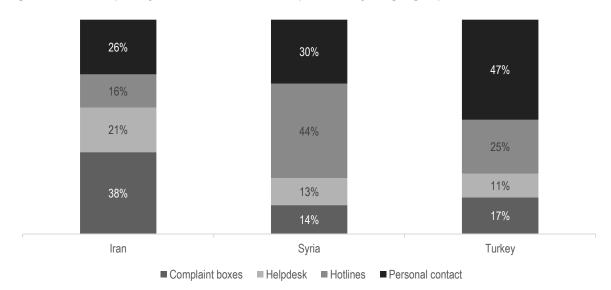


Figure 88: Preferred primary channel of feedback to aid providers, by refugee group

²⁰⁶ Up to three responses possible, so findings may exceed 100%.



Conclusion

Overall findings reflect that economic vulnerability lies at the core of many sectoral and overarching needs of refugee households living out of formal camps in the KR-I. With households across all three refugee groups and governorates facing an average monthly household deficit (5,000 IQD, or 5 USD), resorting to coping mechanisms to cover basic needs such as food and rent has become widespread. For instance, four out of five households indicated being in debt at the time of data collection (79%), with the average amount of total debt exceeding 2 million IQD, or 1,690 USD.²⁰⁷ These figures suggest a high level of chronic debt in light of continuous household deficits, especially during a period of protracted displacement. As findings for Iranian and Turkish refugee households (who on average have been displaced longer in the KR-I than Syrian households) highlight, debt as a coping mechanism is not necessarily a temporary measure, with the levels of debt that households have accumulated demonstrating a continuously high level of economic vulnerability of refugee households in the KR-I.

Across the KR-I and the different population groups, certain household profiles were captured that indicated greater levels of vulnerability, including female-headed households, and those that can be characterised by 'high income vulnerability', meaning households with less than 85,000 IQD, or 70 USD, of income available per capita per month ('high income vulnerability' households). Findings relating to household expenditures, debt, and use of coping strategies further emphasised the increased levels of economic vulnerability and overall household needs experienced by such groups.

For instance, 'high income vulnerability' households more frequently reported being in debt (92%) than the KR-I average (79%). Female-headed households more frequently reported having a head of household with a chronic disability or illness as well as being either single or widowed. Such vulnerabilities were further amplified by having no working household member disproportionately affecting female-headed households (32%) and 'high income vulnerability' households (27%), compared to the KR-I average (11%). These findings reflect that these households might face difficulties finding jobs or an inability to spend time outside the household to generate income (i.e. caring for minors, elders, members with disabilities, etc.) and could thus be seen as more vulnerable.

Against the backdrop of findings relating to economic vulnerability, refugee households were also found to have a number of multi-sectoral vulnerabilities. However, specific vulnerabilities stood out for the individual refugee groups, or across different governorates.

Refugee groups

Iranian refugee households

Iranian households reported above average levels of food insecurity (with 21% of households scoring 'food insecure' in the Food Security Index, compared to the KR-I average of 8%). While Iranian households less frequently reported resorting to multiple coping strategies to make up for a lack of income to buy food, the ones which were applied more often qualified as 'emergency' coping mechanisms, such as going to social events to avoid paying for food. Furthermore, Iranian households also reported spending a larger proportion of their total monthly expenditure on food and scored lower on the Food Consumption Score, suggesting a less balanced diet among these households.

Iranian households also showed a particularly high level of vulnerability regarding health issues, such as limited access to healthcare centres and hospitals, as well as more often facing problems when trying to access healthcare services. This was exacerbated by a higher prevalence of household members suffering from a chronic illness or disability compared to the other two groups, which could further put a strain on the household.

Syrian refugee households

Syrian refugee households faced vulnerabilities related to education, particularly for adolescent girls and boys. While formal education attendance rates of Turkish and Iranian refugee children between 12 and 17 years old only marginally decreased with age, Syrian refugee children (especially those between 15 and 17 years old)

²⁰⁷ Conversion from IQD to USD is based on the following conversion rate: 1 USD = 1,190.81 IQD, using XE currency converter. Accessed 24 January 2019.



dropped out of school in higher numbers (with only 32% of boys and 35% of girls in these age groups attending formal education). This could suggest that more recent displacement might disrupt children's education but that attendance rates might increase after more prolonged displacement. Furthermore, reported reasons for children dropping out of school raise child protection concerns, for instance the presence of child labour instead of attending school.

Economic insecurity seems to lie at the core of different sectoral needs but manifest itself differently across different refugee groups. In this case, Syrian childrens' absence from formal education was either directly related to households lacking financial means to cover education costs, or due to children needing to generate family income.

Turkish refugee households

Turkish refugee households more frequently reported that they faced legal issues than the other two refugee groups. These issues related to both renewing or issuing or legal documentation, as well as a higher level of mistrust for legal service providers (i.e. Asayesh or local police). For instance, 25% of Turkish households reported having at least one member who never possessed and 22% reported having at least one member with missing legal documentation. Furthermore, Turkish households also frequently reported needing legal advice from aid providers (with 12% of Turkish households wishing to receive information related to legal advice, compared to 9% of Iranian and 4% of Syrian households). This could suggest that a response including trust-building between this refugee group and service providers (both state and non-state) could be beneficial and help address the legal issues Turkish refugee households reported facing.

Governorate level

<u>Dohuk</u>

Households in Dohuk frequently reported members suffering from recent (63%) and chronic health issues (41%). In addition, they reported slightly above average proportions of monthly expenses being spent on healthcare costs (13% compared to the KR-I average of 9%). This suggests increased vulnerabilities regarding medical expenses.

Furthermore, households in Dohuk faced increased vulnerabilities regarding shelter problems compared to those in other governorates. This was further compounded by a more frequent reporting of the absence of valid, written rental agreements, suggesting possible legal insecurity regarding their accommodation.

Interestingly, one out of five households in Dohuk (20%) reported facing verbal harassment in the streets, which was juxtaposed to generally positive perceptions of support from the local community, with 98% of refugee households in Dohuk reporting local support as positive or neutral. However, households in Dohuk more frequently reported feeling uncomfortable approaching security forces such as Asayesh for information than in the other governorates, indicating a need for trust-building as part of the response.

<u>Erbil</u>

In Erbil, households more frequently reported struggling to provide food for their members. This was reflected in households more frequently resorting to coping mechanisms to make up for a lack of financial resources to buy food.

In addition, almost half of all households (42%) reported decreasing levels of hospitality in Erbil, suggesting increased tensions and a need for building trust between different community groups.

Furthermore, households in Erbil more frequently reported wanting access to mental healthcare services, indicating a need for such services.

Sulaymaniyah

Households in Sulaymaniyah showed high vulnerabilities related to healthcare. Almost all households that reported needing access to healthcare services had problems in doing so (94%), both related to costs as well as physical distance to healthcare facilities.



Households in Sulaymaniyah often relied on kerosene to heat their shelter, and disproportionately faced problems accessing this fuel in the previous winter period compared to households in the other two governorates, indicating vulnerabilities for future winter periods of these households.

While households constituting the three refugee groups and governorates in out-of-camp settings in the KR-I had varying sectoral needs and vulnerabilities, problems accessing income sources lay at the core of most issues. Households largely provided for their members through employment, but income from employment often did not suffice to cover all monthly and emergency expenditures. Thus, households often reported resorting to coping mechanisms such as spending savings, accruing debt, or taking their children out of school to help with income generating activities.

Financial means being unavailable to households affected their ability to fulfil needs in other sectors, such as accessing healthcare services if needed, fixing problems with their shelter, providing their household members with essential hygiene articles or a balanced and sufficient intake of food. Vulnerabilities such as these affected all refugee groups - Syrian households who arrived in the KR-I five to six years ago, as well as Iranian and Turkish households that have been in the KR-I for several decades - highlighting that multi-sectoral needs and vulnerabilities of out-of-camp refugee households in KR-I persist, with protracted displacement likely to continue.





Annexes

Annex 1: Household Questionnaire

Research questions	Research sub- question (if applicable)	IN #	Data collectio n method	Indicator group / sector	Indicator / Variable	Questionnaire Question	Instructi ons	Questionnaire Responses	Relevancy	MSN A III (con firm com para bilit y)	Inclu ded in MCN A as well?	Data coll ecti on level	Sampling	Long itudi nal analy sis	Disaggregati on - <u>First</u> <u>indicator /</u> <u>variable</u>	Disaggre gation - <u>Second</u> indicator / <u>variable</u>	Wei ghti ng?	Adju st for desig n effect ?	Signif icanc e test?	Maps plann ed?
N/A	N/A	1.1	Direct entry by enumera tor	Metadata	Enumerator ID	Enumerator ID code	Enter ID code	Integer		N/A	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	N/A	N/A	N/A	N/A
		1.2	Direct entry by enumera tor	Household profile	% of households by governorate they live in	What is the current governorate the household is in?	Select one	Dohuk Erbil Sulaymaniyah		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.3	Direct entry by enumera tor	Household profile	% of households by district they live in	In which district is the household located?	Select one	Admin list (of SDs)	Filtered by governorate	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.4	Direct entry by enumera tor	Household profile	Household coordinates	What are the household coordinates?	GPS Location	Integer		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	N/A	N/A	N/A	N/A
		1.5	HH survey	Household profile	Head of household	Are you the head of household?	Select one	Yes No		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.6	HH survey	Household profile	-	If no, are you willing and able to respond to the questions on behalf of the household?	Select one	Yes No	if 'no' to 1.5	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.7	HH survey	Household profile	Respondent identity	What is your name in Arabic?	Enter text	Text	if 'no' to 1.5	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.8	HH survey	Household profile	-	What is your name in English?	Enter text	Text	if 'no' to 1.5	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.9	HH survey	Household profile	Gender respondent	What is your gender?	Select one	Male Female	if 'no' to 1.5	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.10	HH survey	Household profile	Age respondent	What is your age?	Enter number	Integer	if 'no' to 1.5	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		1.11	HH survey	Household profile	Head of household identity	What is your name in Arabic?	Enter text	Text	if 'yes' to 1.5	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





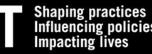
1.12	HH survey	Household profile		What is your name in English?	Enter text	Text	if 'yes' to 1.5	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.13	HH survey	Household profile	Gender head of household	What is the gender of the head of household?	Select one	Male Female	if 'yes' to 1.5	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.14	HH survey	Household profile	Age head of household	What is the age of the head of household?	Enter number	Integer	if 'yes' to 1.5	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.15	HH survey	Household profile	Marital status head of household	What is the marital status of the head of household?	Select one	Married Divorced Widowed Single Separated Spouse missing		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.16	HH survey	Household profile	Country of Origin	What is your case's country of origin?	Select one	Syria Iran Turkey		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.17	HH survey	Household profile	Average length of time households have resided in the KRI	When did the first member of your household arrive in KRI?	Enter month year	Text		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.18	HH survey	Household profile	% of household members belonging to the sampled case by age group and gender	What is the number of individuals within your case by age group and gender?	Enter number per category	Males 0-2 Females 0-2 Males 3-5 Females 3-5 Males 6-11 Females 6-11 Males 12-14 Females 12-14 Males 15-17 Females 15-17 Females 15-59 Males 60+ Female 60+		Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.19	HH survey	Household profile	% households living with non-case members	Are there any other cases residing in your household?	Select one	Yes No		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.20	HH survey	Household profile	% households living with non-case members, by population profile of non-case members	If you answered 'yes' to 1.19, what is the population profile of the non- case members?	Select multiple	Host community IDP Returnee Remainee Refugee (Svrian) Refugee (Turkish) Refugee (Idmer) Refugee (Idmer)	if 'yes' to 1.19	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.21	HH survey	Household profile	% households living with non-case members that are refugees	If you selected 'refugee' in 1.19, what is the case number(s) of other refugees living with you that are not members of your case?	Enter text	Text	if 'yes' to 1.19	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
1.22	HH survey	Household profile	% of non-case household members by age group and gender	What is the number of individuals of your household not in your case by age group and gender?	Enter number per category	Males 0-2 Females 0-2 Males 3-5 Females 3-5 Males 6-11 Females 6-11 Males [2-14 Females 12-14	if 'yes' to 1.19	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	_





							Females 15-17 Males 18-59 Females 18-59 Males 60+ Female 60+												
	1.23	HH survey	Duplicate check	% of non-case household members already interviewed	Do you know if any of these other cases have been interviewed by us (Impact Initiatives) in the past two weeks?	Select	Yes No	If 'yes' to 1.19. If other case members of the household have been interviewed recently, please end the interview	No	No	н	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	N
at are What are priority the priority ctoral education ds, and needs sequent among ups in refugees in	2.1	HH survey	Education	% of school-aged children (6-11 yrs. old) in HH attending formal primary education, by age and sex	How many children between the ages of 6-11 attended a formal primary education regularly the past school year?	Enter number per category	Males 6-11 Females 6-11	For all HHs with individuals between the age of 6-11	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	ľ
ammin KR-I host and communitie rvice s? ery, of gout of	2.2	HH survey	Education	% of school-aged children (12-17 yrs. old) in HH attending formal secondary education, by age and sex	How many children between the ages of 12-17 attended a formal secondary education regularly the past school year?	Enter number per category	Males 12-14 Females 12-14 Males 15-17 Females 15-17	For all HHs with individuals between the age of 12-17	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	1
mal nps in R-I?	2.3	HH survey	Education	% of school-aged children (6-11 yrs. old) in HH attending informal primary education activities, by age and sex	How many children between the ages of 6-11 attended/are attending an informal primary education regularly in the past school year?	Enter number per category	Males 6-11 Females 6-11	For all HHs with individuals between the age of 6-11	Yes	Yes	НН	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
	2.4	HH survey	Education	% of school-aged children (12-17 yrs. old) in HH attending informal secondary education activities, by age and sex	How many children between the ages of 12-17 attended/are attending an informal secondary education regularly in the past school year?	Enter number per category	Males 12-14 Females 12-14 Males 15-17 Females 15-17	For all HHs with individuals between the age of 12-17	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
	2.5	HH survey	Education	% of HH with children who have never attended school	Are there any children between the ages of 6-17 that have never attended school?	Enter number per category	Males 6-11 Females 6-11 Males 12-14 Females 12-14 Males 15-17 Females 15-17	For all HHs with individuals between the age of 6-17	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
	2.6	HH survey	Education	% of school-aged children (6-11 yrs. old) who have dropped out of formal education, by age	Of the children who do not attend formal education, how many have dropped out of school in the last year altogether?	Enter number	Integer	If 'no' to 2.1 or 2.3, and 'yes' to 2.5	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
	2.7	HH survey	Education	% of school-aged children (12-17 yrs. old) who have dropped out of formal education, by age	Of the children who do not attend formal education, how many have dropped out of school in the last year altogether?	Enter number	Integer	If 'no' to 2.1 or 2.3, and 'yes' to 2.5	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
	2.8	HH survey	Education	% of school-aged children (6-17 yrs. old) not attending formal education, or have dropped out, by primary reason	What is the primary reason that school-aged children (6-17 yrs. dd) in your household are not in formal or informal education?	Select One	Cannot afford to pay for tuition/costs No space in school' school did not answer/unable to register Schools not in good condition (problems with latrines, electricity, trumiture) Schools lack a suitable curriculum Schools lack draide teachers Schools lacked gender-appropriate staff Children need to stay at home and assist with household chores Household needs the child to participate in remunerative activities Recently or continuous displacement Do not consider education important Violent or unsafe environment for children in school	For HH with individuals between the age of 6-17 (male and female) that have never attended (2.5) or dropped out (2.6 and 2.7) of formal or informal education	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





								child is disabled, unhealthy, or traumatized child is disinterested Missed too much to make up school is too far or No transportation Language of Curriculum Other (please specify)												
		2.9	HH survey	Education	% of students (>17 years) enrolled in tertiary education	How many household members are enrolled in university or other tertiary education institution?	Enter number	Integer		Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		2.10	HH survey	Education	% of HH reporting type and level of available schools in the community	How far is the closest functioning primary school to your location?	Select one	within 2 km between 2-5 km away more than 5 km None that the household can access (movement restrictions/security) Don't Know of a functioning primary school		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		2.11	HH survey	Education		How far is the closest functioning secondary school to your location?	Select one	within 2 km between 2-5 km away more than 5 km None that the household can access (movement restrictions/security) Don't know of a functioning secondary school		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		2.12	HH survey	Education	% of HH reporting primary school in the community to be of sub-standard quality	What is the condition of the primary school building?	Select multiple	Overcrowded Lacking latrines Lacking recreational space Partially damaged but functional Fully functional - not damaged or occupied I don't know the condition		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		2.13	HH survey	Education	% of HH reporting secondary school in the community to be of sub-standard quality	What is the condition of the secondary school building?	Select Multiple	Overcrowded Lacking latrines Lacking recreational space Partially damaged but functional Fully functional - not damaged or occupied I don't know the condition		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
What are the priority sectoral needs, and subsequent	What are the priority protection needs among	3.1	HH survey	Protection	% of HH where at least one member is suffering from a disability, by age groups and type of	Does anyone in your household have a permanent disability which impacts their ability to carry out their day-to-day tasks independently?	Select one	Yes No Choose not to answer		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
gaps in programmin g and service delivery, of refugees	refugees in KR-I host communitie s?	3.2	HH survey	Protection	disability (To be put in health Sector with the related questions)	Does anyone in your household have a mental disability?	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
living out of formal camps in KR-I?	s?	3.3	HH survey	Protection		Does anyone in your household have a physical disability?	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.4	HH survey	Protection		Does anyone in your household have a visual disability?	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.5	HH survey	Protection		Does anyone in your household have an auditory disability?	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.6	HH survey	Protection		Does anyone in your household have a speech disability?	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





3.7	HH survey	Protection		Does anyone in your household have another disability? Please specify.	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'yes' to 3.1	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	N
3.8	HH survey	Protection	-	Does the head of this household suffer from a permanent disability?	Select one	Yes No Choose not to answer	If 'yes' to 3.1	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of	Yes	Yes	Yes	
3.9	HH survey	Protection	-	Which permanent disability does the head of household suffer from?	Select multiple	Mental disability Physical disability Visual disability Auditory disability Speech disability Other disability	If 'yes' to 3.8	No	No	HH	Stratified simple random	No	Governorate	Origin) Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.10	HH survey	Protection	% of households with at least one member missing civil documentation	Are there any household members that were never in possession of any civil documents?	Enter number	Males 0-2 Fernales 0-2 Males 3-5 Fernales 3-5 Fernales 3-5 Males 6-11 Fernales 6-11 Males 12-14 Fernales 12-14 Males 15-17 Fernales 15-17 Males 15-59 Fernales 18-59 Males 60+ Fernale 60+		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.11	HH survey	Protection	-	Are the civil documents of any members of your household lost, damaged or expired?	Select One	Yes No Don't know		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.12	HH survey	Protection	_	Which types of documentation are missing?	Select multiple	Passport National ID card UNHCR registration card KRI residency card Information card Birth certificate Divorce certificate Divorce certificate Death certificate Cuardianship certificate Inheritance deed Graduation / school certificate Driver license Other (specify)	If 'yes' to 3.10 and 3.11	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.13	HH survey	Protection		What is the reason for missing documentation?	Select multiple	Damaged Lost Confiscated Expired (dirfiscated Exbired apply (not ware to the process) Not able to apply (could not afford the costs) Not able to apply (acutad certain other missing documents) Not able to apply (authorities uncooperative) Not able to apply (acuta of Origin inaccessible) Applied but did not obtain Other	If 'yes' in 3.10 and 3.11	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.14	HH survey	Protection	% of HH accessing humanitarian legal aid services	If you need legal advice, which of the following services do you approach?	Select multiple	Not applicable (I don't need legal advice) Assayesh Police Local Court Humanitrain NGOs Private Lawyer Other		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





3.15	HH survey	Protection	% of HH accessing UNHCR registration services	Are any of the household members not registered with UNHCR?	Select one	Yes No Don't know Decline to answer		No	No	нн	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	N
3.16	HH survey	Protection	-	Please rank the reasons for no registration with UNHCR according to importance.	Rank	Unaware of procedures Distance Lack of Transport Lack of trust in UNHCR Lack of interest (I don't see the benefit) Other (please specify)	If 'yes' in 3.15	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	1
3.17	HH survey	Protection	% of HH experiencing daytime movement restrictions during the last three months	During the last three months, has anyone in your HH experienced restrictions in their ability to move freely in your area in day light?	Select One	Yes No Do not know Decline to answer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.18	HH survey	Protection	Primary movement restrictions, among those experiencing restrictions (top 3)	What are the movement restrictions they have faced?	Select multiple	Needing to obtain security dearance/coupons Needing to show ID documents to civilian authorities or security actors Time restrictions on when to leave and return Needing to provide a specific reason for movement (e.g. employment, medical, school) Physical road block Harassment by host community Other (specify)	If 'yes' to 3.17	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.19	HH survey	Protection	Survivors' use of GBV services	Where do women and girls in your HH feel safe and comfortable to receive services after a gender- based incident of violence directed towards them?	Select multiple	Health facility Women centre Ministry/Directorate of Labour and Social Affairs (MoLSA/DoLSA) Private lawyer or humanitarian legal assistance partner Other (specify) Don't know Declined to answer	Only if gender of respondent is 'female' (given cultural sensitivities)	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.20	HH survey	Protection	Participation in community support groups	Have any of your HH members participated in any community-led support activities?	Select multiple	Psychosocial support Livelihood activities Recreational activities Other (specify) Don't know Decline to answer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.21	HH survey	Protection	% of HH caring for separated children	Is your household caring for any separated child?	Select one	Ves No Choose not to answer	For all HHs with individuals under 18 years	Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.22	HH survey	Protection	% of households with presence of child marriage	Are any household members under the age of 18 married?	Select one	Yes No choose not to answer	,	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.23	HH survey	Protection	_	How many members per age category	Enter number per category	Males 6-11 Females 6-11 Males 12-14 Females 12-14 Males 15-17 Females 15-17	If 'yes' to 3.22	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.24	HH survey	Protection	% of HH reporting perceived variations in levels of hospitality over 3 months recall period	Over the last 3 months, in what way has hospitality towards refugees changed in your area?	Select one	Levels of hospitality have increased Levels of hospitality have decreased No change Choose not to answer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.25	HH survey	Protection	% of HH perceiving risk at community level	Do you feel that any members of your community are at risk of any of the following?	Select Multiple	Verbal harassment Physical violence Sexual Violence/Sexual Assault Other None		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
3.26	HH survey	Protection		Which group of people are affected by these problems?	Select Multiple	Women Men Boys Girls	In case of any other answer than 'none' in 3.25	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





		3.27	HH survey	Protection	% of HH involved in civil disputes over land, shelter and housing, family/social issues and	Have you or any other member of your household been involved in any civil or legal disputes over the last 3 months?	Select one	Yes No Choose not to answer		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.28	HH survey	Protection	employment/jobs	What were these disputes over?	Select multiple	Land ownership Shelter and housing Farrily and/or social issues Employment/jobs Other (specify)	If 'yes' to 3.27	Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.29	HH survey	Protection	% of HH lacking trust in local service providers or institutions	Which of the following service providers or institutions do you not feel comfortable approaching?	Select multiple	Assayesh Local police Courts Municipality Office Directorate of Combatting Volence against Women (DCVAW) None (I feel comfortable approaching all of these services) Choose not to answer		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		3.30	HH survey	Protection	% of HH according to perceived degree of support from local community	How would you rate the degree of support you have received from your local community since you arrived in the area?	Select one	Very good: Extremely helpful and welcoming Good: welcoming and supportive with problems Neither good nor bad Bad: the community is not welcoming at all Extremely bad: the community is hostile		Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
the priority the sectoral live needs, and subsequent a gaps in ref programmin Ki	What are he priority velihoods needs among efugees in KR-I host ommunitie s?	4.1	HH survey	Livelihoods	Primary financial source(s) in the past 30 days (top 3)	What were your household's primary sources of income/money over the last 30 days?	Select three	Employment (activity generating a salary) Remittances Retirement Fund or Pension Selling Household Assets Selling Assistance Received Loans, Dett MOM Cash Assistance Support from community, friends, family NGO or charity Assistance Mosque or church donations Social Services (disability allowance) Illegad or socially degrading activities (e.g. unlawful sales, survival sex, begging, etc.)		No	Yes	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.2	HH survey	Livelihoods	Primary source of employment (top 3)	What were the primary sources of occupation / employment?	Select three	Agricultural Construction Service industry (lanitor, waiter, etc.) Vocational (carpenter, electrician, plumber, or other professional) Teacher, lawyer, engineer Public security offical (police, military, etc.) Tavi or truck driver Small business owner Government Job (not otherwise listed) Home-based income-generating addity(sewing, shoe repair, small agricultural addity (gaving, shoe repair, small agricultural addity (gaving, beekeping, etc.)) Other (jolease specify)	If 'employment ' was chosen as a primary income source 4.1	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.3	HH survey	Livelihoods	% of HH whose employment income sources are seasonal/temporary	Are any of these employment sources seasonal or temporary?	Select One	Vere (please specify) Yes No Don't know Decline to answer	If 'employment ' was chosen as a primary income source 4.1	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.4	HH survey	Livelihoods		If any employment source is seasonal or temporary, please specify which one.	Enter text	Text	If selected 'yes' to 4.3	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.5	HH survey	Livelihoods	Primary HH livelihood sources prior to displacement (top 3 answers)	What were your household's primary livelihood sources prior to your displacement? (up to 3)	Select Three	Savings Employment Remitances Retirement Fund or Pension Selling Household Assets Selling Assistance Received Loans, Dett MOM Cash Assistance		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





						Support from community, friends, family NGO or charity assistance Mosque or church donations Social Services (disability allowance) Illegal or socially degrading activities (e.g., unlawful sales, survival sex, begging, etc.) Other (please specify) Not applicable (too young prior too displacement)												
4.6	HH survey	Livelihoods	Demographics of HH members working in the last 30 days % of households with children (aged 6-17) working during the previous 30 days	By age and gender category, how many members of your HH worked during the last 30 days?	Enter number per category	Male 6-17 Female 6-17 Male 18-59 Female 18-59 Male above 60 Female above 60	For HH members 6 years or older	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.7	HH survey	Livelihoods	Mean/median employment wage per demographic group in the past 30 days	By age and gender category, how much was the total employment income in IQD over the last 30 days?	Enter number	Integer	For HH members 6 years or older who have worked during the last 30 days	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.8	HH survey	Livelihoods	Total income in IQD from employment in the past 30 days	What was the total employment income of the household in Iraqi Dinars over the last 30 days?	Enter number	Integer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.9	HH survey	Livelihoods	Primary barriers to employment for those currently looking for opportunities	What obstacles, if any, do household members face in finding work?	Select multiple	Increased competition for jobs Not enough jobs for everyone Available jobs are too far away Only low-skilled, socially degrading, dangerous, or low- paid jobs are available Underqualified for available jobs Lack of familypersonal connections Other (please specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.10	HH survey	Livelihoods	Mean/median HH total income from non-employment sources in the past 30 days	What was your household's total income from other sources in Iraqi Dinars over the last 30 days for all money including remittances, humanitarian aid (excluding savings and debt)?	Enter number	Integer		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.11	HH survey	Livelihoods	Total income in IQD from all sources in the past 30 days	What was your household's total income in Iraqi Dinars (from all sources including humanitarian assistance but excluding savings and debt) over the last 30 days?	Calculat ed	Integer	Sum of 4.8 and 4.10	Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.12	HH survey	Livelihoods	Mean/Median HH expenditure on basic needs over the last 30 days (in IQDs)	By category, in ICD, how much did you spend on basic needs over the last 30 days?	Enter number per category	Rent Shelter maintenance Food Electricity Medical care (including medicines) Education Water Colothing Basic household items (blankets) Transportation Communication Debt payment Productive assets Other (describe)		Yes	Yes	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.13	HH survey	Livelihoods		In total, in IQD, how much did your HH spend on basic needs over the last 30 days?	Calculat ed	Integer	Sum of 4.12 responses	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
4.14	HH survey	Livelihoods	Mean/Median HH total amount of debt in IQDs	What is your household's total amount of debt, in IQD?	Enter number	Integer		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





		4.15	нн	Livelihoods	Primary reasons to	What was the primary reason	Select	Basic household expenditures (rent, utilities)	If debt	No	Yes	HH	Stratified	No	Governorate	Refugee	Yes	Yes	Yes	No
			survey		take on debt (top 3)	behind taking on debt?	three	Healthcare Food Education Clothing or NFIs Purchasing productive assets for small business or income-generating activities other (specify)	amount > 0 IQD in 4.14				simple random			population (by Country of Origin)				
		4.16	HH survey	Livelihoods	Primary money lending sources, among households in debt	Who did you borrow money from? (select all that apply)	Select multiple	From the shop for basic needs Borrowing From friends or relatives Borrowing From the bank or financial institution Other (specify)	If debt amount > 0 IQD in 4.14	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.17	HH survey	Livelihoods	% of HH reporting access to a functioning market within 5km	How far is the closest functioning market?	Select one	Less than 2 km Between 2-5 km More than 5 km away		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		4.18	HH survey	Livelihoods	Availability of items in closest functioning market	What is available in the closest functioning market? (select all that are available)	Select multiple	Basic food items Water Basic household items (e.g., mattress, blankets, kitchen utensils) Tools, hardware and materials Hygiene items Basic medicine Other (specify)		No	Yes	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
the priority sectoral she needs, and nee subsequent arm gaps in refuge g and comm service s delivery, of refugees living out of	at are priority letter eeds nong gees in -1 host munitie s?	5.1	Direct entry by enumera tor	Shelter	% of HH by accommodation type and modes of provision	In what type of accommodation is your household currently living?	Select	House Apartment Hotel Unfinished or abandoned Residential building Damaged Residential building Open Air Tent Religious building Public building (school, etc.) Non-Residential structure (garage, farm House, shop) Container Makeshift shelter (with scavenged materials)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
formal camps in KR-I?		5.2	HH survey	Shelter	-	How are you currently providing for your accommodation?	Select one	Other (specify) Renting with own resources Renting with cash assistance or received subsidies Squatting Provided for free by host family Provided in exchange for labour Owned Other (specify)		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		5.3	HH survey	Shelter	Mean and medium cost of monthly rent	How much do you pay per month for rent (in IQD)?	Enter number	Integer	If selected 'renting' in 5.2	Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	_	5.4	HH survey	Shelter	% of HH by owner/rentier status, by type and length	What type of rental agreement do you have with your landlord?	Select one	No tenancy agreement Written valid tenancy agreement (not expired) Written valid tenancy agreement (expired) Verbal tenancy agreement Do not know	If selected 'renting' in 5.2	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		5.5	HH survey	Shelter	_	What is the length of this rental contract in months?	Select one	0 to 2 months 3 to 5 months 6 to 12 months more than 12 months	If 'yes' in 5.2	Yes	No	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	_	5.6	HH survey	Shelter	% of HH threatened with eviction over the last 90 days	Have you been threatened with eviction over the last 90 days?	Select one	Yes No Choose not to answer		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		5.7	HH survey	Shelter	Primary causes that would lead the HH to be evicted	What were the main reasons given for eviction?	Select three	Lack of funds to pay rental costs Host family no longer able to host our household Local community does not accept our family living in the area Authorities requested our household to leave	If 'yes; in 5.6	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





						Request to vacate from owner of building/land Other (specify)												
5.8	HH survey	Shelter	Average living space square meter /person	How many square metres is the accommodation in which your household resides?	Enter number	Integer		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.9	HH survey	Shelter	% of HH with electricity connection by source	Does your household have an electricity connection?	Select one	Yes No Choose not to answer		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.10	HH survey	Shelter		What is the source of this electricity?	Select multiple	Private diesel generator Communal diesel generator Municipal connection Other (specify)	If 'yes' in 5.9	Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.11	HH survey	Shelter	Average amount of time in hours of electricity per day, by district	How many hours per day do you have access to electricity?	Select one	Less than 2 hours 2-6 hours 6-10 hours More than 10 hours		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.12	HH survey	Shelter	% of HH by main source of cooking fuel	What is this household's main source of cooking fuel?	Select one	Gas bottles bought from government Gas bottles bought from private sector Municipal electricity connection Electricity from diesel generator Kercesene Burning wood Coal Other (specify)		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.13	HH survey	Shelter	% of HH by main source of heating fuel	What is this household's main source of heating fuel during the winter period?	Select one	Municipal gas Municipal gas Gas bottles bought from government Gas bottles bought from private sectors Electricity from diesel generator municipality ledtericity network Kerosene Burning wood Coal Other (specify)		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.14	HH survey	Shelter	Access to heating fuel	In the past winter period, did you face any problem with accessing heating fuel?	Select one	Yes No		Yes	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.15	HH survey	Shelter	% of HH that have applied coping strategies when experiencing fuel shortage, by type of coping strategy	If you had problems with accessing heating fuel during the last winter period, what did you do to overcome this?	Select one	Used an alternative source of fuel Borrowed from familyfriends Received fuel on credit Did not heat the household Burned household assets to heat Other (specify)		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
5.16	HH survey	Shelter	% of HH facing problems with their shelter by problem	Please specify if any of the following problems with shelter are observed.	Select multiple	No issues Contamination from explosive hazards Land at risk of flooding or landslides Solid waste dumping site Fire risk Shelter located in an insecure! joolated area Shelter not solid enough to offer protection from intruders Not fenced Without security of tenure No separate rooms Not enough space(Lack of space inside shelter (min 5,5m2 per person incl. space for kitchen and wash facilities) Low/migh ceilings Lack of lightning (natural lighting) Leaking roof during rain Shelter poorly insulated (furto heat/cold/humidity) Opening on the walls Broken Windows		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





							1													
								Lack / Limited ventilation (minimum 1m2 opening on one side of house, 0.5m2 on other) Lack of heating (missing heating system) No electrical connection Missings/ubstandard Washing Facilities Lack of access to cooking facilities Signs of failure (Leaning walls, Cracks in the walls) Bends in structural components (beam, siab, column, rafter, purin and wall) Rodents or other animals Other (specify)												
the priority the sectoral needs, and sa subsequent and gaps in (1 programmin	What are he priority water, sanitation nd hygiene (WASH) needs among	6.1	HH survey	WASH	% of HH by primary source of drinking water	Currently, what is your household's primary source of drinking water?	Select	Water tank (shared or private) Public Network (private access) Public Network (comunual access) Water Trucking Dug well River/Spring Purchased from Shop Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
service ref delivery, of K	efugees in KR-I host ommunitie s?	6.2	HH survey	WASH	Average number of litres of drinking water /person available to HH	How many litres of drinking water are available per HH member per day, on average?	Enter number	Integer		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
camps in KR-I?		6.3	HH survey	WASH	% of HH by primary source of non- drinking water for the household	Currently, what is your household's primary source of water for other household purposes such as cooking, washing, etc.?	Select one	Water tank (shared or private) Public Network (private access) Public Network (private access) Water Trucking Dug well River/Spring Purchased from Shop Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.4	HH survey	WASH	% of HH reporting using treatment methods for drinking water	How do you treat your water for drinking?	Select one	No freatment necessary Boiling Water HH fifter Chlorination (Aquatabs, etc.) Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.5	HH survey	WASH	% of HH by primary means of solid waste disposal	How does your household dispose of waste?	Select one	Collected by municipality Communal garbage bin Rubbish Pit Burning Throw in street / open space Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.6	HH survey	WASH	-	How frequently is solid waste disposed from your residence?	Select One	Every day Every week Every two weeks Every two weeks Every month More than every month Service not available		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.7	HH survey	WASH	Primary type of functional latrine	Does your household have access to adequate and functional showers/bathing places?	Select One	Yes No		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.8	HH survey	WASH	Primary type of functional shower	Does your household have access to adequate and functional toilets?	Select One	YesNo		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.9	HH survey	WASH	% of HH members with no access to essential hygiene items by reason(s) and priority needs	What are the top 3 most essential hygiene items for the household that you don't have, but need?	Select three	Soap (liquid and bar) Disinfectant - surface deaner (powder, liquid detergent) Toothpaste and dean toothbrushes Baby diapers Shampoo Dishwashing liquid Other (specify) None (I have access to everything)		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		6.10	HH survey	WASH		Why can't your household purchase them?	Select multiple	Too expensive Not available in the market Can't reach the market	If selected anything but 'none' in 6.9	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by	Yes	Yes	Yes	No





								Quality not good Other (specify)								Country of Origin)				
		6.11	HH survey	WASH	% of HH with access to female hygiene items	Do women and girls in your HH have access to appropriate menstrual hygiene items?	Select one	Yes No	Only if gender of respondent is 'female' (given cultural sensitivities)	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
What are the priority sectoral needs, and subsequent gaps in programmin g and service delivery, of refugees	What are the priority needs related to food security among refugees in KR-I host communitie s?	7.1	HH survey	Food Security	% of HH by top three sources of food	What were the top 3 sources of food for your household over the last 7 days?	Select and rank top 3 options	Purchased with own cash Purchased with cash assistance Purchased on credit (debt) Own Production (including hunting, fishing, gathering) Gifts from family and friends Received in-kind for labour or other items Food assistance from government Food assistance from Us or international organisations Food assistance from local charity or community Begging Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
living out of formal camps in KR-I?		7.2	HH survey	Food Security	% of HH by Food Consumption Score	How many days in the last 7 days has any member of your household eaten the following food items?	Enter number per category	Cereals, grains, notis and tubers: rice, pasta, bread, potato, potato, or other nuts Milk and other dairy products: fresh milk 'sour, yogurt, cheese, other dairy products; fresh milk 'sour, yogurt, carots, peppers, green beas ind rats as condiment) Vegetables and leaves: spinach, onion, tomatoes, carots, peppers, green beas, lettuec, cabbages, egg plants, etc Fruits: banana, apple, lemon, mango, watermelon, aprioci, peat, pineapple, passion, gishta, orange, avocado, wild fruits etc Oil / fat / buter: vegetable oil, paim oil, margarine, other fats / oil Sugar, or sweet: sugar, honey, jam, cakes, candy, cookies, pastines, cakes and other sweet (sugary dinks) Condiments / Spices; tea, coffee / cocoa, sait, garlic, spices, yeast / baking powder, lawni, formato/ sauce, meat or fish as a condiment, condiments including small amount of milk / tea coffee.		Yes	Yes	нн	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		7.3	HH survey	Food Security	% of HH by Coping Strategies	During the last 7 days, how many days did your household have to employ one of the following coping strategies?	Enter number per category	Shifting toward cheaper and less quality food items Borrowing food or asking assistance from relatives and finds Reducing the number of daily meals Consuming less food in meals Curbing the adults need to ensure food need of children		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		7.4	HH survey	Food Security	-	During the past 30 days, did anyone in your household have to do one of the following things because there was not enough food or money to buy it?	Select one by category (Yes; No, because we already did it (so cannot to do it); No, nobody in my HH did; Not applicabl e (I don't have))	Selling household properties (refrigerator, television, jewellery) Spending savings Buying food on credit or through borrowed money from relatives and friends Selling means of transport (car, motorbike) Children dropout from school Reducting expenditure on non-food items (health, education) Changing place of residence and accommodation to reduce expenses Accepting that adult males of the family are engaged in illegal acts and risks Accepting that adult males of the family are engaged in illegal acts and risks Children under 18 work to provide resources Whole family and risks Attending banquets held on religious and social events to have food Child marriage Forced marriage (for adults) Begging		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No



are What are iority the priority pral health , and needs puent among		HH survey	Health	% of HH reporting health issues in the past 30 days by type of issues and age groups	Have any members of your household suffered from health issues over the last 30 days?	Select one	Yes No Choose not to answer		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
in refugees nmin KR-I host d communitie ce s? y, of ees ut of		HH survey	Health		Which health issue did one or more of your household members suffer from in the last 30 days?	Select multiple	Measles Inflammation Acute Diamtoea Skin Diseases Skin Problems Gynaecological Issues Other	if 'yes' to 8.1	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
nal Is in I?	8.3	HH survey	Health		Measies	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Measles' to 8.2	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.4	HH survey	Health	_	Inflammation	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Inflammatio n' to 8.2	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.5	HH survey	Health		Acute Diarrhoea	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Acute Diarrhoea' to 8.2	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.6	HH survey	Health	_	Skin Diseases	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Skin Diseases' to 8.2	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.7	HH survey	Health		Skin Problems	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Skin Problems' to 8.2	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.8	HH survey	Health	-	Gynaecological Issues	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	if 'Gynaecologi cal Issues' to 8.2, only asked if respondent 'female'	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.9	HH survey	Health	-	Other (specify)	Enter text	Text	if 'Other' to 8.2	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.10	HH survey	Health	% HH reporting chronic illness	Does any member of this household suffer from a chronic illness?	Select one	Yes No Choose not to answer		Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.11	HH survey	Health		Which chronic illness is one or more household members suffering from?	Select multiple	Heart disease Cancer Lung disease Diabetes Rena (kidney) disease Hypertension Other	If 'yes' to 8.10	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
	8.12	HH survey	Health		Heart disease	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59	If 'heart disease' to 8.11	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





0.42		l la alth	-	0	Fatas	Female above 60	If lease and to	Ne	Vee		Obsetifiered	Ne	Courses 1	Definer	Vaa	Vee	Vaa	N
8.13	HH survey	Health		Cancer	Enter number per category	Maie 0-17 Female 0-17 Maie 18-59 Female 18-59 Male above 60 Female above 60	If 'cancer' to 8.11	No	Yes	ΗΗ	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.14	HH survey	Health	-	Lung disease	Enter number per category	Male 0-17 Fernale 0-17 Male 18-59 Fernale 18-59 Male above 60 Fernale above 60	If 'lung disease' to 8.11	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.15	HH survey	Health		Diabetes	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'diabetes' to 8.11	Yes	Yes	ΗΗ	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.16	HH survey	Health	-	Renal (kidney) disease	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'renal (kidney) disease' to 8.11	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.17	HH survey	Health		Hypertension	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	If 'hypertensio n' to 8.11	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.18	HH survey	Health	-	Other (specify)	Enter number per category	Male 0-17 Female 0-17 Male 18-59 Female 18-59 Male above 60 Female above 60	lf 'other' to 8.11	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.19	HH survey	Health	-	Does the head of this household suffer from a chronic illness?	Select one	Yes No Choose not to answer	If 'yes' to 8.10	No	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.20	HH survey	Health	-	Which chronic illness does the head of household suffer from?	Select multiple	Heart disease Cancer Lung disease Diabetes Renal (kidney) disease Hypertension	lf 'yes' to 8.10	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.21	HH survey	Health	Primary healthcare provider for families	Who is the primary health care provider for your household?	Select one	Private clinic Public facility (clinic or hospital) International organization (UN, Iraqi Red Crescent, MSF) Local organization (religious group, volunteers) Don't krow None Other (specify)		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.22	HH survey	Health	% of households needing to access health services in the 3 months prior to data collection	In the last three months, has anyone in your household needed to access health services or treatment for health issues or disabilities (including medicines and excluding mental health issues)?	Select one	Yes No Don't know Decline to answer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.23	HH survey	Health	% of HH experiencing problems in accessing healthcare services by type of	If yes to 8.22, did the member(s) experience any problems in accessing the health care needed?	Select one	YesNoChoose not to answer	if 'yes' to 8.22	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.24	HH survey	Health	problem experienced	If yes to 8.23, please specify the kind of difficulty.	Select Multiple	Cost of services was too high Did not get access to qualified health staff at hospital Did not get access to qualified health staff at public health clinic	If 'yes' to 8.23	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by	Yes	Yes	Yes	





						Language barrier Medical staff refused treatment without any explanation Cost of medicine was too high								Country of Origin)				
						No medicine available at hospital No medicine available at pharmacy No medicine available at public health clinic No transport available No treatment available for my disease at the public health clinic												
						No treatment available for the problem at the hospital Problems with civil documents Public health clinic did not provide referral Health clinic not open The treatment centre was too far away Gender discrimination No support from family												
8.25	HH survey	Health	Vaccination rate	How many children < 5 in your household have been vaccinated (against Polio, Measles or Penta 3)?	Enter number	Other (specify) Integer		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of	Yes	Yes	Yes	
8.26	HH survey	Health	Access to functioning health care centre	Does your household have access to a functioning health care centre?	Select one	Yes No Don't know		Yes	Yes	HH	Stratified simple random	No	Governorate	Origin) Refugee population (by Country of	Yes	Yes	Yes	
8.27	HH survey	Health	Access to functioning hospital or medical facility	Does your household have access to a functioning hospital or medical facility?	Select one	Yes No Don't know		Yes	Yes	HH	Stratified simple random	No	Governorate	Origin) Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.28	HH survey	Health	% of HH with pregnant or lactating women	Are any women in your household pregnant or lactating?	Select one	Yes No Choose not to answer	for females > 12 years	Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.29	HH survey	Health	% of HH with women of reproductive age with access to reproductive health services	Do women of reproductive age (12- 49 years) have access to specialised reproductive healthcare services?	Select one	Yes No Don't know Decline to answer		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.30	HH survey	Health	% of women experiencing discrimination in accessing health services	Has any female household member experienced any of the following discriminatory treatment when trying to access public health services?	Select Multiple	Denigratory comments Verbal harassment of sexual nature Sexual Assault Other (specify) None (not experienced discriminatory treatment)	if respondent 'female'	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.31	HH survey	Health	-	Has any female household member experienced any of the following discriminatory treatment when trying to access private health services?	Select Multiple	Denigratory comments Verbal harassment of sexual nature Sexual Assault Other (specify) None (not experienced discriminatory treatment)	if respondent 'female'	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.32	HH survey	Health	% of households needing to access mental health services in the 3 months prior to data collection	In the last three months, has anyone in your household needed to access mental health services or treatment (including medicines)?	Select one	Yes No Don't know Decline to answer		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.33	HH survey	Health	% of HH experiencing problems in accessing mental healthcare services	If yes to 8.31, did the member(s) experience any problems in accessing the health care needed?	Select one	Yes No Choose not to answer		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	
8.34	HH survey	Health	by type of problem experienced	If yes to 8.32, please specify the kind of difficulty	Select Multiple	Cost of services was too high Did not get access to qualified health staff at hospital Did not get access to qualified health staff at public health clinic Language barrier Medical staff refused treatment without any explanation Cost of medicine available at hospital		No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	





								No medicine available at pharmacy No medicine available at public health clinic No transport available No treatment available No treatment available for my disease at the public health clinic No treatment available for the problem at the hospital Problems with civil documents Public health clinic din dor provide referral Health clinic not open The treatment centre was too far away Gender discrimination No support from family Other (specify)												
What are the movement intentions of refugees	N/A	9.1	HH survey	Intentions	% of HH intending to move to a different location, by time, place and reasons	Do you intend to move to a different location in the next 3 months?	Select one	Yes No Choose not to answer		Yes	Yes	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
out of formal camps in KR-I?		9.2	HH survey	Intentions		Where do you intend to move to?	Select one	Yes, to country of origin Yes, within KR-I Yes, to another country then country of origin Yes, to Iraq (outside KR-I) No Don't know Choose not to answer	If 'yes' in 9.1	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		9.3	HH survey	Intentions		Why do you intend to leave?	Select multiple	Cost of living is too high in this location To be closer to family Better employment opportunities elsewhere Safety concerns in this area Weather conditions Better access to essential services To collect documentation To access healthcare Other (specify)	lf 'yes' in 9.1	Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		9.4	HH survey	Intentions	% of HH that plan to move to a camp in KRI	If you intend to move within KRI (question 9.2), do you intend to move to a camp?	Select one	Yes No Choose not to answer	If 'within KRI' in 9.2	No	No	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
What are the priority sectoral needs, and subsequent gaps in programmin g and service delivery, of refugees living out of formal camps in	What are the priority needs related to communicat ion among refugees in KR-I host communitie s?	10.1	HH survey	Communicati ons	Information needs and preferences	What type of information would you like to receive from aid providers?	Select three	Safety and security Status of housing Livelihoods Water services Electricity services Education Healthcare Legal services Housing Land Property services Explosive hazards (mines, bomb, IEDs) Renewing official documentation I don't like to receive more information Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
camps in KR-I?		10.2	HH survey	Communicati ons		Wholwhere would you prefer to receive information from?	Select multiple	Friends and family that are living in the area of origin Friends and family that visited the area of origin in the past 30 days Friends and family that have not been in the area of origin in the past 30 days Local authorities National authority NGO/humanitarian agencies Religious Leaders Mukhar Sector leaders Schools, community centres Other (specify)		Yes	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		10.3	HH survey	Communicati ons		What are your preferred means of receiving the information?	Select one	Face-to-face communication (e.g. from friends) Face-to-face communication (e.g. from friends) Television Telephone/mobile phone (Voice Call) Mobile Phone (text SMS) Social Media (WhatsApp, Facebook, etc.)		No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





								Notice board and poster Newspapers or magazines Printed leaflet Loud speakers Radio Other (specify)											
		10.4	HH survey	Communicati ons		What are your preferred means of giving feedback to humanitarian actors regarding their services to solve your problems?	Select one	Complaint boxes Hotines Helpdesks Personal contacts with staff of organization Other (specify)	No	Yes	HH	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
What are the multi- sectoral priority needs of refugees ving out of formal camps in KR-1, and ow do they vary by overnorate direfugee ationality?	What are the priority needs among refugees in KR-I host communitie s?	11.1	HH survey	Priority Needs	Priority CRI Needs	Which of the following CRIs are priority needs for your household?	Select three	Bedding items (bredsheets, pillows) Mattresses/Sieeping mats Blankets Cooking utensils/kitchen set Cooking fuel Cooking stove Water storage Sources of light Clothing Fan Air water cooler (AWC) Cool box Winter heaters/stove Heating fuel Fuel storage None of the above Other (specify)	No	Yes	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		11.2	HH survey	Priority Needs	% of HH by the top 3 priority needs	What are the top 3 priority needs for your household?	Select three (Do not read out the list)	Civil documentation Education for children Employment (Livelihood opportunities) Food Medical Care Psychosocial Support Shelter Support Water Sanitation services Vocational Itaning Clothing or footwear Summer Kits Winter Kits Legal Assistance Other (specify)	Yes	Yes	НН	Stratified simple random	No	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No
		11.3	HH survey	Priority Needs	% of HH by type of assistance received over the last 30 days	What assistance has been received by the HH over the last 30 days?	Select multiple	Cash assistance Food assistance Water assistance Fuel (gas, kerosene, diesel) Shelter and winteriation assistance Winterisation items No assistance was received Other (specify)	Yes	No	HH	Stratified simple random	Yes	Governorate	Refugee population (by Country of Origin)	Yes	Yes	Yes	No





IN #	Data collection method	Indicator group / sector	Indicator / Variable	Questionnaire Question	MSNA III (confirm comparability)	comparability check
1.2	Direct entry by enumerator	Household profile	% of households by governorate they live in	What is the current governorate the household is in?	Yes	Yes
1.13	HH survey	Household profile	Gender head of household	What is the gender of the head of household?	Yes	Yes
1.14	HH survey	Household profile	Age head of household	What is the age of the head of household?	Yes	Yes
1.17	HH survey	Household profile	Average length of time households have resided in the KRI	When did the first member of your household arrive in KRI?	Yes	Yes
2.1	HH survey	Education	% of school-aged children (6-11 yrs. old) in HH attending formal primary education, by age and sex	How many children between the ages of 6-11 attended a formal primary education regularly the past school year?	Yes	Yes
2.2	HH survey	Education	% of school-aged children (12-17 yrs. old) in HH attending formal secondary education, by age and sex	How many children between the ages of 12-17 attended a formal secondary education regularly the past school year?	Yes	Yes
2.3	HH survey	Education	% of school-aged children (6-11 yrs. old) in HH attending informal primary education activities, by age and sex	How many children between the ages of 6-11 attended/are attending an informal primary education regularly in the past school year?	Yes	Yes
2.4	HH survey	Education	% of school-aged children (12-17 yrs. old) in HH attending informal secondary education activities, by age and sex	How many children between the ages of 12-17 attended/are attending an informal secondary education regularly in the past school year?	Yes	Yes

Annex 2: Comparative Indicators 2017 MSNA III and 2018 MSNA IV





3.1	HH survey	Protection	% of HH where at least one member is suffering from a disability, by age groups and type of disability (To be put in health Sector with the related questions)	Does anyone in your household have a permanent disability which impacts their ability to carry out their day-to-day tasks independently?	Yes	Yes
3.27	HH survey	Protection	% of HH involved in civil disputes over land, shelter and housing, family/social issues and employment/jobs	Have you or any other member of your household been involved in any civil or legal disputes over the last 3 months?	Yes	Yes
4.6	HH survey	Livelihoods	Demographics of HH members working in the last 30 days % of households with children (aged 6-17) working during the previous 30 days	By age and gender category, how many members of your HH worked during the last 30 days?	Yes	Yes
4.11	HH survey	Livelihoods	Total income in IQD from all sources in the past 30 days	What was your household's total income in Iraqi Dinars (from all sources including humanitarian assistance but excluding savings and debt) over the last 30 days?	Yes	Yes
4.13	HH survey	Livelihoods	Mean/Median HH expenditure on basic needs over the last 30 days (in IQDs)	In total, in IQD, how much did your HH spend on basic needs over the last 30 days?	Yes	Yes
4.14	HH survey	Livelihoods	Mean/Median HH total amount of debt in IQDs	What is your household's total amount of debt, in IQD?	Yes	Yes
5.2	HH survey	Shelter	% of HH by accommodation type and modes of provision	How are you currently providing for your accommodation?	Yes	Yes
5.3	HH survey	Shelter	Mean and medium cost of monthly rent	How much do you pay per month for rent (in IQD)?	Yes	Yes
5.6	HH survey	Shelter	% of HH threatened with eviction over the last 90 days	Have you been threatened with eviction over the last 90 days?	Yes	Yes
5.9	HH survey	Shelter	% of HH with electricity connection by source	Does your household have an electricity connection?	Yes	Yes
5.10	HH survey	Shelter	% of HH with electricity connection by source	What is the source of this electricity?	Yes	Yes
5.11	HH survey	Shelter	Average amount of time in hours of electricity per day, by district	How many hours per day do you have access to electricity?	Yes	Yes





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5.12	HH survey	Shelter	% of HH by main source of cooking fuel	What is this household's main source of cooking fuel?	Yes	Yes
5.13	HH survey	Shelter	% of HH by main source of heating fuel	What is this household's main source of heating fuel during the winter period?	Yes	Yes
5.15	HH survey	Shelter	% of HH that have applied coping strategies when experiencing fuel shortage, by type of coping strategy	If you had problems with accessing heating fuel during the last winter period, what did you do to overcome this?	Yes	Yes
6.7	HH survey	WASH	Primary type of functional latrine	Does your household have access to adequate and functional showers/bathing places?	Yes	Yes
6.8	HH survey	WASH	Primary type of functional shower	Does your household have access to adequate and functional toilets?	Yes	Yes
7.2	HH survey	Food Security	% of HH by Food Consumption Score	How many days in the last 7 days has any member of your household eaten the following food items?	Yes	Yes
8.10	HH survey	Health	% HH reporting chronic illness	Does any member of this household suffer from a chronic illness?	Yes	Yes
8.19	HH survey	Health	% HH reporting chronic illness	Does the head of this household suffer from a chronic illness?	No	Yes
8.25	HH survey	Health	Vaccination rate	How many children < 5 in your household have been vaccinated (against Polio, Measles or Penta 3)?	Yes	Yes
8.28	HH survey	Health	% of HH with pregnant or lactating women	Are any women in your household pregnant or lactating?	Yes	Yes
9.1	HH survey	Intentions	% of HH intending to move to a different location, by time, place and reasons	Do you intend to move to a different location in the next 3 months?	Yes	Yes
11.3	HH survey	Priority Needs	% of HH by type of assistance received over the last 30 days	What assistance has been received by the HH over the last 30 days?	Yes	Yes



