
Iraq High Frequency Phone Survey (IHFPS)

To Monitor Socioeconomic Trends During COVID-19

RESULTS FROM OCTOBER, NOVEMBER, DECEMBER 2020, AND JANUARY 2021 ROUNDS



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Acronyms

BeneMark	Beneficiary Market Perspectives Survey
CCI	Cash Consortium for Iraq
CFSVA	Comprehensive Food Security and Vulnerability Analysis
EFPM	Enhanced Frequency Price Monitoring
GDP	Gross Domestic Product
GOI	Government of Iraq
IDPs	Internal Displaced Peoples
IHFPS	Iraq High Frequency Phone Survey
ILO	International Labor Organization
KRG	Kurdistan Regional Government
MENA	Middle East and North Africa
MICS	Multi Indicator Cluster Survey
MNO	Mobile Network Operators
MoP	Ministry of Planning
mVAM	mobile Vulnerability Analysis and Mapping
NGO	Non-Governmental Organization
PDS	Public Distribution System
PSM	Propensity Score Matching
rCSI	reduced Coping Strategy Index
SSNs	Social Safety Nets
SWIFT	Survey of Well-Being via Instant and Frequent Tracking
UCT	Unconditional Cash Transfer
UNICEF	United Nations International Children's Emergency Fund
WFP	World Food Programme
WHO	World Health Organization

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Executive summary

This report presents results from socioeconomic observational data collected by phone in four rounds from October 2020 through January 2021 focusing extensively on the Internally Displaced People (IDPs) and returnees (here referring solely to returning IDPs). The first part of the paper presents trends on key socioeconomic indicators from the nationally representative sample of households that had been interviewed monthly since August 2020. The second part of the report concentrates on an expanded sample of forcibly displaced households from the Kurdistan Region of Iraq (KRI) and the North region and its comparison with non-displaced households from these regions that form part of the regular national sample. In total, this report conveys data from nearly 15,000 interviews.

Iraq is among the most pandemic-impacted countries in the Middle East and North Africa (MENA) region in terms of the number of COVID-19 cases and deaths. As an early response, both the Government of Iraq (GoI) and the Kurdistan Regional Government (KRG) took strict measures to limit the spread of the virus. The whole country was locked down and curfew hours were imposed in major cities at one point, including Baghdad and Erbil. The country instituted protracted measures that restricted movement outside the home, between cities or regions, and limiting schooling.

Since August 2020, the World Bank, in collaboration with the World Food Programme (WFP), has been collecting data through High Frequency Phone Surveys (HFPS) to monitor the socioeconomic fallout of COVID-19 on households in Iraq. The project utilizes WFP's mobile Vulnerability Analysis and Mapping (mVAM) system and collects data on household food consumption, employment, child education, and access to social safety nets, market, and healthcare access during the pandemic. The national sample covers all 18 governorates and interviews more than 1,600 individuals across Iraq in each round and, because it is representative of the entire population living in Iraq, naturally includes a small portion of Internally Displaced People (IDPs) - around 60 households per round from KRI and the North (Annex II). Following the August round, the sample was expanded and oversampled strata of IDPs in KRI and the North and returnees in the North, with more than 1,500 interviews conducted across those two groups in each round. The surveys provide insights on trends in the labor market, household food consumption, cash, and in-kind transfers, as well as access to markets, grocery stores and healthcare services.

Results from the national sample suggest that the socioeconomic fallout of the pandemic has been severe for Iraqi households and recovery, where seen, is incomplete. While estimated labor force participation for individuals between 18 and 64 years of age across Iraq remained above 61 percent throughout these last four rounds, the estimated unemployment rate increased significantly during the pandemic. Compared to 12.7 percent prior to the pandemic, the figure climbed to 22 percent in October 2020 which slightly increased to 23.5 percent in January 2021. Food security concerns have materialized to a lesser degree. The share of Iraqi households consuming inadequate diets decreased between August and November 2020 (i.e., from 6.0 to 4.1 percent), but returned to 6.1 percent in January 2021. The share of Iraqis that benefitted from a food ration from the Public Distribution System (PDS) declined sharply between February (pre-pandemic) and July 2020; although it has since trended upward, it is yet to reach pre-pandemic levels. A significant share of Iraqis faced challenges accessing markets, but overall access to markets and grocery stores improved after August 2020. While 23.9 percent of the respondents indicated that they faced challenges accessing markets and grocery stores in August 2020, only 14.2 percent reported facing challenges in January 2021. In contrast, Iraqis continue to struggle with access to healthcare services. COVID-19 testing in Iraq remains relatively low, but a significant share of Iraqis is

likely to accept safe and effective vaccines if endorsed by an employer and the government, although vaccine receptivity varies across regions from 55.7 percent in KRI to 71.2 percent in the North.

IDPs and returnees in Kurdistan and the North regions generally fare worse than non-displaced households from those regions, but not always. Despite high overall labor force participation, not all working-age adults seeking jobs are able to find employment, and the unemployment rates among IDPs, returnees and non-displaced remained high between October 2020 and January 2021. IDPs and returnees reported participating in the labor force at a steady rate (about 78 percent for IDPs and 83 percent for returnees). This is much higher than both the national average (see above) and the non-displaced population in KRI and the North, whose labor force participation dropped from 68 to 59 percent between October 2020 and January 2021. However, despite lower labor force participation, unemployment rates for the non-displaced were both more volatile and ended slightly higher (26.2 percent) than for IDPs or returnees (24.5 and 21.8 percent). While labor force participation among female respondents for IDPs, returnees and non-displaced households have been approximately half that of males (roughly 43.5 versus 87.5 percent), female respondents who do participate are three times as likely to be unemployed as males (roughly 54 versus 16 percent). IDPs living in camps are less likely to look for work than those living out of camps, and among those who are looking, camped IDPs are less likely to find employment. While a further investigation is required, camped-IDPs may find assimilation into the local labor market more difficult than the IDPs already living in the communities.

Food insecurity is a persistent concern among the displaced, but IDPs and returnees follow divergent paths. The share of IDP and returnee households in Iraq with an inadequate diet remained high between October 2020 and January 2021. Following the initial dip from 14.7 percent in October to 12.6 percent in November, the figure doubled between November 2020 and January 2021 to the point where more than a quarter of IDP households had an inadequate diet. This appears to be largely driven by out of camp IDPs, rather than those living in camps. In contrast, although still at an elevated level, the share of returnees who consumed inadequate diets followed a decreasing trend between October 2020 and January 2021 from 14.6 percent to 8.3 percent. A worryingly high share of the IDPs, returnees, and non-displaced populations employed consumption-based coping strategies when households were faced with a lack of food or money to buy food; however, the displaced engaged in these far more frequently. The most frequently adopted strategies include switching to less expensive foods (approximately 63 versus 32 percent for displaced and non-displaced) or borrowing food (58 versus 37 percent), but also include more drastic measures such as limiting adult consumption to allow children to eat (30 versus 11.5 percent). Similar to trends observed in the national sample, the share of returnees and the non-displaced population receiving food rations from the PDS trended upward after the dip in November but have yet to return to pre-pandemic levels. However, despite their greater need, participation of IDPs in the PDS has been volatile and decreased slightly from October to January.

Assistance programming helped stabilize welfare, but the ability to benefit from that help varied starkly between displaced groups. Returnees tended to be most able to benefit from this help; indeed, returnees were more likely to receive PDS transfers than nondisplaced households in every month observed (October 2020-January 2021). Camped IDPs were also able to avail themselves of cash and in-kind assistance. However, there is real cause for concern for IDP households who are not part of a camp. Only 38.2 percent of these households received PDS transfers (compared to two thirds of nondisplaced and camped IDP households). Even lower trends are seen for out of camp IDPs receipt of non-PDS in-kind transfers and cash transfers from any source. In combination with high shares of non-camped IDPs consuming inadequate diets, this group warrants further initiatives to monitor and improve welfare.

Few children were engaged in learning during the pandemic lockdown. Among households with children attending school prior to lockdown, only 10.3, 11.1 and 21.3 percent of IDP, returnees, and non-displaced households from KRI and the North indicated that their children were engaged in either catchup or learning activities during the month of October 2020 when schools were closed due to the pandemic—and most of those who did were attending private schools. IDPs were much less likely to send children to school in January 2021. Even among those who were enrolled, children from both displaced and non-displaced households were only attending school about one day per week. These short-term impacts on human capital accumulation, especially faced during early childhood, could be persistent and need to be remedied.

Covid-19 testing is low and vaccine receptivity is moderately high for all groups, but the displaced samples outpace the non-displaced and general population of Iraq. As of January, less than 25 percent of Iraqis overall had a COVID test at any time and the rate is similar for the non-displaced, IDP and returnee samples in KRI and the North. IDPs are far more likely than other groups to report inability to access healthcare. While a significant share of Iraqis are likely to accept safe and effective vaccines (approximately 67.8 percent of the general population), vaccine acceptance is even higher among returnees (82.6 percent) relative to IDPs (70.9 percent) and non-displaced households (61.6 percent). Results indicate that government or employer endorsement as well as price are key factors for encouraging vaccine take-up.

Table E1: Summary Statistics for National, Non-displaced (from KRI and the North regions), Internally Displaced (IDPs), returnees, samples (percent)

	General Population (National sample)		Non-IDPs in KRI & North		IDPs in KRI & North		Returnees in North	
	Oct 2020	Jan 2021	Oct 2020	Jan 2021	Oct 2020	Jan 2021	Oct 2020	Jan 2021
Unemployment	22.0	23.5	21.0	26.2	24.0	24.5	13.1	21.8
Non-labor income (any)	n/a	n/a	3.2	3.7	11.7	17.2	6.8	4.0
Inadequate Diet	5.1	6.1	4.3	3.0	14.7	25.3	14.6	8.3
Difficulty Accessing Markets	11.7	14.2	9.3	18.3	34.9	38.1	15.0	26.9
Learning during school closure	n/a	n/a	21.3	n/a	10.3	n/a	11.1	n/a
Difficulty Accessing Healthcare	24.6	31.5	24.5	23.5	49.3	59.0	41.6	34.2
Vaccine receptivity	n/a	67.8	n/a	61.6	n/a	70.9	n/a	82.6

يستعرض هذا التقرير النتائج من بيانات الرصد الاقتصادي والاجتماعي التي تم جمعها عبر الهاتف على أربع جولات ما بين تشرين الأول 2020 ولغاية كانون الثاني 2021، مع التركيز بشكل مكثف على النازحين والعائدين (ستتم الإشارة هنا حصراً إلى النازحين العائدين). يستعرض القسم الأول من التقرير الاتجاهات حول المؤشرات الاقتصادية والاجتماعية الرئيسية من العينة الممثلة وطنياً للأسر التي تمت مقابلتها شهرياً منذ آب 2020. كما يركز القسم الثاني من التقرير على عينة موسعة من الأسر النازحة قسراً من إقليم كردستان العراق وإقليم الشمال ومقارنتها مع الأسر غير النازحة من هذين الإقليمين والتي تشكل جزءاً من العينة الوطنية المنتظمة. كمجموع، يتضمن هذا التقرير بيانات من قرابة 15,000 مقابلة.

يعتبر العراق واحداً من أشد الدول تضرراً بفعل الجائحة في منطقة الشرق الأوسط وشمال أفريقيا من حيث عدد حالات الإصابة والوفيات جراء كوفيد-19. وكاستجابة مبكرة، قامت الحكومة العراقية وحكومة إقليم كردستان العراق باتخاذ تدابير صارمة للحد من انتشار الفيروس. حيث تم إغلاق البلاد وفرض ساعات لحظر التجوال في المدن الرئيسية بما في ذلك العاصمة بغداد وأربيل. وقام العراق بفرض تدابير ممتدة أدت إلى تقييد الحركة خارج المنازل، بين المدن أو الأقاليم، والحد من التعليم المدرسي.

منذ آب 2020، عكف البنك الدولي، وبالتعاون مع برنامج الأغذية العالمي، بجمع بيانات عبر مسوحات هاتفية عالية التواتر لرصد التداعيات الاقتصادية والاجتماعية لكوفيد-19 على الأسر في العراق. ويقوم المشروع بالاستفادة من النظام المتنقل لتحليل وتحديد مناطق الهشاشة الخاص ببرنامج الغذاء العالمي وجمع البيانات من الأسر حول الاستهلاك الغذائي، والتشغيل، وتعليم الأطفال، وإمكانية الوصول إلى شبكات الحماية الاجتماعية، والأسواق، والرعاية الصحية في ظل الجائحة. تغطي العينة الوطنية كافة المحافظات الثماني عشر وجرت مقابلات مع أكثر من 1,600 فرد عبر العراق في كل جولة، وكونها ممثلة لكافة سكان العراق، فمن الطبيعي أن تتضمن حصة صغيرة من النازحين- قرابة 60 أسرة في كل جولة من إقليم كردستان العراق ومحافظات الشمال (الملحق 2). وعقب جولة آب، تم توسيع نطاق العينة وشملت طبقة من النازحين في إقليم كردستان العراق والشمال والنازحين العائدين (العائدين) في الشمال، مع إجراء أكثر من 1,500 مقابلة عبر تلك المجموعتين في كل جولة. تقدم المسوحات تصورات حول الاتجاهات في سوق العمل، والاستهلاك الغذائي الأسري، والتحويلات النقدية والعينية، وإمكانية الوصول للأسواق، ومحلات البقالة، وخدمات الرعاية الصحية.

تشير النتائج من العينة الوطنية إلى أن التداعيات الاقتصادية والاجتماعية للجائحة كانت شديدة على الأسر العراقية وأن التعافي، كما هو ملاحظ، لم يكتمل. وبينما بقيت تقديرات المشاركة في القوى العاملة للأفراد ما بين 18-64 عاماً عبر أنحاء العراق فوق 61% طوال الجولات الأربع الأخيرة، إلا أن تقديرات معدل البطالة ارتفعت بصورة ملحوظة أثناء الجائحة. وبالمقارنة مع 12.7% قبل الجائحة، قفزت النسبة إلى 22% في تشرين الأول 2020، وارتفعت قليلاً إلى 23.5% في كانون الثاني 2021. وتجسدت المخاوف بخصوص الأمن الغذائي بدرجة أقل. فقد انخفضت حصة الأسر التي تستهلك وجبات غير كافية ما بين آب-تشرين الثاني 2020 (من 6.0% إلى 4.1%)، لكنها عاودت الارتفاع إلى 6.1% في كانون الثاني 2021. وقد انخفضت حصة العراقيين الذين استفادوا من حصص غذائية من نظام البطاقة التموينية بشكل حاد ما بين شباط (قبل الجائحة) وتموز 2020؛ وبالرغم من اتجاهها الصعودي منذ ذلك الحين، إلا أنها لم تصل بعد إلى مستويات ما قبل الجائحة. وواجهت نسبة كبيرة من العراقيين مشاكل في الوصول إلى الأسواق، لكن شهدت إمكانية الوصول إلى الأسواق ومحلات البقالة تحسناً بعد آب 2020. وبينما أشار 23.9% من المستجيبين إلى مواجهتهم لمشاكل في الوصول إلى الأسواق ومحلات البقالة في آب 2020، أشار 14.2% فقط إلى مواجهتهم هذه المشاكل في كانون الثاني 2021. وعلى النقيض من ذلك، لا يزال العراقيون يعانون من إمكانية الوصول إلى خدمات الرعاية الصحية. حيث لا تزال فحوصات فيروس كورونا في العراق متدنية، لكن من المرجح أن تتقبل حصة كبيرة من العراقيين الحصول على لقاحات آمنة وفعالة إذا تم اعتمادها من قبل أصحاب العمل والحكومة، بالرغم من تباين تقبل اللقاح عبر الأقاليم من 55.7% في إقليم كردستان العراق إلى 71.2% في إقليم الشمال.

بشكل عام، يعتبر وضع النازحين والنازحين العائدين في إقليمي كردستان والشمال أسوأ من الأسر غير النازحة من هاتين المنطقتين، ولكن ليس دائماً. بالرغم من المستوى المرتفع للمشاركة في القوى العاملة بالمجمل، لا يستطيع كافة البالغين في سن العمل والساعين للحصول على عمل العثور على وظيفة، وبقيت معدلات البطالة في صفوف النازحين، والنازحين العائدين (العائدين)، وغير النازحين ما بين تشرين الأول 2020-كانون الأول 2021 مرتفعة. وأشار النازحون والنازحون العائدون إلى مشاركتهم في القوى العاملة بمعدل مضطرد (قرابة 78% للنازحين و83% للعائدين). ويعتبر ذلك أعلى بكثير من المتوسط الوطني (انظر أعلاه) ولدى السكان غير النازحين في إقليمي كردستان والشمال، حيث انخفض معدل المشاركة في القوى العاملة في المنطقتين من 68% إلى 59% بين تشرين الأول 2020 وكانون الأول 2021. لكن، وبالرغم من تدني المشاركة في القوى العاملة، تعتبر البطالة لدى غير النازحين أكثر تقلباً وأعلى بشكل طفيف (26.2%) مقارنة مع النازحين أو العائدين (24.5% و21.8%، على التوالي). وبينما كان معدل المشاركة في القوى العاملة لدى المستجيبين من الإناث من الأسر النازحة، والنازحة العائدة، وغير النازحة قرابة النصف مقارنة بالذكور (43.5% مقارنة مع 87.5%

تقريباً)، إلا أن المستجيبين من الإناث من المشاركات في سوق العمل يشكلون الثلث من حيث احتمالية البطالة كما هو الحال عند الذكور (54% مقارنةً مع 16% تقريباً). ومن المرجح بصورة أقل بالنسبة للنازحين القاطنين في مخيمات أن يبحثوا عن عمل مقارنةً مع من يعيشون خارج المخيمات، ومن بين من يبحثون عن عمل، تقل احتمالية عثور النازحين في المخيمات على عمل. وبالرغم من الحاجة لمزيد من التحقق، قد يجد النازحون في المخيمات أن الاندماج في سوق العمل المحلي أكثر صعوبة من النازحين الذين يعيشون بالفعل داخل المجتمعات.

لا يزال انعدام الأمن الغذائي يشكل هاجساً لدى النازحين، لكن النازحين والعائدين يتبعون مسارات مختلفة. حيث بقيت حصة أسر النازحين والنازحين العائدين في العراق ممن تعاني من عدم كفاية الوجبات مرتفعة ما بين تشرين الأول 2020 وكانون الثاني 2021. وعقب الانخفاض الأولي من 14.7% للنازحين الذين يعانون من عدم كفاية الوجبات في تشرين الأول إلى 12.6% في تشرين الثاني، تضاعفت النسبة ما بين تشرين الثاني 2020-كانون الثاني 2021 لدرجة أن أكثر من ربع أسر النازحين لم يكن لديها وجبات كافية. ويبدو أن ذلك يتعلق إلى حد كبير بالنازحين خارج المخيمات، وليس داخلها. وعلى النقيض من ذلك، وبالرغم من استمرارية المستوى المرتفع، شهدت حصة النازحين العائدين الذين استهلكوا وجبات غير كافية انخفاضاً ما بين تشرين الأول 2020-كانون الثاني 2021 من 14.6% إلى 8.3%. وقامت نسبة عالية مقلقة من النازحين، والنازحين العائدين، وغير النازحين بتطبيق استراتيجيات تأقلم استهلاكي عندما لم يتوفر لدى الأسر غذاء أو مال كافي لشراء الغذاء، لكن توجب على النازحين ممارسة هذه الاستراتيجيات بشكل أكثر. تتضمن الاستراتيجيات الأكثر تكراراً التحول إلى أطعمة أقل تكلفةً (نحو 63% بين النازحين مقارنةً مع 32% بين غير النازحين) أو اقتراض الغذاء (58% مقارنةً مع 37%)، كما يشمل ذلك تدابير أكثر شدةً مثل تقليل استهلاك البالغين كي يحصل الأطفال على الغذاء (30% مقارنةً مع 11.5%). وكما هو الحال في الاتجاهات الملاحظة في العينة الوطنية، شهد اتجاه حصة النازحين العائدين وغير النازحين الذين تلقوا حصصاً غذائية من نظام البطاقة التموينية صعوداً عقب الانخفاض الذي حدث في تشرين الثاني، إلا أنها لم تصل إلى مستويات ما قبل الجائحة. رغم ذلك، وبالرغم من حاجتهم الكبيرة، شهدت مشاركة النازحين في نظام البطاقة التموينية تقلباً وانخفضت بشكل طفيف ما بين تشرين الأول ولغاية كانون الثاني.

ساهمت برامج المساعدات في إحداث استقرار على مستوى الرفاه، لكن القدرة على الاستفادة من تلك المساعدة شهدت تبايناً صارخاً بين فئات النازحين. حيث مال العائدون لأن يكونوا الأكثر قدرةً على الاستفادة من تلك المساعدات؛ وفي الواقع، كان من المرجح بصورة أكبر أن يستلم العائدون تحويلات نظام البطاقة التموينية مقارنةً بالأسر غير النازحة خلال كل شهر تمت متابعته (تشرين الأول 2020-كانون الأول 2021). كما كان النازحون داخل المخيمات قادرين على الاستفادة من المساعدات النقدية والعينية. رغم ذلك، يوجد سبب حقيقي للقلق بخصوص أسر النازحين خارج المخيمات. حيث استطاع 38.2% فقط من هذه الأسر الحصول على تحويلات نظام البطاقة التموينية (بالمقارنة مع ثلثي الأسر غير النازحة وأسرة النازحين داخل المخيمات). كما تظهر اتجاهات متدنية حول استلام النازحين خارج المخيمات للتحويلات العينية غير المتعلقة بنظام البطاقة التموينية والتحويلات النقدية من أي مصدر. وبالإضافة إلى الحصص المرتفعة من النازحين خارج المخيمات الذين يتناولون وجبات طعام غير كافية، تستحق هذه الفئة المزيد من المبادرات بغرض رصد وتحسين مستوى الرفاه لديها.

انخرط عدد قليل من الأطفال في التعلم أثناء الإغلاق بفعل الجائحة. ومن بين الأسر التي كان لديها أطفال يذهبون للمدرسة قبل الإغلاق، أشار فقط 10.3% من أسر النازحين، و11.1% من النازحين العائدين، و21.3% من غير النازحين في إقليم كردستان العراق وإقليم الشمال إلى انخراط أطفالهم في نوع من الأنشطة الاستدراكية أو التعليمية خلال تشرين الأول 2020 عندما كانت المدارس مغلقةً بسبب الجائحة. ومعظم من استطاعوا ذلك ذهبوا إلى مدارس خاصة. وكان من المرجح بصورة أقل إرسال الأطفال إلى المدارس في كانون الثاني 2021. وحتى لو كانوا ملتحقين، كان أطفال الأسر من النازحين وغير النازحين يذهبون للمدرسة ليوم واحد تقريباً أسبوعياً. وقد تصبح هذه الآثار قصيرة المدى على تراكم رأس المال البشري، وخصوصاً في مرحلة الطفولة المبكرة، مزمنةً وبحاجة لإجراءات علاجية.

يعد معدل الفحوصات متدنياً وتقبل اللقاحات مرتفعاً نسبياً لدى كافة الفئات، إلا أن النسبة بين النازحين تفوق غير النازحين والسكان بشكل عام في العراق. واعتباراً من كانون الثاني، خضع أقل من 25% من العراقيين ككل لفحص كوفيد-19 في أي وقت ويعد المعدل مشابهاً لدى عينات غير النازحين، والنازحين، والعائدين في إقليم كردستان وإقليم الشمال. ومن المرجح بصورة كبيرة للغاية بالنسبة للنازحين مقارنةً مع الفئات الأخرى الإشارة إلى عدم القدرة على الوصول إلى الرعاية الصحية. وبينما من المرجح أن حصةً ملحوظةً من العراقيين سيتقبلون الحصول على لقاحات آمنة وفعالة (قرابة 67.8% من السكان بشكل عام)، يعتبر تقبل اللقاح أعلى لدى أسر النازحين العائدين (82.6%) بالمقارنة مع النازحين (70.9%)، وغير النازحين (61.6%). وتشير النتائج إلى أن موافقة الحكومة أو صاحب العمل والسعر هما عاملان رئيسيان في تشجيع أخذ اللقاح.

الجدول 1: ملخص الإحصاءات حول العينات على المستوى الوطني، وغير النازحين (من إقليم كردستان العراق وإقليم الشمال)، والنازحين، والعائدين (%)

العائدون في إقليم الشمال		النازحون في إقليم كردستان وإقليم الشمال		غير النازحين في إقليم كردستان وإقليم الشمال		السكان بشكل عام (العينة الوطنية)		
كانون ثاني 2021	تشرين أول 2020	كانون ثاني 2021	تشرين أول 2020	كانون ثاني 2021	تشرين أول 2020	كانون ثاني 2021	تشرين أول 2020	
21.8	13.1	24.5	24.0	26.2	21.0	23.5	22.0	البطالة
4.0	6.8	17.2	11.7	3.7	3.2			الدخل من غير العمل (إن وجد)
8.3	14.6	25.3	14.7	3.0	4.3	6.1	5.1	عدم كفاية الوجبات
26.9	15.0	38.1	34.9	18.3	9.3	14.2	11.7	الصعوبات في الوصول إلى الأسواق
	11.1		10.3		21.3			التعلم خلال إغلاق المدارس
34.2	41.6	59.0	49.3	23.5	24.5	31.5	24.6	الصعوبات في الوصول إلى الرعاية الصحية
82.6		70.9		61.6		67.8		تقبل المطعوم

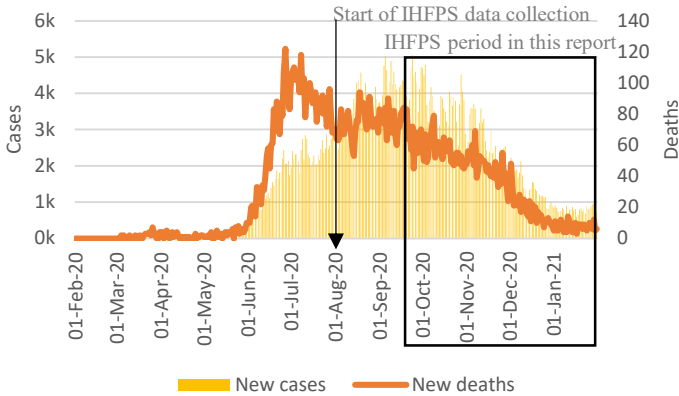
1.

Background

Iraq, like many other countries in the Middle East and North Africa (MENA) region, has been significantly impacted by the pandemic in terms of COVID-19 cases and deaths. Following the detection of the first case at the end of February 2020, the number of COVID-19 cases and related deaths increased drastically in June 2020 and declined steadily between June 2020 and January 2021 (Figure 1a). Among the countries in the MENA region, Iraq was the second most affected country after Iran in the number of COVID-19 cases and deaths (Figure 1b), and places in the middle of the region for deaths and cases on a per capita basis as of the end of the data collection period for this report, January 2021 (Figure 2). Given the highly urbanized population of many households living in close quarters, the limited healthcare capacity, and testing below the global average, the spread of the virus may be significantly higher than reported.

As an early response, both the Government of Iraq (GoI) and Kurdistan Regional Government (KRG) implemented strict mitigation measures to limit the spread of the virus. For instance, between March 17 and April 5, 2020, all airports in Iraq suspended operations for both outgoing and incoming passenger flights. Not only were airports closed, but the whole country was under a lockdown and with a curfew was instituted in major cities including Baghdad and Erbil. Restrictions generally followed the timeline of the pandemic; measures to curb the spread of the disease including restrictions on moving between cities or regions, limits on reasons and time during which people were allowed to leave home, and the extent of school closures or alterations became less stringent as the incidence of COVID-19 abated (Figure 3). During the period of complete lockdown from 31 July through 8 August 2020, only essential businesses such as pharmacies and grocery shops remained open. As of the end of the data collection period for this report, vaccination rates were near zero.¹

Figure 1a: Daily cases and deaths attributed to COVID-19 in Iraq as of January 31, 2021



¹ <https://covid19.who.int/region/emro/country/iq>

Figure 1b: Cumulative number of cases and deaths attributed to COVID-19 as of January 31, 2021

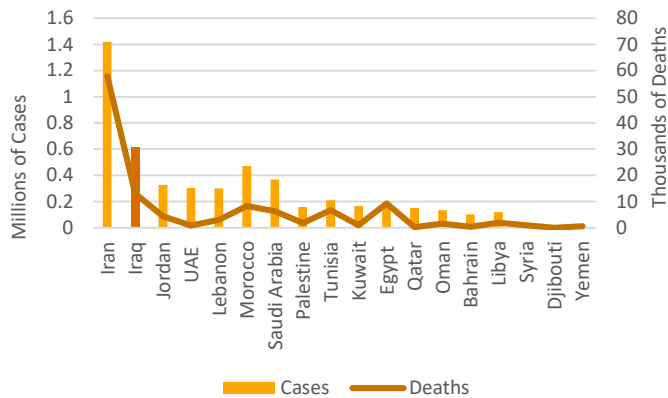


Figure 2: Cumulative COVID-19 cases and deaths per 1 million population as of January 31, 2021

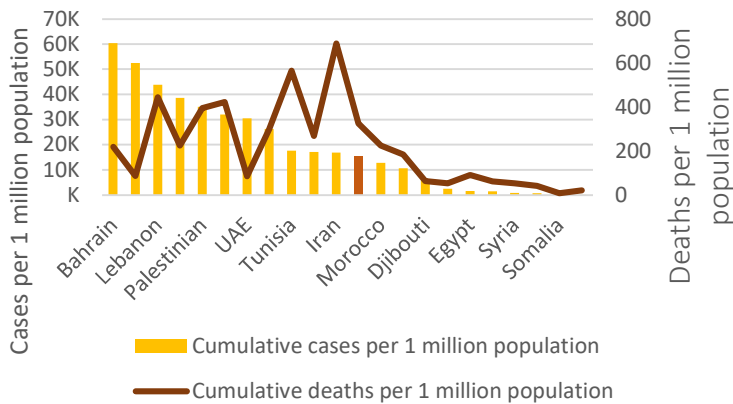
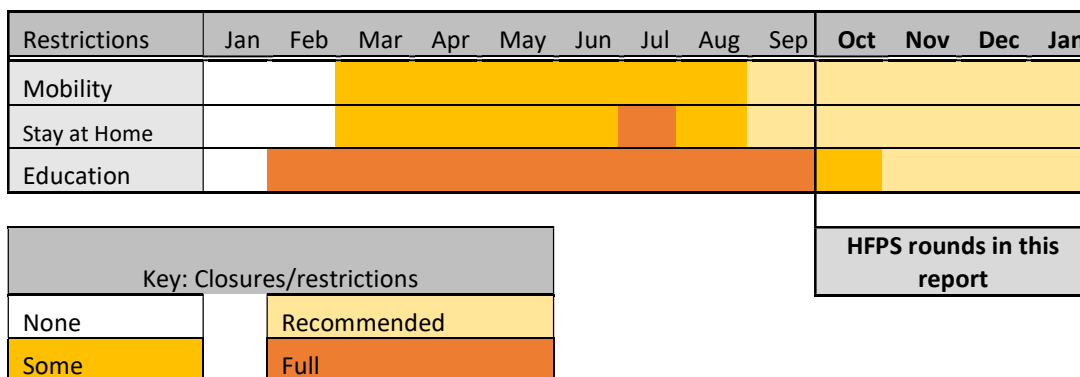


Figure 3: Timeline of some COVID-19 related stringency measures in Iraq, January 2020 -January 2021



Source (Figure 3): Hale et al. (2021). Oxford Government Response Tracker

Source (Figures 1a,1b-2): World Health Organization (WHO) Coronavirus Disease (COVID-19) Dashboard

The pandemic and the economic downturn have affected household welfare, likely increasing overall poverty and inequality. Even as disruption to supply chains could lead to an increase in basic prices, households' labor and non-labor incomes are likely to decrease due to the economic slowdown and reduced remittances. Public cash and food transfers were likely to be negatively affected by the tightening fiscal space of decreased government revenues that resulted from the plunge in international oil prices and slowed economy. Results from the first three rounds (i.e., August, September, and October) of the Iraq High Frequency Phone Survey (IHFPS) show that between March and September of 2020, the estimated unemployment rate in Iraq more than doubled (Krah, Phadera, & Wai-Poi 2021). A macro-micro simulation using the results from the phone survey suggests a disproportional impact of the pandemic on the poor and vulnerable, which would result in a significant increase in poverty and inequality (Box 1).

Box 1: Poverty and inequality impacts of COVID-19

A macro-micro simulation exercise was used to estimate the poverty impact of the COVID-19 pandemic and the devaluation of the Iraqi dinar in December 2020. The simulation combines the latest available household survey, SWIFT 2017/18, and macro projections and the information from the Iraq high-frequency phone survey implemented in late 2020 to provide essential parameters to calibrate the two shocks in the model. Using the consumption distribution in 2017/18 as a baseline, the model sequentially estimates the impact of the COVID-19 pandemic and the 2020 devaluation on population welfare.

The poverty impact of the pandemic is measured by comparing the national poverty rate estimated in 2017 (20.0 percent) to the projected poverty rate under the pandemic and devaluation scenarios. At the end of 2020, before the devaluation, the simulation projects a national poverty rate of 26.7 percent, suggesting that the pandemic, and its consequences on labor and non-labor income, increased the share of the population living under the poverty line by 6.7 percentage points. After accounting for the devaluation, the share of the population in poverty is projected to increase by an additional 2.9 percentage points. This puts the projected national poverty rate at 29.6 percent after the devaluation—a cumulative increase in the poverty rate of 9.6 percentage points since 2017.

Although the pandemic and its accompanying economic downturn are expected to increase poverty rates in all geographical regions of Iraq, the total effect is particularly large in the North and Center regions (+10.8 percentage points and +11.0 percentage points from the 2017 rates, respectively). The impact on poverty gap is expected to be highest among the Northern and Southern governorates (+4.3 percentage points and +4.9 percentage points) pushing those already poor deeper into poverty. Lastly, looking at subgroups of the population, poverty is expected to increase by 10.9 percentage points since 2017 among the youth (15 to 24 years old). Compared to 2017, poverty rates among women and female headed households are estimated to increase by 9.1 percentage points and 7.9 percentage points.

Because the crisis has disproportionately affected groups that were poor or vulnerable before the pandemic, it will likely increase overall inequality in Iraq. The Gini index is projected to increase by 1.5 from 29.6 in 2017 to 31.1 by the end of 2020. Both the Theil index and 10:10 ratio (consumption ratio between the 90th percentile and 10th percentile) are also expected to increase. The projected growth incidence curve between 2017 and 2020 shows a similar pattern, with the impact significantly greater for the poorer deciles.

Source: World Bank staff estimates from a Macro-Micro simulation based on the Rapid Welfare Monitoring Survey (SWIFT) 2017/18. The Macro-Micro simulation model for initial impacts of the pandemic, results presented in World Bank (2020), was updated with the new up-to-date Macro projections and the information from the Iraq high-frequency phone survey. Results presented are under a mild economic impacts of the pandemic (see World bank (2021), Box 1 for more).

This report presents results from four (4) rounds, October 2020 to January 2021, of the Iraq High Frequency Phone Survey (IHFPS). Part I of the report provides overall trends on labor market, household food consumption, cash and in-kind transfers, market/grocery store access, and healthcare access for the general population of Iraq. Part II focuses mainly on the trends of the above indicators for persons in Iraq affected by forced displacement from the ISIS incursion that began in 2014. Specifically, the report gives analysis of Internally Displaced Persons in locations of displacement (hereafter “IDPs”) in KRI and the North regions, and IDPs in locations of return (hereafter “returnees”) in the North. Non-displaced populations in these two regions are used as comparators.

2.

Data and
Methodology

Since August 2020, the World Bank has been collaborating with the World Food Programme (WFP), leveraging its expertise, and utilizing its mVAM infrastructure to implement Iraq's High Frequency Phone Survey (IHFPS). To thoroughly assess the current conditions and provide policy relevant recommendations, the survey included several socioeconomic modules in addition to the WFP's food consumption module. These modules included labor force participation and employment, education, public transfers, and access to market and healthcare. To understand the Iraqi population's perception and acceptance of COVID-19 vaccines, the recent rounds of the survey include a module on vaccine receptivity. More than 1,600 adult respondents took part in the survey each of the monthly surveys from August 2020 to January 2021) as part of the regular mVAM sample (the "national sample"), which includes a nationally representative sample of the population of Iraq, including refugees and IDPs, although the sample size of these groups in the mVAM sample is not large enough to allow for robust disaggregation for these subpopulations².

After the August 2020 round, the sample size was increased to accommodate separate strata for Internally Displaced People (IDPs) and returnees. Because almost all IDPs in Iraq are currently located in the three governorates of the Kurdistan region and five governorates of the Northern region, the coverage of the mobile phone survey for the IDP sample focused on these two regions. Similarly, since internally displaced households that have returned recently are concentrated in the five governorates of Northern region, the returnee sample is limited to those residing in this region. Table 1 in Annex III presents the distribution of IDPs and returnees by governorates. While 92 percent of IDP households are currently present in the two regions of KRI and the North, returnees in the North account for almost 97 percent of the total returning IDP.

All major Mobile Network Operators (MNOs) active in Iraq were included within the sampling frame to ensure a representative sample. The sample size was designed to detect changes in the prevalence of food insecurity (mainly people with inadequate food consumption) at governorate level as reported in the 2016 Comprehensive Food Security and Vulnerability Analysis (CFSVA) survey in Iraq (Krah, Phadera, & Wai-Poi, 2021). Mobile phone respondents aged 18 years or over, qualified for the interview. While the survey was designed to be a panel, respondents that could not be tracked were replaced with new respondents in order to meet the required monthly and geographical quota.

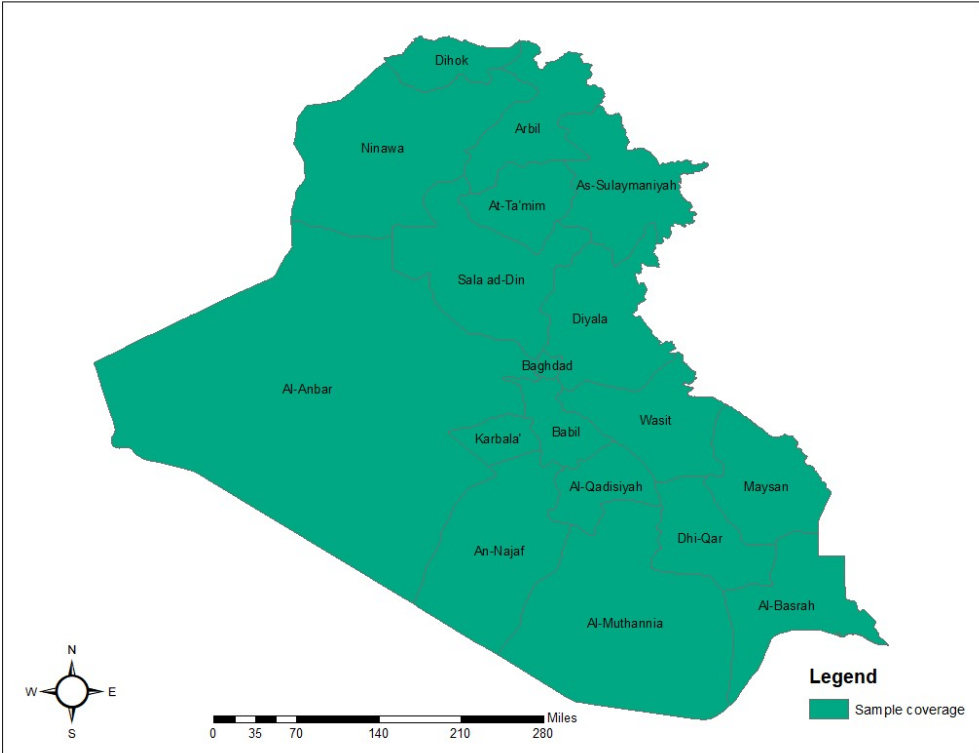
To make the sample as representative as possible at regional and national levels, we constructed cross-sectional survey weights for IDPs, returnees, and non-displaced households for each round. Despite being cost-effective, flexible and rapid, the sample may be biased towards the type of household that owns a working mobile phone number and has access to electricity and a network to charge and connect the phone. Therefore, using the nationally representative Multi Indicator Cluster Survey (MICS) 2018 as a reference survey, the initial sampling weights through Propensity Score Matching (PSM) and post-stratification procedures. Three set of weights - household, population, and adult – were created to make the phone survey resemble the distribution of the specific population in the MICS survey. Details on the sampling frame, weight calculation and the reweighting procedure for the national sample can be found in Annex I and II of Krah, Phadera, & Wai-Poi (2021). Similarly, Annex II and III of this report detail the sampling frame and reweighting procedure for the IDPs and returnees. The adult weights are used to calculate respondents' labor market (e.g., unemployment rates) indicators, household weights are used for indicators such as access to markets, that are assumed constant for all members within a household, the rest of the statistics are weighted using population weights.

The balance of the report is divided into two main parts (Part 1 & 2 in sections III & IV respectively): In part 1 (section III), we provide trends of key economic indicators focusing on the regular national mVAM sample

² Please see Krah, Phadera & Wai-Poi (2021) for a discussion of sampling strategy and design of the regular mVAM sample, and results from the first three rounds of August, September, and October 2020.

covering all of Iraq. These indicators are labor market (i.e., labor force participation and unemployment), household food consumption, in-kind assistance, access to markets/grocery stores and healthcare services, child learning, and attitudes towards COVID-19 vaccination. In part 2 (section IV), we discuss the trends in these indicators, with a focus on IDPs and returning IDPs.

Figure 4: Map Iraq showing the coverage of the national sample.



3.

National Sample

(TRENDS IN LABOR MARKET AND HOUSEHOLD WELFARE INDICATORS)

Table 1 reports summary statistics of respondents and household characteristics for the national sample. In all the four rounds of the monthly survey in this report (October 2020 to January 2021), most of the respondents were males (64 percent), have secondary or higher level of education (about 65 percent) and are the household's main breadwinners (64 percent). The average age of the respondents was 37 years. While the average household size is approximately 7, most (71 percent) reported currently owning the dwelling in which their family was living.

Amid the pandemic, labor force participation among working-age adults (age 18 to 64 years) remained comparable to the pre-pandemic level, above 61 percent throughout. After a slight dip in the labor force participation from 67 percent (pre-pandemic) to 61 percent in September 2020, labor force participation has started to catch up to the pre-crisis level (Figure 5). It is important to note that males dominate the labor force, with a participation rate of above 85 percent throughout the observed period. The proportion of females participating in the labor force remains below 47 percent throughout. Although the share of females participating in the labor market increased from nearly 36 percent in September to 45 percent in November, it dropped to 40 percent in January 2021 (see Figure A of Annex I). See Krah, Phadera, & Wai-Poi (2021) for a discussion of the August, September, and October 2020 survey rounds' results on labor force participation.

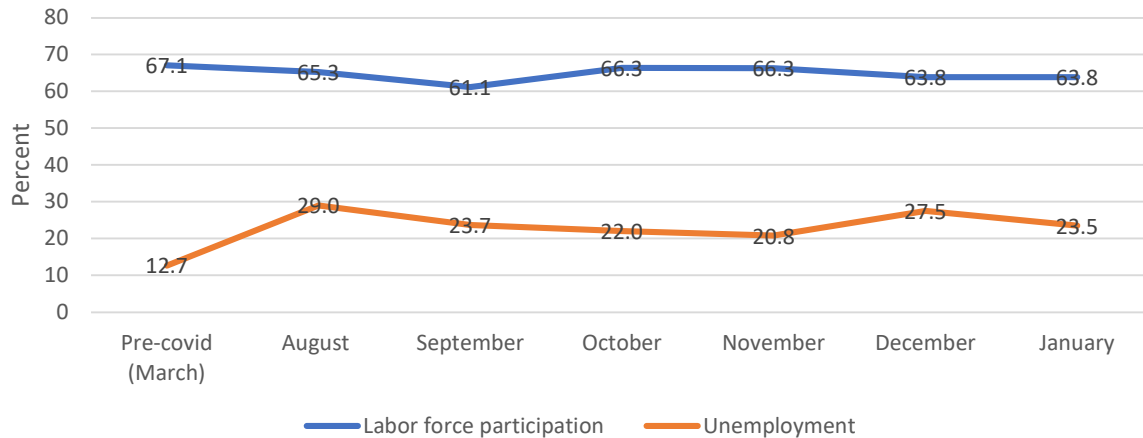
Table 1: Respondents and household characteristics (by survey round)

Characteristic	October	November	December	January
Percent of respondents who are male	64.2	64.4	67.2	67.8
Percent of respondents with secondary or higher level of education	66.5	63.7	65.7	66.7
Percent of respondents who are breadwinners	63.5	63.3	64.4	64.8
Average age of respondents	37.1	37.0	36.7	36.7
Average household size	7.7	7.6	7.6	7.6
Percent of respondents living in a dwelling that their household owned	71.0	71.4	71.2	70.4
Sample size	1623	1629	1614	1651

Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

The unemployment rate in Iraq remained higher than the pre-pandemic level of 12.7 percent. The respondents in the first round (August 2020) of the survey were asked about their pre-pandemic employment status during February 2020. Based on their recalled responses, the pre-pandemic unemployment rate was estimated to be 12.7 percent, which increased to 29.0 percent in August 2020. Although the figure has dropped since August, it remains high at over 20 percent. Unemployment among female labor force participants has remained high at over 42 percent since August (see Figure A of Annex I).

Figure 5: Labor market indicators



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Not only has the pandemic impacted the labor market in Iraq, but it has also brought about important food consumption concerns. While the share of Iraqis consuming inadequate diets (those with poor and borderline food consumption scores) decreased between August and November 2020 (from 6.0 to 4.1 percent), the figure increased to 6.1 percent in January 2021, thus edging past the figure observed in August, when lockdown measures were in place. The overall trend, however, masks spatial heterogeneity. In comparison to the urban population, a significantly higher percentage of those in rural areas consumed inadequate diets during the period from August 2020 to January 2021 (Figure 6).

A stable but high share of Iraqis employed at least one of the five (5) consumption-based coping strategies due to lack of food or money to buy food. The share of the population employing food-related coping strategies stayed within a narrow 4 percentage point band of 43.2 to 47.2 percent over the six months from August 2020 to January 2021 (Figure 7).

Figure 6: Population with insufficient food consumption

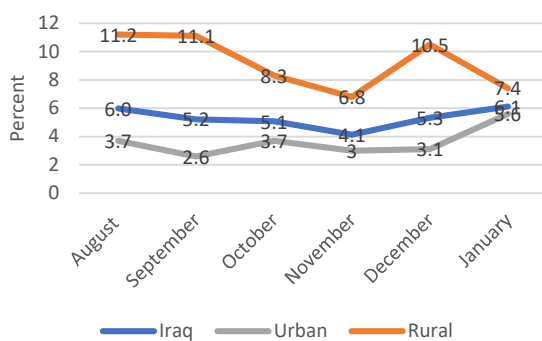
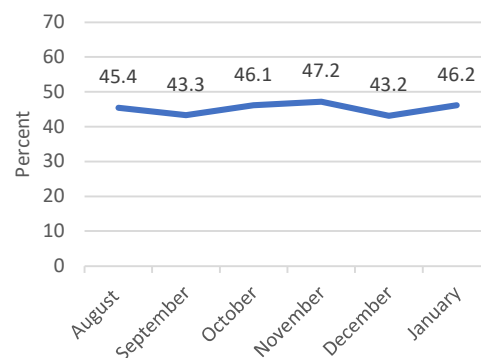


Figure 7: Population who employ at least one of the 5 consumption-based coping strategies



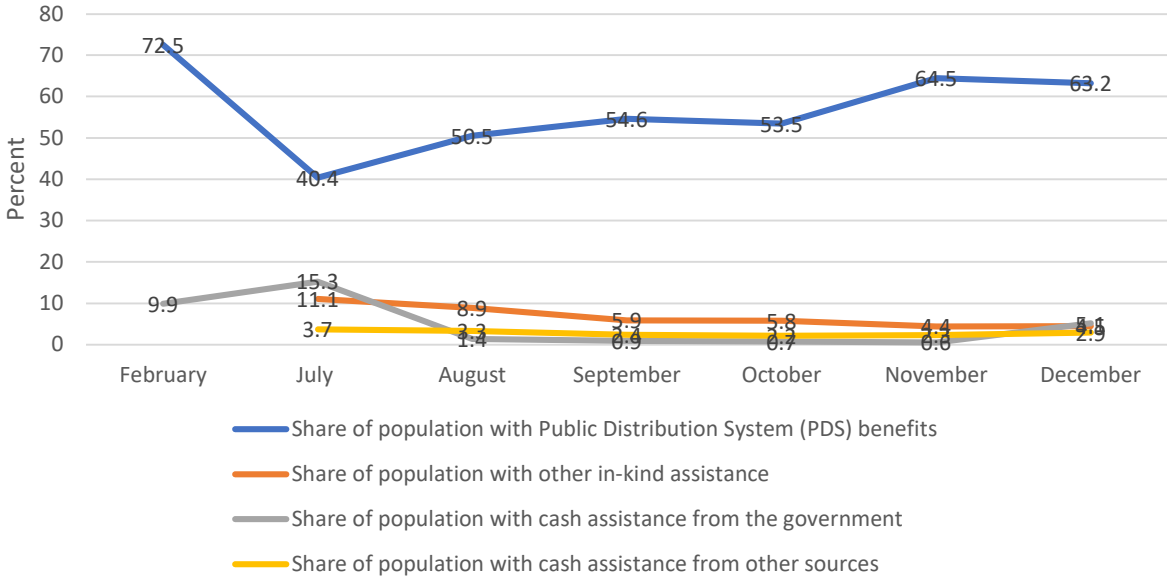
Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Use of government in-kind and cash transfers contracted during the pandemic. Although the share of the Iraqi population receiving food rations from the Public Distribution System (PDS) declined sharply between February (pre-pandemic) and July 2020, it has since trended upward but still is yet to reach pre-pandemic levels. The share of the population receiving any food rations from the PDS decreased from 72.5 percent in February 2020 to 40.4 percent in July 2020. However, the figure has since increased by 21.8 percentage points to 63.2 percent between July and December 2020 (Figure 8).

The share of Iraqi households receiving cash assistance from government programs such as the poverty-targeted Unconditional Cash Transfer (UCT) and Social Safety Nets (SSN), has fallen below pre-pandemic levels. Approximately 10 percent of Iraqis reported receiving cash benefits from the government's SSN program in February 2020 (calculated using recalled responses from the August 2020 round of the survey). In July, however, during the temporary Minha grant program, 15.3 percent reported receiving cash assistance from the government through both the SSN and Minha initiatives. This figure dropped to less than 2 percent in December by which time the temporary Minha program had already ended (Figure 8).

Cash and in-kind assistance from sources outside the government also decreased. In July 2020, 11.1 percent of Iraqis received in-kind assistance from sources other than the PDS; however, that figure decreased by 6.6 percentage points to 4.5 percent by December 2020 (Figure 8).³

Figure 8: In-kind and cash assistance



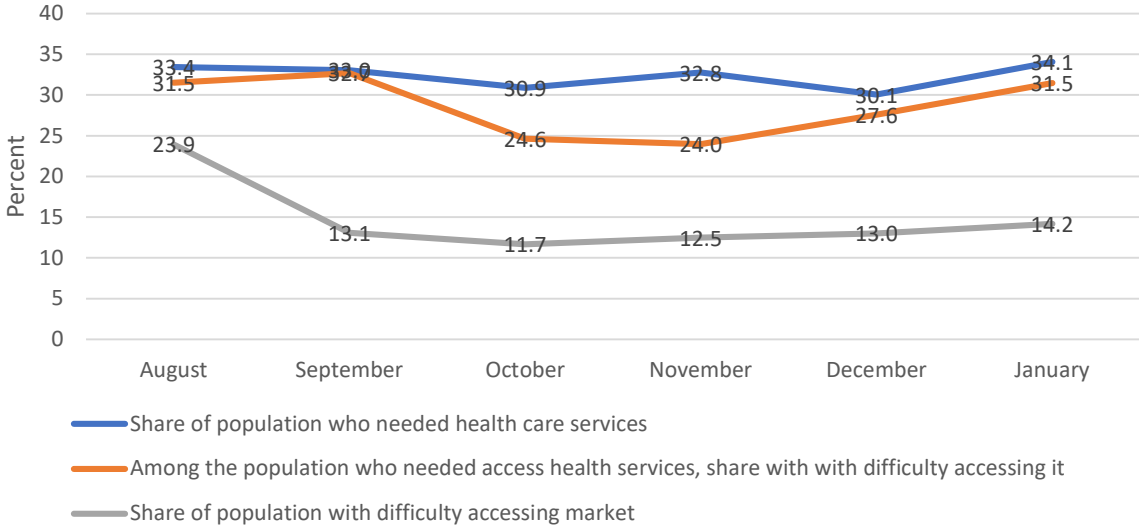
Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

³ The survey asks respondents about any assistance, in-kind and cash transfers, households received in the month previous to the month of the interview. Therefore, information regarding these indicators is lag by a month.

Although a significant share of Iraqis faced challenges accessing markets or grocers, their overall access improved following the end of the lockdown in August. When respondents were asked if they or any member of their households experienced any challenge(s) accessing markets and grocery stores, 23.9 percent indicated that they faced difficulties when asked in August 2020. By January 2021, the proportion of the population experiencing such difficulties had dropped by 9.7 percentage points to 14.2 percent.

Iraqis also struggled to access healthcare services. In August 2020, 33.4 percent of Iraqis reported that they needed health care services, and of those, just under one third (31.5 percent) reported difficulty in accessing these services. Those difficulties eased through October and November but climbed back up to August 2020 levels by early 2021 (Figure 9).

Figure 9: Access to services

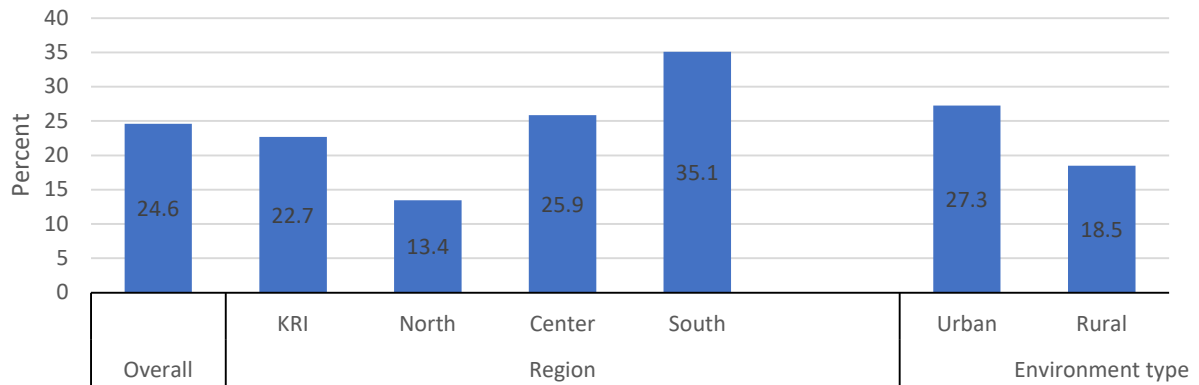


Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using household survey weights.

3.1 COVID-19 tests and vaccination in Iraq

COVID-19 testing in Iraq remains relatively low. To understand the status of COVID-19 testing in Iraq, the December 2020 and January 2021 rounds of the survey solicited information on whether respondents had been tested for the COVID-19 virus. As of December, 24.6 percent of Iraqis had been tested for COVID-19 (Figure 10). There is heterogeneity across regions in the share of the population tested for the virus: the South has the highest share (35.1 percent), followed by the center (25.9 percent) and KRI (22.7 percent), while the North has the lowest share of the population that reported being tested for the virus (13.4 percent). Similarly, there is a nearly nine percentage point gap between the tested share of the urban (27.3 percent) and rural (18.5 percent) populations in Iraq.

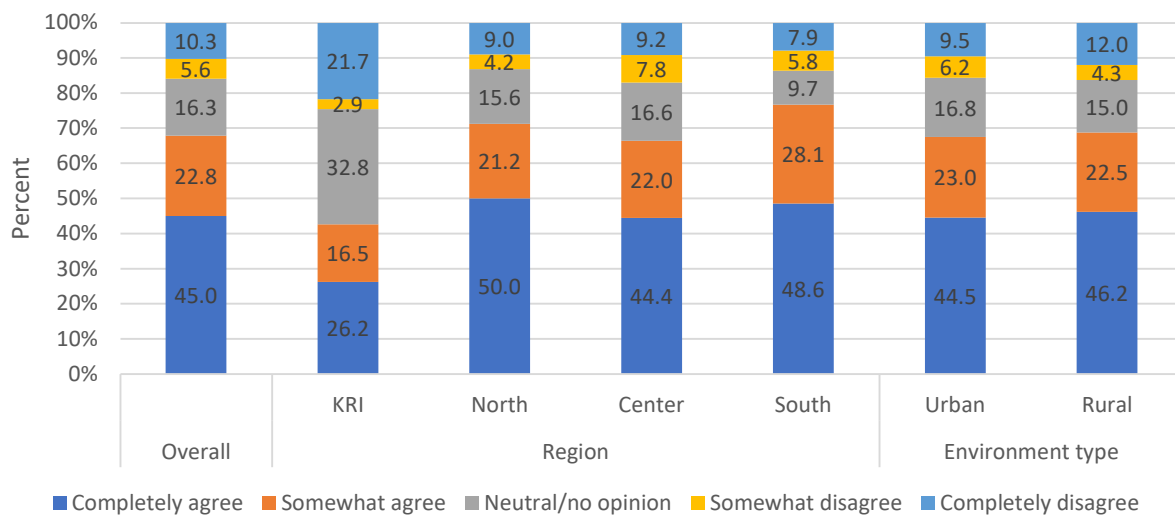
Figure 10: Share of the population who have been tested for COVID-19 as of January 2021



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Overall, a significant portion of Iraqis are likely to accept safe and effective vaccines, but acceptance still varies across regions. The range of opinions held by Iraqis regarding COVID-19 vaccines in December 2020 is noteworthy. Overall, 45 percent of respondents in December 2020 indicated that they completely agreed with the statement “I would accept a COVID-19 vaccine which is proven to be safe and effective”; while 28 percent indicated that they somewhat agreed. About 10 percent of Iraqis completely disagreed with the statement “I would accept a COVID-19 vaccine which is proven to be safe and effective”. These overall figures, however, mask spatial heterogeneity in Iraqis' willingness to accept safe and effective COVID-19 vaccines. Approximately 50 percent of the population in the North completely agree with the statement “I would accept a COVID-19 vaccine which is proven to be safe and effective”; followed closely by the South (48.6 percent) and a comparatively small share (26.2 percent) of the population in KRI (Figure 11).

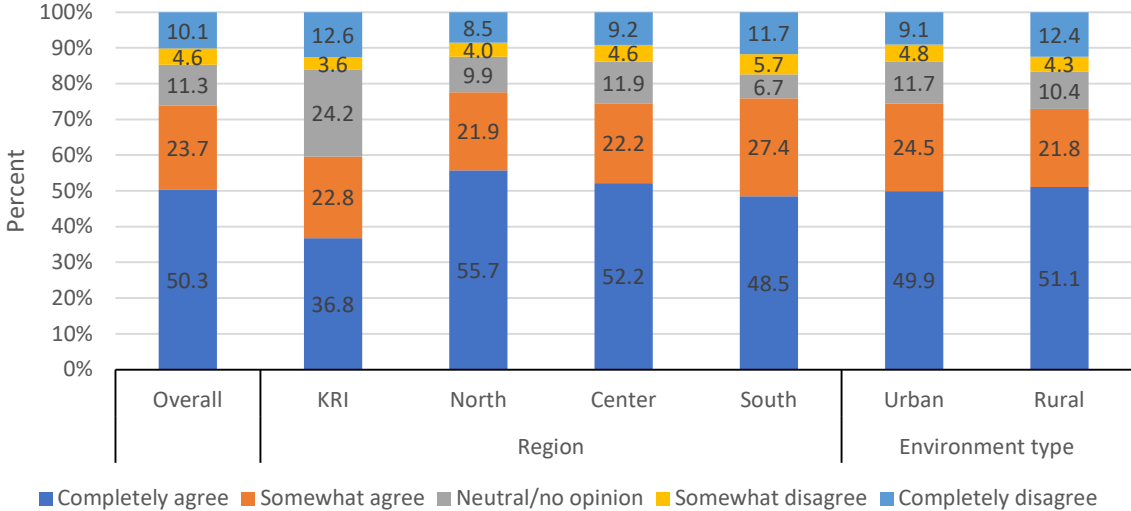
Figure 11: To what extent do you agree with the following statement: “I would accept a COVID-19 vaccine which is proven to be safe and effective.”



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Endorsement of a COVID-19 vaccine by employers and government seems to improve receptivity. A nontrivial 5 percentage point increase in the proportion of the overall population who indicated they completely agreed with the statement “I would accept a vaccine if it were recommended by my employer and was approved safe and effective by the government” arose in December 2020. The results (Figure 12) suggest that half of Iraqis were willing to accept safe and effective vaccines should those vaccines be recommended by the government. Every region except of the South shows a similar pattern of increased receptivity when employers and government endorsed a vaccine. Yet, while 55.7 percent of respondents from the North completely agree with the statement above, only 36.8 percent of respondents from KRI hold a similar view.

Figure 12: To what extent do you agree with the following statement: “I would accept a vaccine if it were recommended by my employer and was approved safe and effective by the government.”



Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

4.

Internally Displaced Persons (IDPs),
Returnees, and
Non-displaced Persons from
KRI and the North

The booster sample for IDPs was drawn from two regions: the North and KRI, and the returnee sample was drawn from the North region. While 1.2 million Iraqis still remain displaced, more than 4.8 million of the 6.1 million that fled as a result of the ISIS conflict have returned to their area of origin (IOM Iraq, 2021). These two samples cover those that are still displaced as well as those that have returned to their area of origin. Since almost all IDPs in Iraq are currently located in the three governorates of the Kurdistan region and the five governorates of the Northern region, we limit the coverage of the internally displaced booster sample to these two regions (hereafter called the “IDP sample”). Similarly, the sample for internally displaced households that have returned to their areas of origin comes entirely from the Northern region (hereafter called the “returnee sample” or the “Returning IPD sample”). To facilitate comparability, the non-displaced households from the regular national sample is also limited to these two regions. Figure 13 shows the coverage of the IDP and returnee sample. The breakdown of the sample by population type and rounds are reported in Table 2.

Figure 13: Map of Iraq showing the coverage of IDPs and Returnee samples.

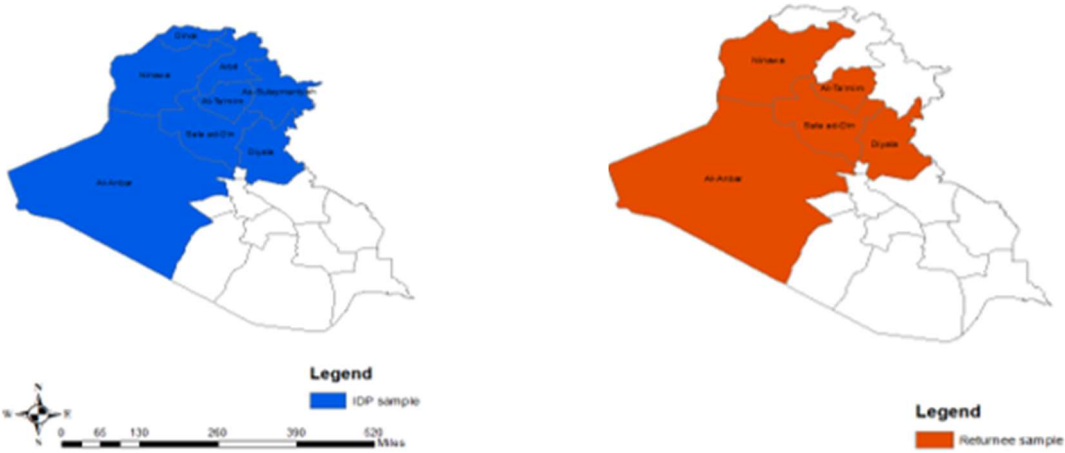


Table 2: Breakdown of sample size by sub-population and survey rounds

Sample	October	November	December	January
IDP	765	852	815	826
Returnee	610	611	607	612
Non-displaced in KRI and North	683	674	621	641

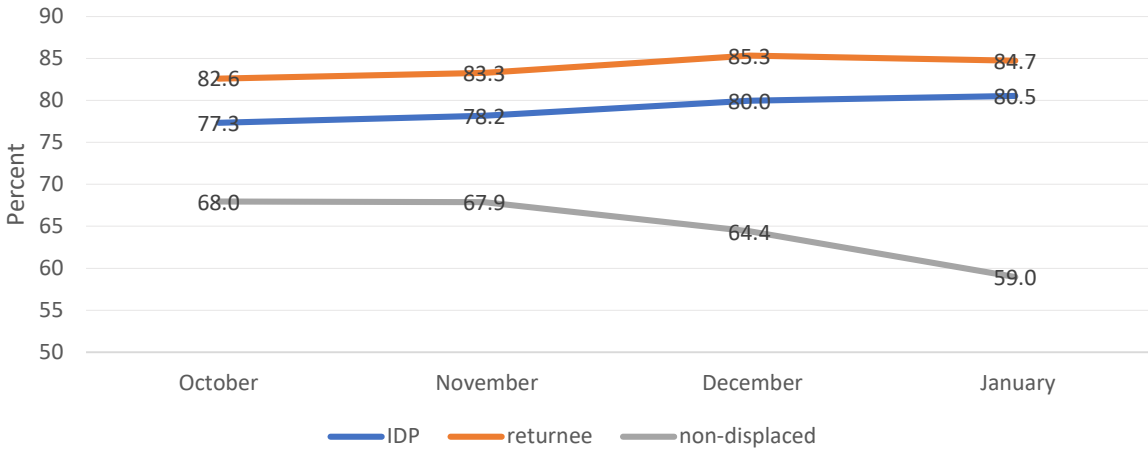
Table 3 reports summary statistics of respondent and household characteristics for the three samples. On average approximately 80 percent of IDP respondents sampled were male with an average age of 36 years, and a low proportion with secondary or higher-level education (27 percent); they were mostly breadwinners (80 percent), and few resided in IDP camps (26 percent). The average size of an IDP household is 8 members. Less than 4 percent of IDPs own the dwelling in which they currently reside. By comparison, about 90 percent of returnees sampled were male. They were a little older at 39 years of age, and few completed secondary / higher level education (24 percent), and they were also very likely to be breadwinners (85percent). The average household size

of a returnee household is also 8 members, but in contrast to IDPs, about 46 percent of returnees owns the dwelling in which they currently resided. Finally, on average 67 percent of the non-displaced sampled were male, were the same age as IDP respondents at 36 years, and are far more likely to have secondary or higher level of education (about 66 percent); fewer respondents in the non-displaced sample were breadwinners (62 percent). Non-displaced households tend to be smaller at 7 members. Over 65 percent of non-displaced respondents own the dwelling in which they reside.

4.1 Labor market

Participation in the labor force among the working-age population (18 to 64 years) is high, especially among IDPs and returnees. Labor force participation trends reported in Figure 14 show that between October 2020 and January 2021, 83 percent of returnees participated in the labor force. This is followed closely by IDPs (averaging over 78 percent). In contrast, labor force participation among the non-displaced population follows a decreasing trend. Non-displaced labor force participation dropped 9 percentage points from 68 percent in October 2020 to 59 percent in January 2021 (Figure 14).

Figure 14: Labor force participation rate (% of working-age population 18 to 64)



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Table 3: Respondents and household characteristics (by survey round)

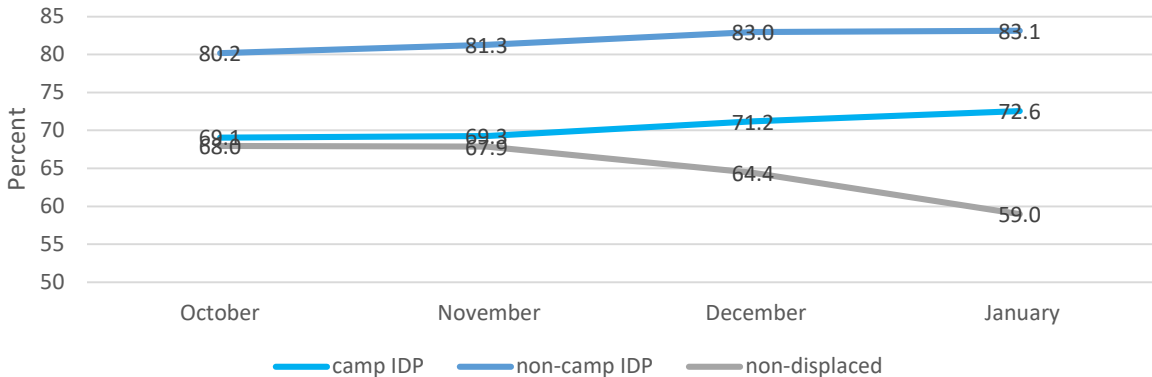
Characteristics	IDPs			
	Oct.	Nov.	Dec.	Jan.
Percent of respondents who are male.	81.2	79.9	81.6	79.2
Average age of respondents	36.4	36.1	36.2	36.2
Percent of respondents with secondary or higher level of education	24.6	26.6	27.8	28.0
Percent of respondents who are breadwinners.	80.0	76.7	79.7	80.7
Share of IDPs in camp	25.7	25.7	25.3	24.6
Average household size	7.4	7.6	7.7	7.7
Percent of respondents living in a dwelling that their household owned	4.3	2.3	3.0	4.1

Characteristics	Returning IDPs			
	Oct.	Nov.	Dec.	Jan.
Percent of respondents who are male.	88.1	90.0	90.4	90.9
Average age of respondents	39.5	39.8	38.8	39.1
Percent of respondents with secondary or higher level of education	19.4	23.2	24.2	26.2
Percent of respondents who are breadwinners.	88.4	86.1	85.3	82.5
Share of IDPs in camp				
Average household size	7.8	8.0	7.9	7.9
Percent of respondents living in a dwelling that their household owned	48.4	45.8	45.3	48.2

Characteristics	non-displaced			
	Oct.	Nov.	Dec.	Jan.
Percent of respondents who are male.	67.2	65.7	67.8	69.6
Average age of respondents	36.1	36.2	35.5	35.0
Percent of respondents with secondary or higher level of education	66.6	63.4	66.4	66.1
Percent of respondents who are breadwinners.	60.8	61.8	63.1	61.7
Share of IDPs in camp				
Average household size	7.3	7.1	7.3	7.3
Percent of respondents living in a dwelling that their household owned	61.2	65.8	67.0	64.2

Within the IDP population, camp-based IDPs participate in the labor force at consistently lower rates than those not living in camps. Against the backdrop of decreasing labor force participation among the non-displaced population discussed above, camp and non-camp IDPs' labor force participation rates follow parallel trends with a slight increase over time. However, there is a consistent gap of 10 percentage points between camp and non-camp IDPs. Over 80 percent of non-camp IDPs participated in the labor market between October 2020 and January 2021 (Figure 15). During the same period, a little over 70 percent of camp IDPs participated in the labor market.

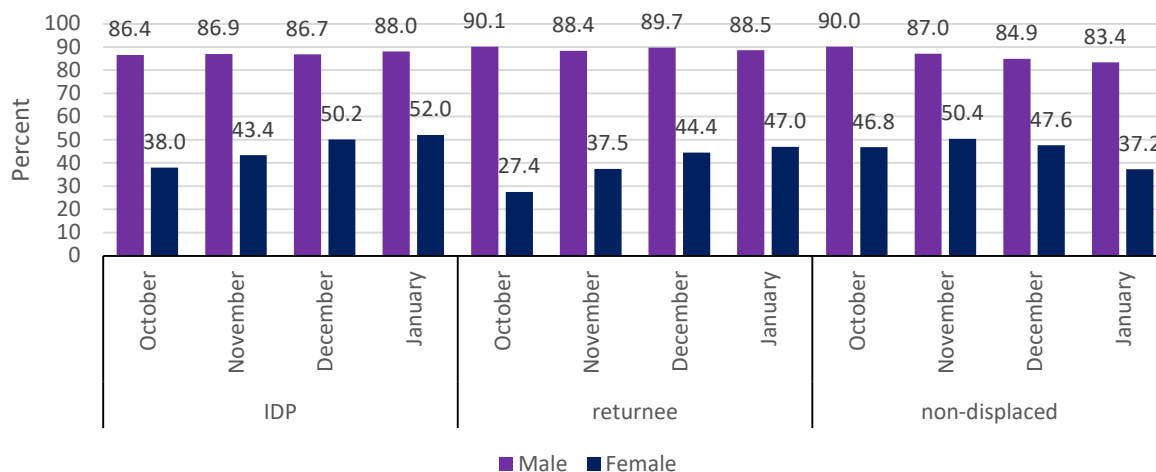
Figure 15: Labor force participation rate (% of working-age population) by camp vs. non-Camp



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Gender differences within the labor force are pronounced within all three sub-population groups. Because the sample selection for respondents is not gender neutral and the sizes of females is comparatively small for the displaced samples, the trends for female labor force observed in the data are instructive but should not be taken as conclusive. As shown in Figure 16, males dominate the labor force. A breakdown of labor force participation shows that more than 83 percent of working-age males across the three groups participated in the labor force between October 2020 and January 2021. Although labor force participation among females remained low (i.e., below 53 percent across all three groups), female IDP and returnee participation shows an upward trend. For instance, 38 percent of working-age female IDPs participated in the labor market in October 2020 but more than half (52 percent) participated by January 2021—a 14 percentage point increase. Similarly, while 27.4 percent of working-age female returnees participated in the labor market in October 2020, 47 percent participated in January 2021—, a 20.4 percentage point increase. Yet, non-displaced female respondents followed the opposite trend, starting high in October 2020 when 46.8 percent were engaged in some form of work or actively seeking work, and moving even higher to 50.4 percent in November, before falling 13.2 percentage points to 37.2 percent by January 2021 (Figure 16).

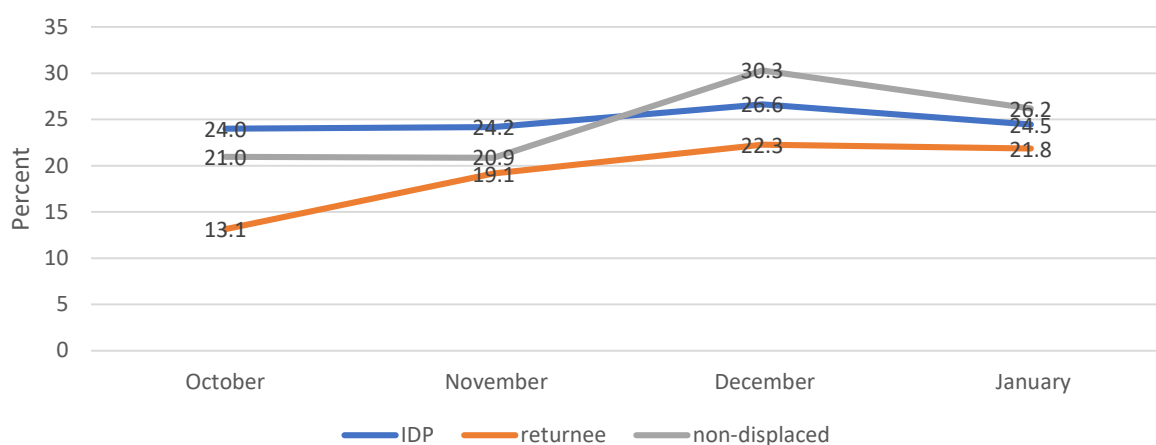
Figure 16: Labor force participation rate (% of working-age population 18 to 64) by gender



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Many working-age adults seeking jobs are unable to find one. Unemployment rates among working-age IDPs, returnees, and non-displaced populations largely converged by January 2021. Among the non-displaced population, 21 percent of those in the labor force were unemployed in October 2020 (Figure 17). This figure is higher than the national pre-pandemic unemployment rate in Iraq of 12.7 percent (Krah, Phadera, & Wai-Poi, 2021). Unemployment amongst the non-displaced population increased by almost 10 percentage points from 20.9 percent in November to 30.3 percent in December. Unemployment remained worryingly high at 26.2 percent in January 2021 (Figure 17). Although stable, the unemployment rate among IDPs was also high, remaining above 24 percent between October 2020 and January 2021. The unemployment rate among returnees was below that of IDPs and non-displaced, but that gap has narrowed considerably; in October unemployment was relatively low at 13.1 percent, but it increased to 21.8 percent in January 2021 (Figure 17).

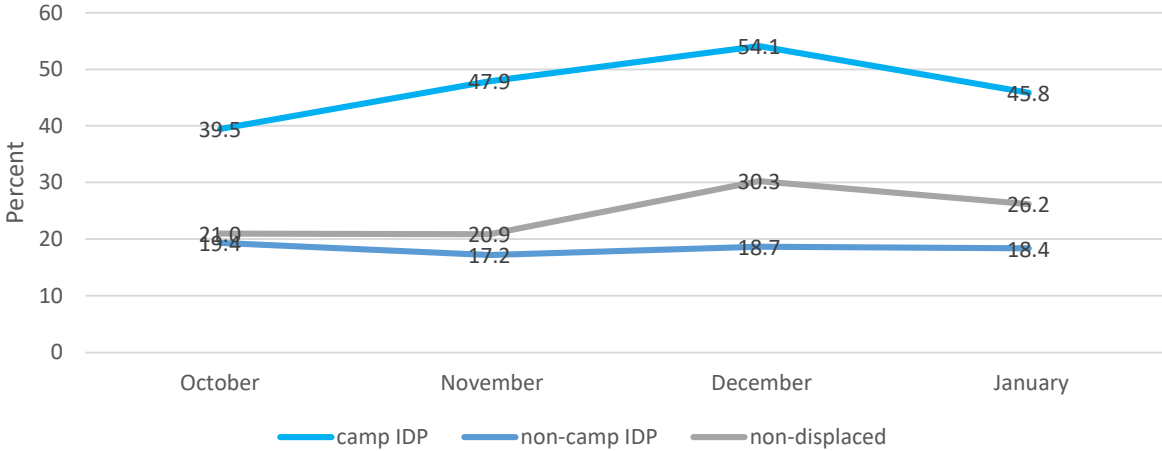
Figure 17: Unemployment rates (% of working-age population 18 to 64)



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Camp IDPs were far more likely to be unemployed than Non-displaced or returnees. Although high, the unemployment rates among non-camp IDPs remained stable and below 20 percent between October 2020 and January 2021—slightly lower than even the non-displaced population. In contrast, the unemployment rate among camp IDPs remained above 39 percent between October 2020 and January 2021. Unemployment among camp IDPs increased by 14.6 percentage points between October and December from 39.5 percent to 54.1 percent in December, and then dropped back to 45.8 percent in January 2021 (Figure 18). These results coincide with the broader trends but are more pronounced; while many in Iraq may be actively looking for work, a considerable proportion of such job seekers are not employed – this is particularly true for camp IDPs.

Figure 18: Unemployment rate (IDPs) (camp, non-camp IDPs and non-displaced)



Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Most working-age Iraqis were employed within the private sector. Among working-age adult IDPs, more than 55 percent were employed in the private sector (Figure 19). A similar trend is observed for returnee and non-displaced households. Over 51 percent of working returnees and 33 percent of non-displaced workers are engaged by the private sector. The public sector continues to play a significant role in employment provision, particularly for the non-displaced population. While less than 10 percent of working-age IDPs are employed in the public sector, over 20 percent of working-age non-displaced population work in the public sector. Over the observation period, employment in the public sector tends to decrease slightly if nonmonotonically in all three groups (IDP, returnee and nondisplaced).

Figure 19: Respondents' employer type



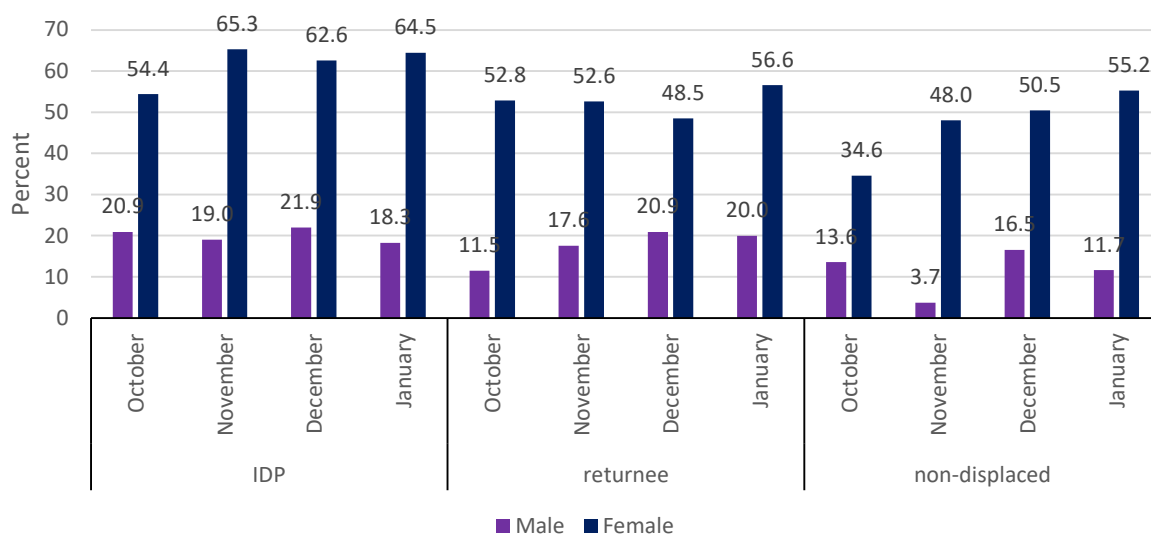
Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

Female unemployment was much higher than for males and tended to increase over time. The economic slowdown stemming from the pandemic is likely to blame for the increase in both labor market participation and unemployment as the demand for labor is unable to keep up with growing supply. Despite an increase in female IDP and returnee labor force participation between October 2020 and January 2021, a greater share of them remained unemployed. Amongst IDPs, 54.4 percent of working-age females who were actively seeking work in October did not find one, and this figure increased by 10.9 percentage points to 65.3 percent the following month and remained worryingly high for December and January. In contrast, the unemployment rate amongst male IDPs stayed relatively low (at around 20 percent) and slightly decreased over the period (Figure 20).

Female returnees actively seeking jobs also found it difficult to secure employment. Following a drop in unemployment from 52.8 percent to 48.5 percent between October and December 2020, unemployment for female returnees increased by 8.1 percentage points to 56.6 percent in January 2021 for a net increase of 3.8 percentage points over the period. The unemployment rate among male returnees was much lower than for females, but it nearly doubled from 11.5 percent in October to 20 percent in January. (Figure 20).

A clear trend in rising unemployment is evident among female respondents from the non-displaced North and Kurdistan regions sample. While 34.6 percent of working-age females in the non-displaced population were unemployed in October, the figure increased to 28.0 in November, 50.5 in December and 55.2 percent in January 2021. In contrast, unemployment oscillated among the working-age males in the non-displaced population; following a drop in the unemployment rate from 13.6 percent in October to 3.7 percent in November, the figure worryingly increased by 12.8 percentage points to 16.5 percent in December, before dropping to 11.7 percent in January 2021 (Figure 20). While informative, given the smaller number of female respondents in displaced samples, gender disaggregated indicators in this section are not conclusive.

Figure 20: Unemployment rate by gender

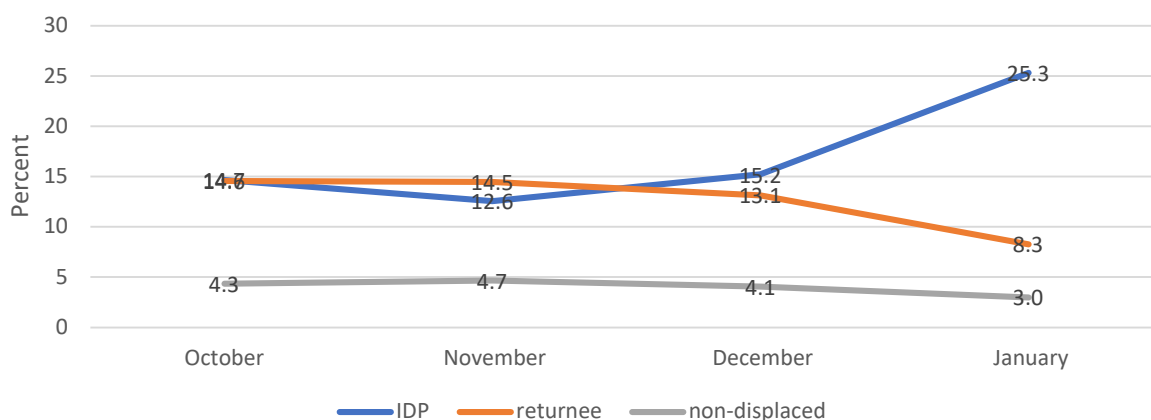


Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using adult survey weights.

4.2 Food consumption

Displaced households were more likely than non-displaced to consume an inadequate diet between October 2020 and January 2021; trends are most concerning for IDPs. The proportion of IDPs, returnees, and non-displaced whose diet was inadequate remained stable from October through December 2020, and displaced households' rates of having an inadequate diet were 8-10 percentage points higher than non-displaced households in those three months. However, in January, while non-displaced households continued on that stable trajectory to its lowest point of 3 percent, IDPs and returnees diverged significantly: inadequate diet among returnee households fell nearly five percentage points to 8.3% but increased by 10 percentage points to 25.3 percent for IDPs (Figure 21).

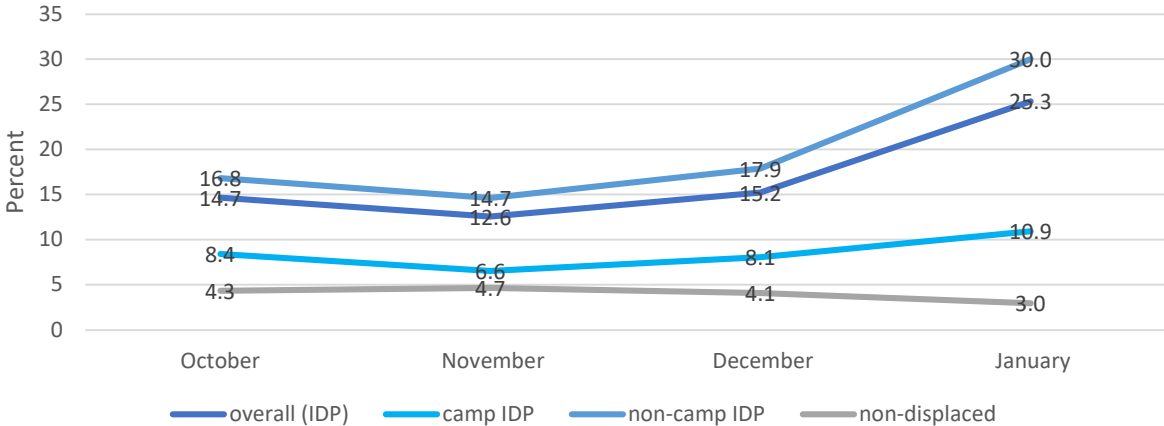
Figure 21: Proportion of the population that consumed inadequate diets.



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

The increasing trend of IDP households with an inadequate diet is largely driven by IDPs who do not live in camps. While there was an upward but flatter curve among camp-based IDPs, 10.9 percent had an inadequate diet by January 2021. IDPs who lived out of camps were far more vulnerable to food insecurity. After starting at 16.8 percent in October and dropping to 14.7 percent in November, the share of non-camp IDPs with an inadequate diet doubled in two months to 30 percent by January 2021 (Figure 22).

Figure 22: Proportion of the population that consumed inadequate diets (IDPs)



Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using population survey weights.
 Note: Households with Food Consumption Score (FCS) less than 35 are considered as households with inadequate food consumption. The method for calculating the FCS is described in Vulnerability Analysis and Mapping (World Food Programme, 2008).

A high share of the population across all three groups employed coping strategies when they lacked food or money to buy food. Over the observation period, more than half of the non-displaced population employed at least one of the five consumption-based coping strategies.⁴ Because food scarcity was more prevalent among displaced households, so too were coping mechanisms. Between October 2020 and January 2021 when IDP households lacked food and money to purchase food, 81 percent engaged in some type of coping strategy (Figure 23). Similarly, the results indicate that over 71 percent of returnees implemented at least one of the five consumption-based coping strategies between that same time period. Figure 25 illustrates the breakdown of the coping strategies employed by these households. Among the five strategies queried, “Reliance on less preferred and/or less expensive food due to lack of food or money to buy food” and “Borrowing food or reliance on help from a friend or relative due to lack of food or money to buy food” are the two main strategies employed by households in all three groups.

⁴ Coping strategies questions are designed to inform us on how households cope/manage when faced with shortfall in food consumption (Maxwell & Caldwell, 2008). Survey respondents are asked how many days in the previous 7 days did the household (i) rely on less preferred and less expensive foods, (ii) borrow food or rely on help from friends or relatives, (iii) limit portion size at mealtime, (iv) restrict consumption by adults in order for small children to eat, and (v) reduce number of meals eaten in a day. Based on the information on the 5 strategies, a weighted index called reduced Coping Strategy Index (rCSI) is created with the maximum possible rCSI score being 56. The higher the score, the higher the stress level of the household. See (Maxwell & Caldwell, 2008) for discussion on the methodology and interpretation.

Figure 23: Proportion of the population that implemented at least one of the five consumption-based coping strategies when the household did not have enough food / enough money to buy food.

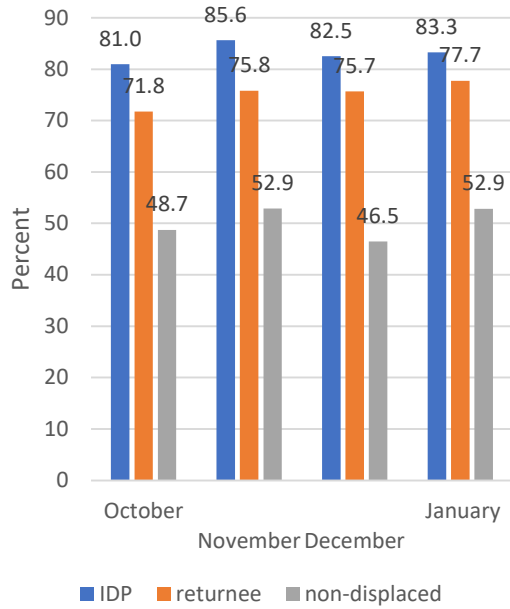
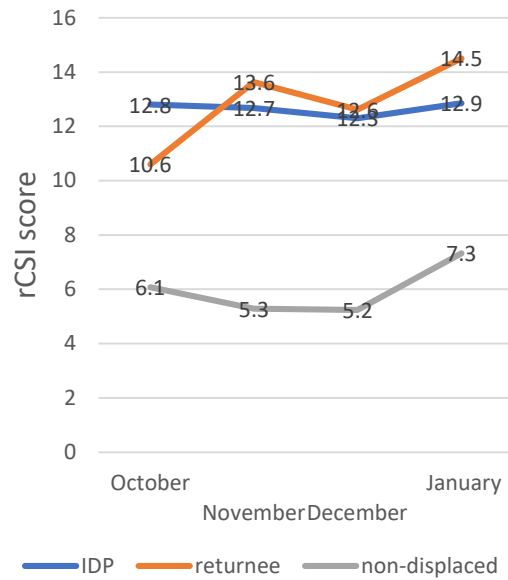
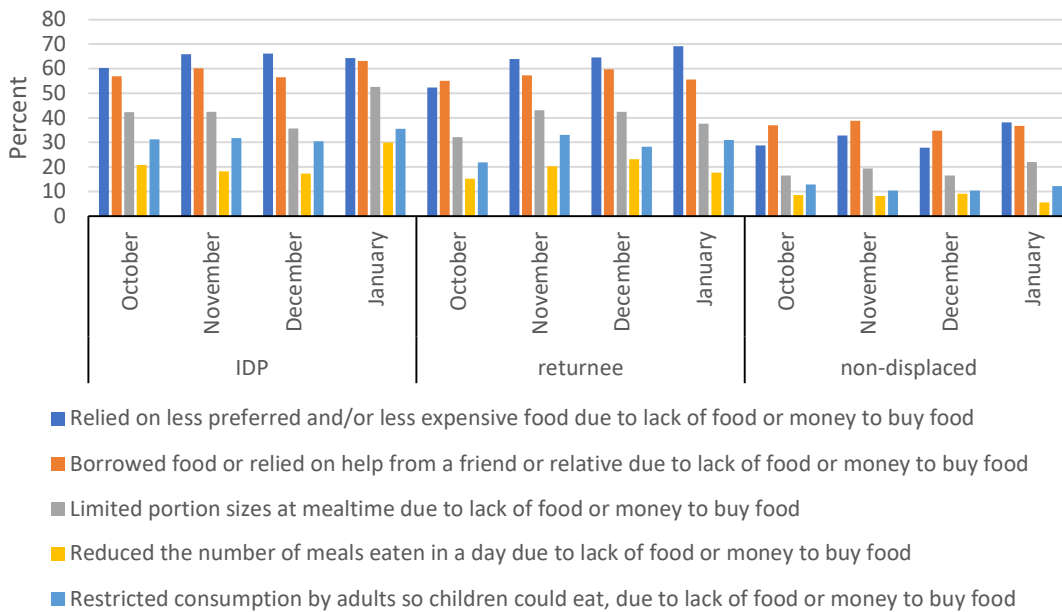


Figure 24: Average household reduced Coping Strategy Index (rCSI) score



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Figure 25: Coping strategies household employed in the 7 days prior to the survey.



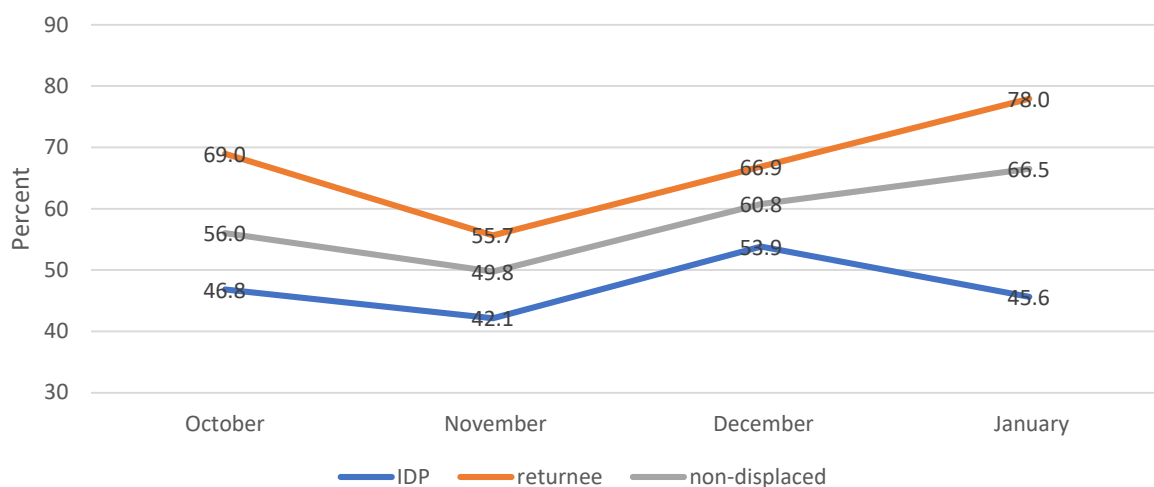
Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

4.3 Cash and in-kind transfers

When facing food consumption shortages, the Public Distribution System played an important role to deliver important food rations to the most vulnerable— including IDPs and returnees. Following a decline during the initial stages of the pandemic, the population that received food rations from the PDS trended upward after a dip in November 2020 among returnee and non-displaced. Still, service delivery on the extensive margin has yet to return to pre-pandemic levels. Although it takes up the majority of the country’s social protection budget and stresses its finances, the universal PDS supplies a sizable portion of recipients’ caloric intake and plays a salient role in Iraqi households’ overall welfare (World Bank, 2010). When accessible, the PDS plays a particularly important role during crises (Phadera, Sharma, & Wai-Poi, 2020). To monitor its accessibility during the pandemic, respondents in each round of the survey were asked whether they or any member of their families received food rations from the PDS in the month preceding the survey.

While the share of IDPs receiving PDS benefits decreased during the pandemic, the share of returnees benefitting from the program increased. While service for all three populations dropped in November 2020, only returnees and non-displaced recovered by January – to 78 and 66.5 percent, respectively. The use of the program by returnees was especially volatile, dropping by 13.3 percentage points between October and November 2020, before a two-month expansion of 16.7 percentage points in December and January. Among IDPs, the share that received PDS benefits bounced around significantly – including an approximate 12 percentage point jump in the month from November to December 2020 – before ending the observation period in January 2021 at 45.6 percent, slightly below the starting value of 46.8 percent recorded in October 2020. Interestingly, returnees are the most likely to receive PDS transfers – even outpacing non-displaced households (Figure 26). Consistent with the previous finding (Phadera, Sharma, & Wai-Poi, 2020), IDP households are less likely to receive PDS. A household’s ration card is linked to a specific local ration agent. When migrated, the household needs to transfer the linkage to a new agent at the place of destination, which requires a substantial amount of paperwork including the proof of an official residency at the new place.

Figure 26: Proportion of population who received PDS Transfers in the previous month

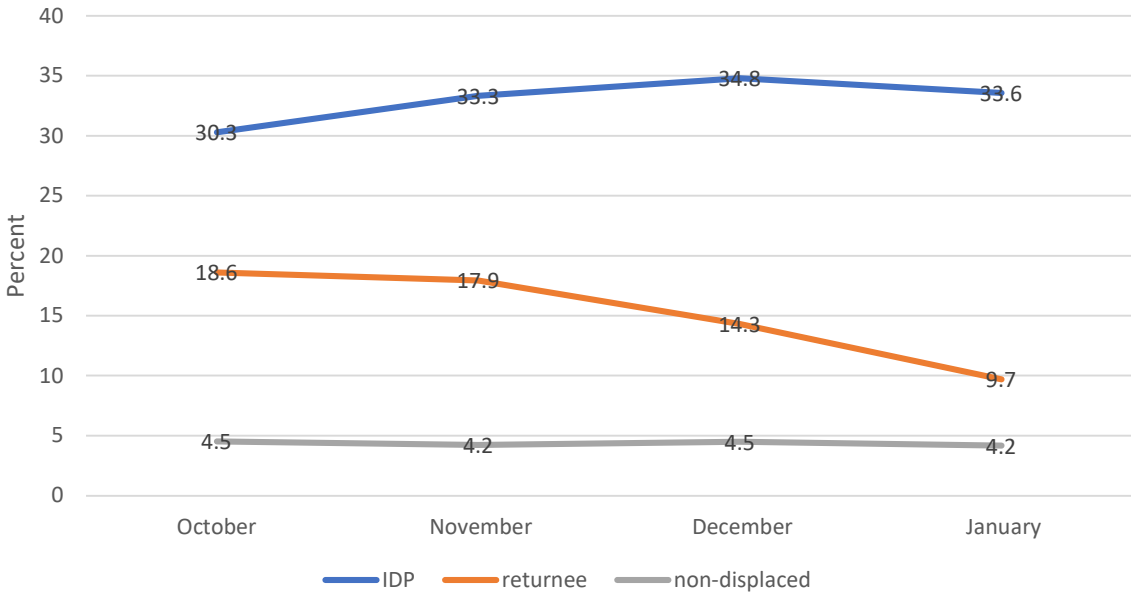


Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

In-kind transfers from other sources (beyond the PDS) are more likely to help IDPs than returnees and non-displaced populations. Just shy of one third of IDPs received in-kind assistance from sources other than the PDS in October, and this figure increased by 3.3 percentage points to 33.6 in January 2021. While the share of IDPs receiving in-kind assistance from sources other than PDS increased for IDPs, the share of returnees receiving such assistance decreased from 18.6 percent in October to 9.7 percent in January 2021 – an 8.9 percentage points reduction. The striking divergence in assistance between IDPs and returnees doubled from 12 percentage points in October to 24 points in January 2021. By contrast, the share of non-displaced households receiving in-kind assistance from other sources remained strikingly constant at a little over 4 percent between October 2020 and January 2021 (Figure 27).

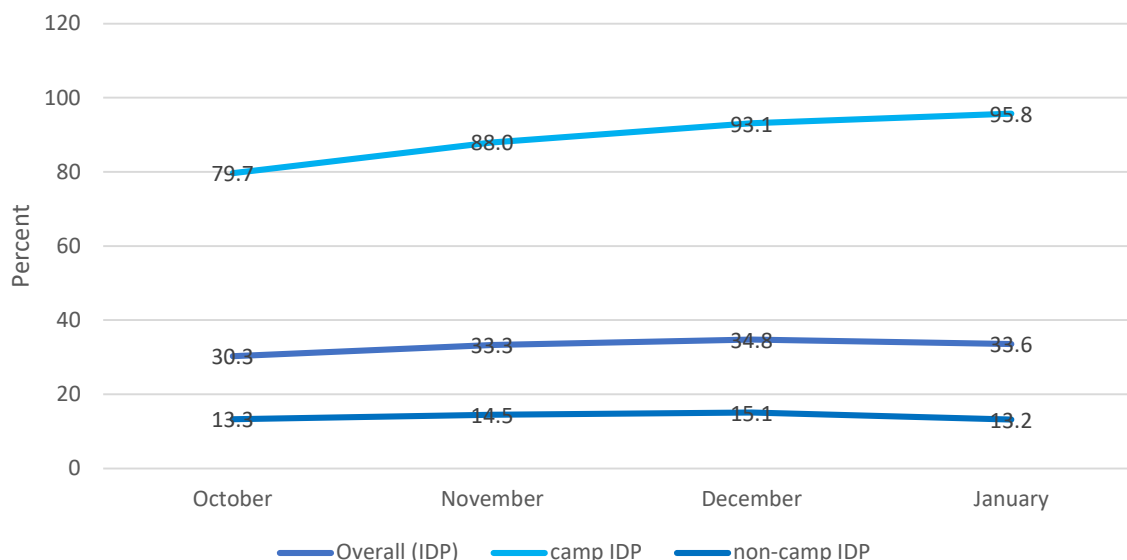
The relatively high levels of assistance from sources outside of the PDS received by IDPs could be partially explained by the level of assistance given to camp IDPs. By the beginning of 2021, 95.8 percent of camped IDPs were receiving in-kind assistance from non-PDS sources, a 16.1 percentage point increase from October of the previous year. The share of non-camp IDPs who received in-kind support, on the other hand, remained fairly flat at around 14 percent from October through January (Figure 27).

Figure 27: Proportion of the population receiving in-kind assistance from sources other than PDS in the previous month



Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using population survey weights.
 Note: Other in-kind assistances are those from relatives, friends, NGOs (non-governmental organizations), UN (United Nation) agencies (UNHCR (United Nations High Commissioner for Refugees), WFP etc.), religious organizations and others.

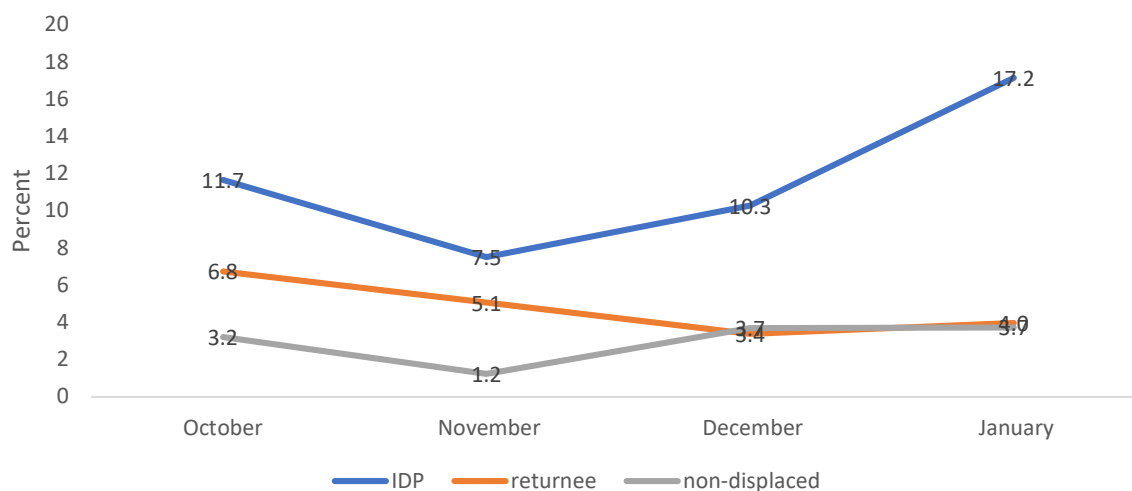
Figure 28: Proportion of population who received in-kind assistance from sources other than PDS (IDPs) in the previous month.



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.
 Note: Other in-kind assistances are those from relatives, friends, NGOs, UN agencies (UNHCR, WFP etc.), religious organizations and others.

The share of Iraqis receiving cash assistance from any source, including government programs such as the SSN, declined from an already low base among returnees but increased significantly for (camped) IDPs. A greater share of returnees received assistance compared to non-displaced households in October and November 2020, but these two groups converged at around 3.7 percent – far lower than IDPs. Meanwhile, following a drop in the share of IDPs receiving cash assistance from any source in October 2020 from 11.7 percent to 7.5 percent, the figure increased between November 2020 and January 2021 to 17.2 percent (Figure 29). Here again, though, there is critical heterogeneity within the IDP population based on whether they reside in a camp or not. While camped IDPs are three times more likely to receive cash assistance from any source than the IDP average (reaching 58.6 percent in January 2020), non-camped IDPs are the group least likely to receive cash assistance – coming in consistently below returnees and ending below nondisplaced households with only 3.6 percent of non-camped IDPs receiving cash assistance. Thus, IDP households living out of camps are the group least likely to receive in-kind or cash transfers from any source.

Figure 29: Proportion of population who received cash assistance from any source in the previous month.



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

4.4 Access to market and healthcare services

Difficulty in accessing markets and grocery stores remained high for populations affected by forced displacement, especially for IDPs. While 34.9 percent of IDP respondents indicated that they faced difficulty accessing markets and grocery stores in October 2020, the figure increased to 41.6 percent by December 2020, before dropping slightly to 38.1 percent by January 2021. This number still remained above the level observed in October (Figure 30) and was much higher than returnee or non-displaced households—though such difficulties became more widespread in later months. Although the share of returnees reporting difficulties in accessing market and grocery stores was relatively low compared to IDPs between October and December 2020, the figure more than doubled to 26.9 percent in just one month from December to January 2021. Accessing markets became steadily more difficult for the non-displaced starting in August (at the latest), and almost doubling from 9.3 percent reporting such challenges in October, to 18.3 percent in January 2021. As curfew eased, respondents indicated travel restrictions were less of a concern. Respondents from across all three groups however, indicated “Other” as the major reason they faced difficulty accessing markets and grocery stores.

As in many other countries, the COVID-19 pandemic hindered households' access to healthcare services in Iraq. Among the three sub-populations a relatively greater share of IDPs faced difficulties accessing healthcare services between October 2020 and January 2021. The share of IDPs experiencing trouble accessing health care steadily rose by almost 10 percentage points from nearly half of the IDP population in October to 59.0 percent by January 2021 (Figure 31). In contrast, the share of returnees facing difficulties in accessing healthcare services followed a decreasing trend, falling by 11.9 percentage points from 41.6 percent in October to 29.7 percent in December 2020, before trending upward to 34.2 percent in January 2021 (Figure 31). Both samples experienced greater difficulties than the non-displaced population – despite already having a high proportion of the population (20 to 25 percent) reporting difficulties in accessing health care between October and January.

Figure 30: Share of population with difficulty accessing market.

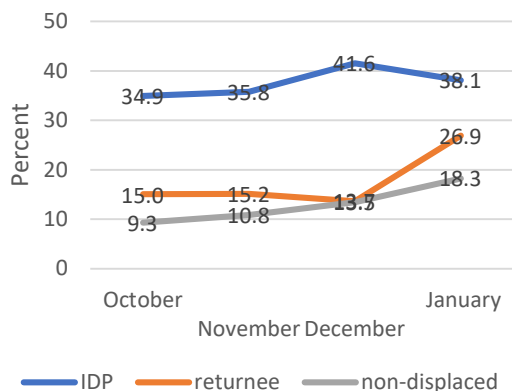
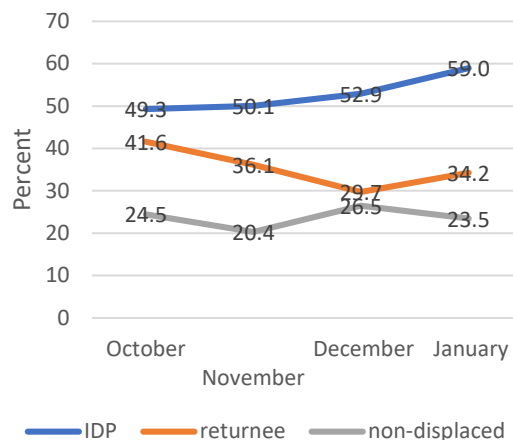


Figure 31: Share of population with difficulty accessing healthcare.

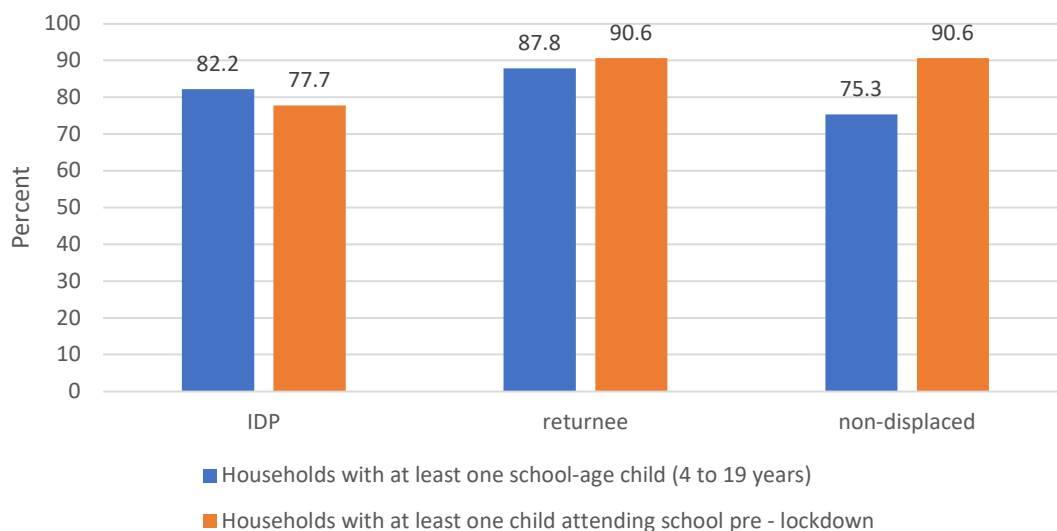


Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

4.5 Child learning during pandemic

The majority of households across all three groups (IDPs, returnees, and non-displaced) had school-aged children that attended school before the pandemic. Households interviewed in the October and November rounds, when most of the schools in the country were closed, responded to questions regarding child education and learning during the pandemic. The survey showed that at least 75 percent of households across all the three groups indicated they had school-aged children in their households. Of those with school-aged children, over 77 percent of households indicated that their children were attending school before the pandemic (Figure 32).

Figure 32: Households with school-aged children and school-attending children

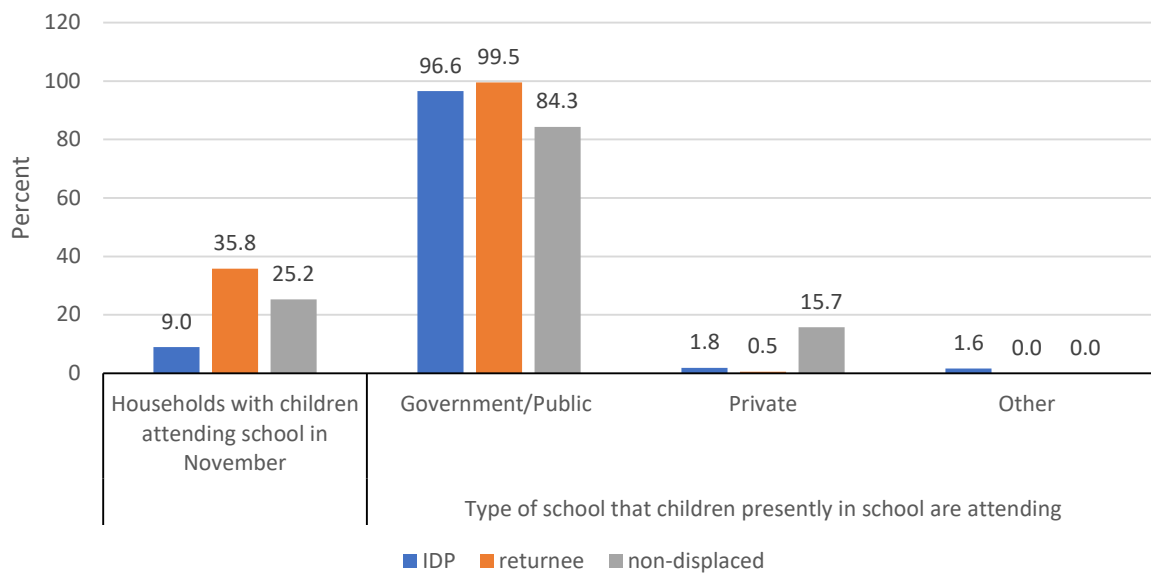


Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using household survey weights.

A low share of IDP, returnee and non-displaced households reported that their children were attending school during the pandemic, and nearly all who did went to public schools. School attendance was far less than ideal for all populations affected by displacement during the pandemic. Only 35.8 percent of returnee households with school-age children sent them to school, which was still 10 percentage points higher than the non-displaced populations in the North and KRI (25.2 percent) and was nearly four times higher than for IDPs (9 percent). As seen in Figure 33, while almost all IDPs and returnees attended government or public schools, a significant share of non-displaced households sent their children to private schools (15.7 percent). As reported in Figure 33 the average number of households' children who were attending school dropped since the beginning of lockdown through December 2020. Among the three groups, returnee households averaged three (3) children attending school before pandemic measures led to the closure of most of the schools in Iraq. Given these closures, it is perhaps not surprising that fewer children attended school in December. What is surprising is how those numbers differ across groups; the average drop in the number of school children from IDP households was greater than 1, while the average drop for returnee and non-displaced households was from 0.3 and 0.4 between March and November 2020.

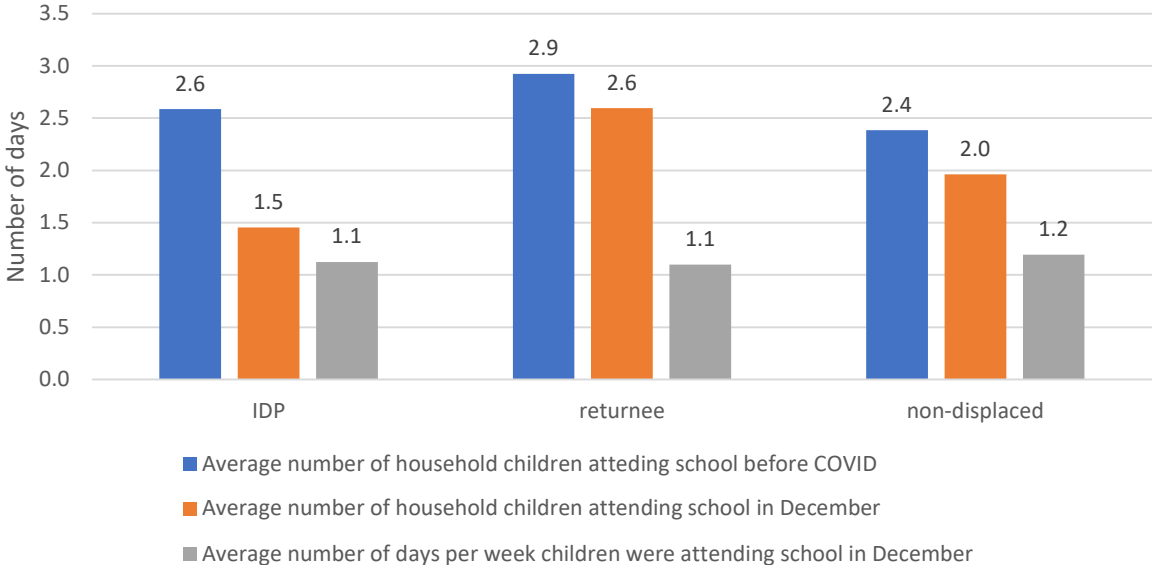
Children who do attend school average just over 1 day per week in school across all three population sub-groups. This disheartening finding may reflect systemic challenges in school access, but the result is nevertheless detrimental to regional human capital formation when children from all sub-populations generally attended school 1.1 - 1.2 days per week in November 2020 (Figure 34).

Figure 33: Share of households with children attending school in November and school type



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using household survey weights.

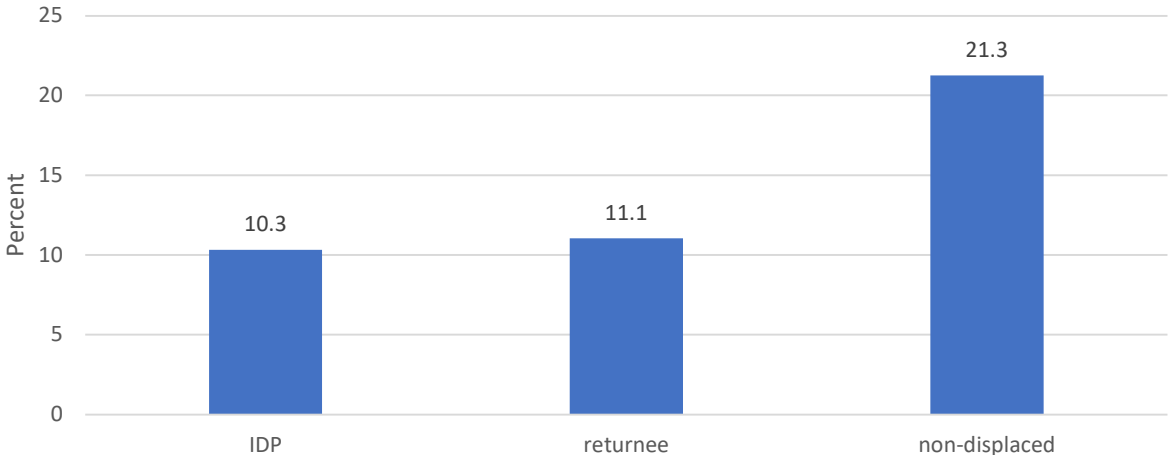
Figure 34: Average number of children per household who were attending school before the pandemic, and in December and the number of days per week that children attended school in December



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using household survey weights.

A small share of children, mostly those attending private schools prior-to the pandemic, engaged in any catchup or learning activities when schools closed due to COVID-19. Among households with children attending school prior to lockdown, 10.3, 11.1 and 21.3 percent from IDP, returnee, and non-displaced households indicated that their children were engaged in some catchup or learning activities during school closures when surveyed in October 2020 (Figure 35). The results suggest that although educational engagement was low across all three groups, IDPs with the lowest rate (10.3 percent) and returnees (11.1), are of particular concern. As Iraq re-engages in school activities, it will be important to target displaced populations for help in catching up as they are half as likely to have had that support during the pandemic.

Figure 35: Share of households with children engaged in some catch up / learning activities in October

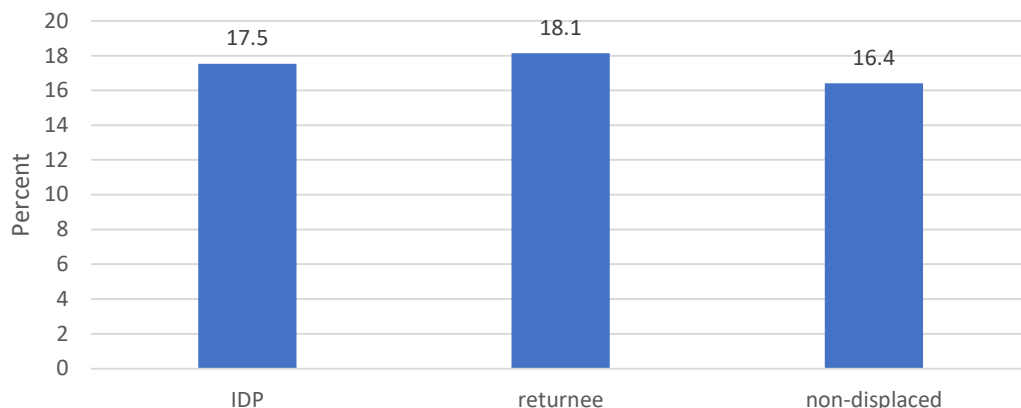


Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using household survey weights.

4.6 COVID-19 Testing and Vaccination

COVID-19 testing in Iraq remains low across all three groups. In January 2021 only 17.1, 18.1 and 16.4 percent of IDP, returnees, and non-displaced respondents indicated that they had taken a COVID-19 test (Figure 36).

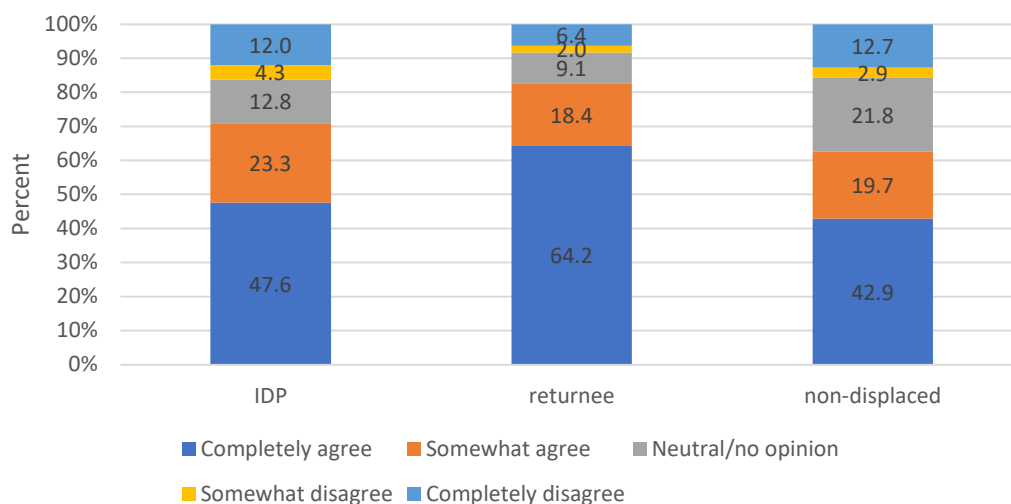
Figure 36: Share of the population who have been tested for COVID-19 as of January 2021



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Vaccine acceptance from returnees is higher than IDPs or non-displaced populations. As governments and international organizations across the world continue to find ways to curb the spread of the coronavirus, vaccination programs will play a key role. Respondents across all three subgroups in Iraq were asked questions related to the COVID-19 vaccination in the December 2020 round. When respondents were asked how much they agreed with the statement “I would accept a COVID-19 vaccine which is proven to be safe and effective” across all three groups, a significant share - 70.9, 82.6, and 62.6 percent of IDPs, returnees, and the non-displaced population, indicated that they completely agree or somewhat agree with the statement (Figure 37).

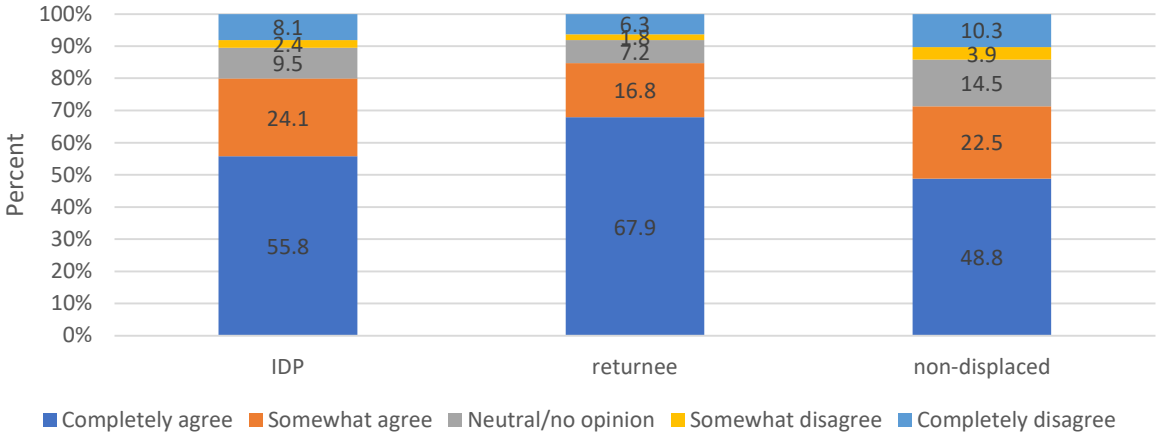
Figure 37: To what extent do you agree with the following statement: “I would accept a COVID-19 vaccine which is proven to be safe and effective.”



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Endorsements by those in authority could counter vaccine hesitancy. A significant share of IDPs, returnees, and non-displaced respondents were more willing to accept COVID-19 vaccines when recommended by their employers and approved as safe and effective by the government. In December, when asked the extent to which IDPs, returnees and non-displaced agree to the statement: “I would accept a vaccine if it were recommended by my employer and was approved safe and effective by the government;” 79.9, 84.8, and 71.3 percent respectively, indicated that they completely or somewhat agree (Figure 38). Although more than half of the displaced respondents were in full agreement, less than half of the non-displaced respondents were. More importantly, a significant share of each population group was unsure of their choice and so are potentially susceptible to be swayed for or against vaccinations. Even with government or employer endorsement, fully 36, 25.8, and 40.9 percent of IDPs, returnees and non-displaced “somewhat agree”, were “neutral” or “somewhat disagree”.

Figure 38: To what extent do you agree with the following statement: “I would accept a vaccine if it were recommended by my employer and was approved safe and effective by the government.”

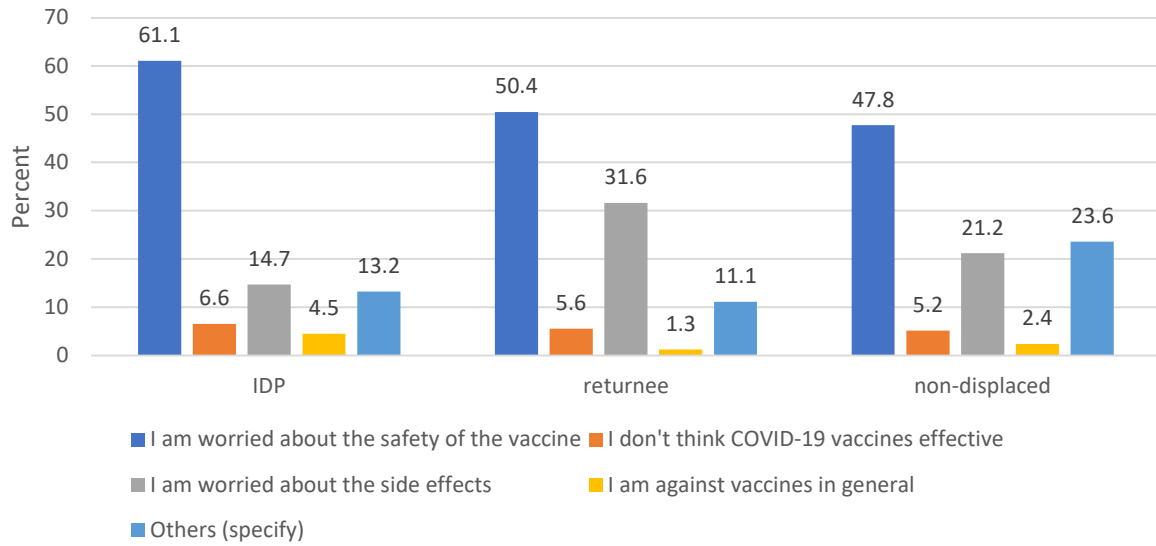


Source: Authors’ calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Safety was the primary concern among those hesitant to receive the vaccine. As seen in Figures 39 and 40, a significant share of the population across all three groups indicated that they were not willing or were unsure about being vaccinated against the virus. When probed further in order to understand the hesitancy, trepidation around the safety of the vaccine was the main reason cited across all three groups, closely followed by concern for potential side effects. Together, worry about safety and side effects was the main reason of concern for 75.8, 82 and 69 percent of IDPs, returnees, and the non-displaced populations, respectively (Figure 39). The findings suggest that acceptance of the COVID-19 vaccine by Iraqis may face some pushback, but that interventions aimed at perceptions, such as behavior change communication programs, could be effective.

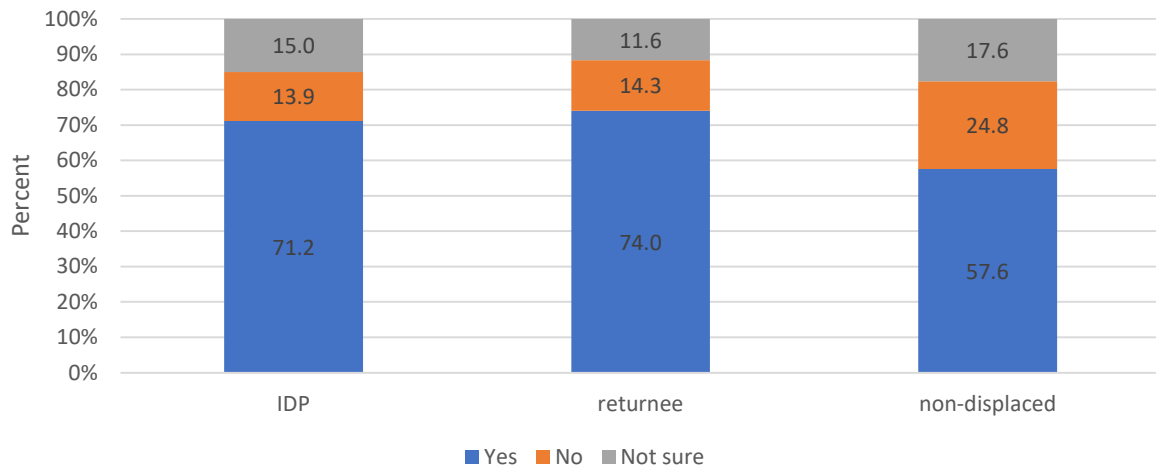
Cost is an important consideration for respondents’ stated willingness to receive the vaccine. Respondents across all three subsamples were asked whether they would agree to be vaccinated if they were available at no cost. The analysis indicated that, while 71.2, and 74.0 percent of IDPs and returnees indicated they would be willing to be vaccinated against COVID-19, less than 58 percent of the non-displaced population indicated that they would be willing to receive the vaccine (Figure 40).

Figure 39: What is your main concern for not or not sure want to be vaccinated?



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

Figure 40: If an approved vaccine to prevent COVID-19 was to become available at no cost, would you agree to be vaccinated?



Source: Authors' calculation using IHFPS 2020/21. The figures are weighted using population survey weights.

5.

Discussion and
conclusion

The COVID-19 outbreak and measures implemented by the government to limit the spread of the virus have impacted the economic wellbeing of Iraqi households and recovery, where seen, is incomplete.

While estimated labor force participation for individuals between 18 and 64 years of age across Iraq remained above 61 percent between August 2020 and January 2021, the estimated unemployment rate increased significantly during the pandemic. Compared to the estimated 12.7 percent unemployment rate pre-pandemic, the figure climbed to 29 percent in August 2020 before falling slightly to 23.5 percent in January 2021. Inadequate food consumption within Iraqi households remained a concern. While the share of Iraqis consuming inadequate diets decreased between August and November 2020 from 6.0 to 4.1 percent, the figure climbed back to 6.1 percent by January 2021. The share of Iraqis that benefitted from the Public Distribution System (PDS) transfer declined sharply between February (pre-pandemic) and July 2020; and although it has since trended upward, it is yet to reach pre-pandemic levels. A significant share of Iraqis faced challenges accessing markets, but overall access to markets and grocery stores improved after August 2020. While 23.9 percent of the respondents indicated that they faced challenges accessing markets and grocery stores in August 2020, only 14.2 percent reported facing challenges in January 2021. In contrast, Iraqis continue to struggle accessing healthcare services. COVID-19 testing in Iraq remains relatively low, but a significant share (approximately 80 percent) of Iraqis that they are willing to accept safe and effective vaccines.

Labor market challenges have proportionately affected displaced populations. Although IDPs and returnees sustained higher rates of labor force participation than the non-displaced, the unemployment rate among the three groups seemed to converge at around 22 to 26 percent. Female respondents were less likely to participate in the labor market than men, but those who did were far more likely to be unemployed; indeed, rising unemployment among female non-displaced respondents is converging to meet the unemployment levels of displaced females. Conversely, IDPs living in camps were less likely to look for work than non-camp IDPs, but among IDPs looking for work, camped IDPs were less likely to find it. Although further investigation is required, camped IDPs may face greater challenges in assimilating into the local labor market than IDPs already living in communities.

The majority of IDPs and returnees consumed inadequate diets and engaged in consumption-based coping strategies. Although just 4.0 percent of the non-displaced population consumed inadequate diets between October 2020 and January 2021, and the share of returnees consuming inadequate diets dropped from 14.5 to 8.3 percent, the share of IDPs with inadequate diets doubled from 12.6 percent to 25.3 percent between November 2020 and January 2021. This troubling trend for IDPs is even more worrisome because it is driven largely by IDPs who live out of camps and may therefore have less access to support. Moreover, a stubbornly high rate – more than 70 percent of returnees and 80% of IDPs reported implementing at least one of the five consumption-based coping strategies. Two of those strategies, reducing adult consumption to allow children to eat and skipping meals, were employed by 1 in 3 and 1 in 5 IDPs – a rate two to three times higher than non-displaced.

When it was needed most, the public food distribution system met population needs with mixed results. These important trends in food consumption among the various population groups in Iraq highlights the importance of the Public Distribution System (PDS) food transfer program. Returnees and non-displaced recipients increased gradually after November 2020, following a significant drop between October and November, while the share of beneficiaries surpassed levels observed in October. Even though their food security responses indicated the greatest need, IDPs seemed to have more difficulty in accessing the PDS throughout the observed period. Despite being fiscally taxing, the PDS supplies a significant portion of household caloric intake

and plays a stop-gap role in Iraqi households' budgets (World Bank, 2010). The constancy of the PDS transfers during the pandemic likely helped mitigate the risk of heightened inadequate food consumption, especially for the non-displaced and returnees in Iraq, and likely kept the food consumption scores of IDPs, with access to the PDS, from being even higher.

Although a significant share of returnees and the non-displaced population continue to face challenges in accessing markets and grocery stores, as well as healthcare services, the situation is most worrying for IDPs in the country. Over 35 percent of displaced Iraqis, who have not yet returned, faced challenges accessing markets and grocery stores. Perhaps even more concerning, over 50 percent of IDPs reported that they were unable to access healthcare services when needed.

COVID-19 testing is low for all, but vaccine receptivity is particularly high among the displaced. Less than 1 in 5 IDPs, returnees or non-displaced reported taking a COVID-19 test as of January. However, more than 70 percent of the displaced population indicated that they would be willing to be vaccinated. The non-displaced and the general population in Iraq were much less likely to be willing to be inoculated. The price, as well as endorsement by government or employers could likely affect actual take-up of vaccines.

It is important to protect the most vulnerable segments of the population amid the crisis. Projections from the Macro-Micro simulation suggest that the poverty in Iraq increased by 9.6 percentage points from 20.0 percent in 2017 to 29.6 by the end of 2020. The simulation also shows an increase in inequality – Gini index is projected to increase by 1.5. Sharma and Wai-Poi (2019) argue that IDPs in Iraq are poorer and are more likely to fall into poverty, likely as a function of the loss of jobs and livelihoods that occurs through displacement. According to the International Organization for Migration (IOM 2018) the lack of income-generating opportunities, destruction of dwellings, and a lack of basic services in the place of origin were among the most commonly cited reasons preventing IDP's return.

IDPs living out of camps may require particular consideration in developing interventions to mitigate significant negative fallout of the pandemic. Although this group is 10 percentage points more likely to participate in the labor force than camped IDPs and 27 percentage points less likely to be unemployed, those statistics may be born out of desperation. To wit, not only are non-camped IDPs 30 percentage points less likely to receive in-kind transfers through the PDS and 82 percentage points less likely than camped IDPs to receive other in-kind assistance, they are also three times less likely than camped IDPs to receive any cash assistance. Most tellingly from a welfare perspective, IDPs living out of camps are three times more likely to have inadequate diets than camped IDPs and ten times more likely than the nondisplaced.

Iraq will need to consider measures to counter the education foregone during the pandemic to minimize losses to human capital formation. Nearly all Iraqi children – displaced and nondisplaced – were affected by mandated school closures in early 2020 and recommended school closures or continued alterations throughout the rest of the calendar year that resulted in significant differences compared to pre-pandemic operations. Moreover, children from nondisplaced and displaced households are returning to school at lower rates. Internally displaced households' responses, in particular, suggest that they are much less likely to send a child to school now than before the pandemic. Yet as of January 2021, even children who did attend school were unlikely to attend more than 1 day per week. There may be long term economic growth consequences to this foregone human capital formation. Given this severe setback in child learning during the pandemic, Iraq must consider a suite of

standard and innovative approaches to rectify lost schooling and prepare for future shocks—both to help those students who returned to school “catch up” and to help “recatch” students who did not return.

The pandemic’s severe impact on the multiple aspects of household welfare requires a multi-faceted response. Given the increased number of job losses during the pandemic and chronic unemployment and underemployment among the non-displaced, IDPs and returnees, it is essential that job creation is prioritized in both the short- and medium-terms. A vibrant private sector within a diversified economy can act as an engine for job creation and would be more resilient against economic shocks. It is important for the Government of Iraq to keep the existing safety net of programs and systems well-functioning, and to leverage them to reach out to the most impacted and vulnerable people to help them cope with the crisis. A behavior change communication program could also help to improve vaccine receptivity.

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Annexes

ANNEX I: ADDITIONAL RESULTS

Figure A: Labor force participation and unemployment rates (across Iraq and by Gender)

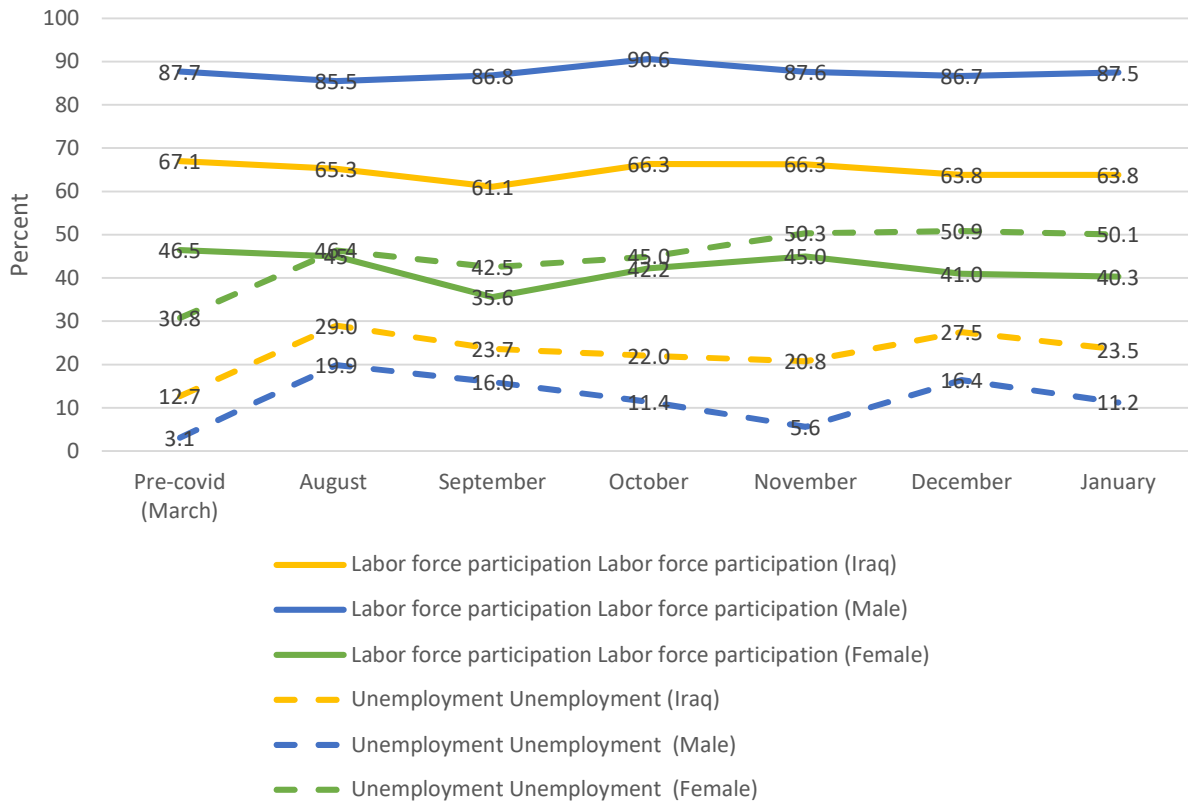


Figure B: Employment status of respondents by population group

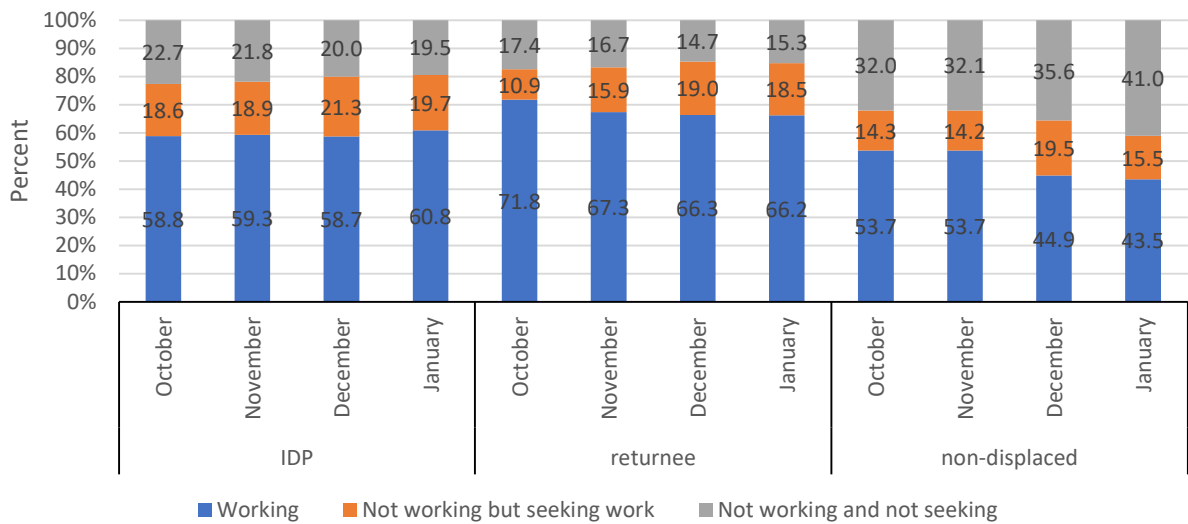


Figure C: Food consumption score (FCS) by population group

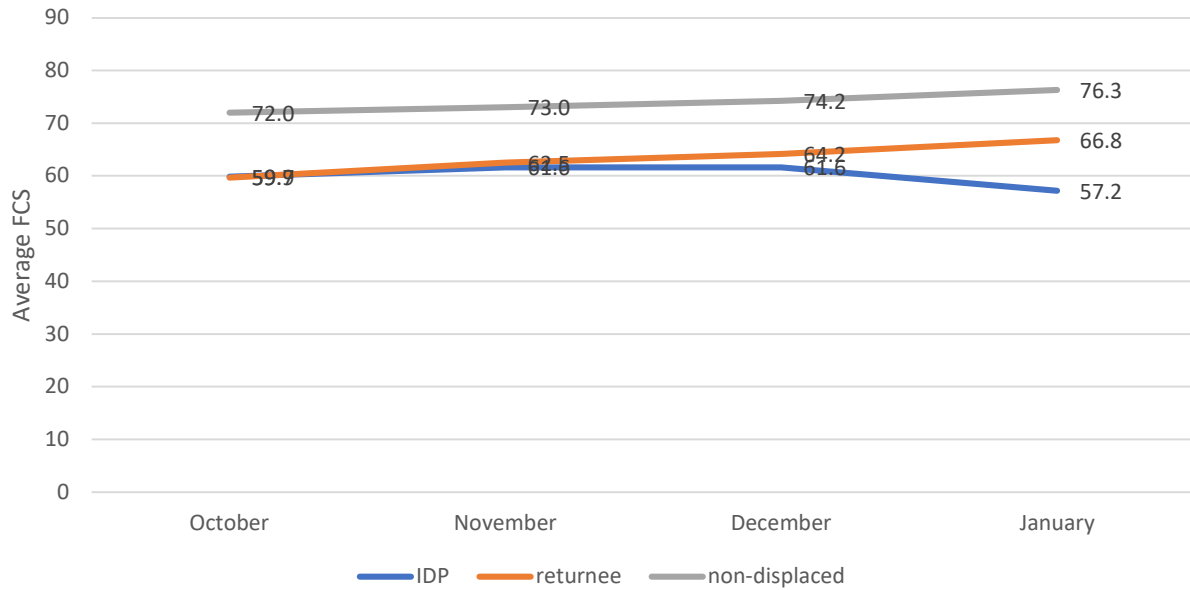


Figure D: Food consumption groups by population group

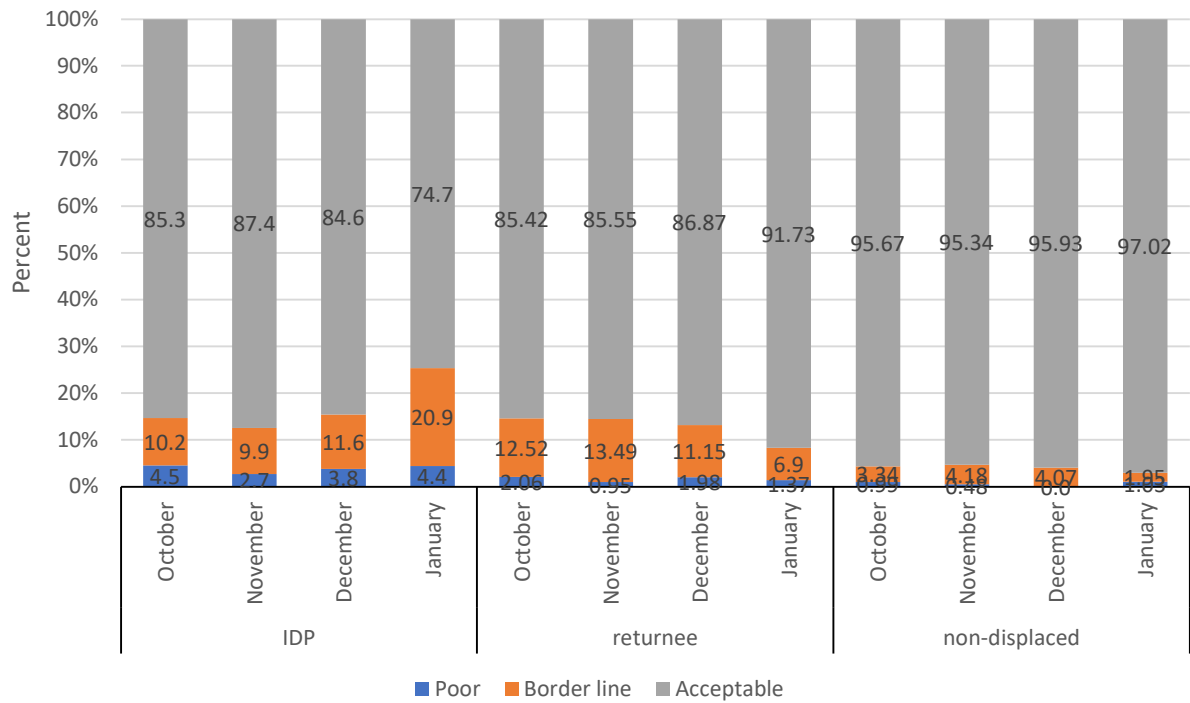


Figure E: Coping strategies implemented by IDPs in the 7 days prior to the survey (IDP in KRI vs North)

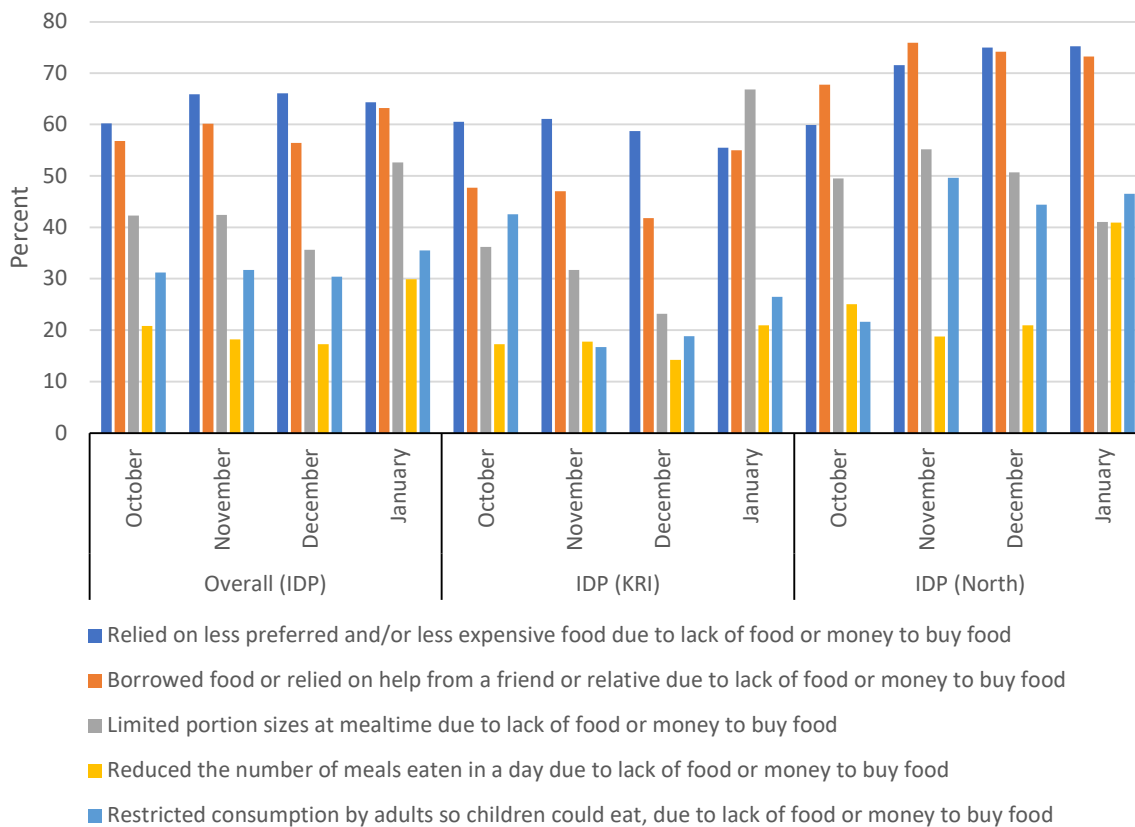
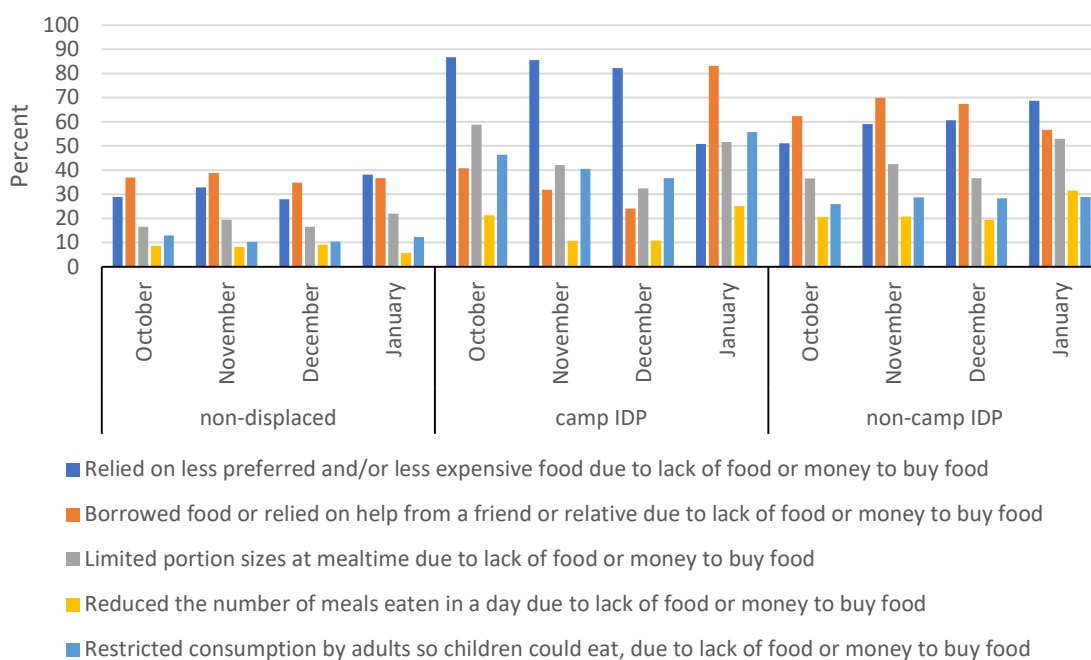


Figure F: Coping strategies implemented by camp and non-camp IDPs in the 7 days prior to the survey



Annex II: IDPs and returnees sampling frame and post-stratification for Iraq's high frequency mobile phone survey 2020.

1. IDP sample

As seen in table 1, almost all the IDPs in Iraq are currently located in the three governorates of Kurdistan region and five governorates of Northern region. Therefore, we limit the coverage of the mobile phone survey for IDP sample to those two regions and create 4 strata: Duhok (stratum 1), Erbil and Sulaimaniya (stratum 2), Nineveh (stratum 3) and rest of northern region i.e., Kirkuk, Diyala, Anbar and Salah Al-deen (stratum 4).

Table A presents the proposed sampling frame for IDPs. For each stratum, a total of 200 IDPs/IDP households are proposed to be interviewed with in- and out-of-camp sample size proportion to respective population within the stratum.

Table A: Proposed IDP sample (800 total)

	Strata	Camp	Out-of-camp	Total	mVAM	Additional required sample		
						Camp	Out-of-camp	Total
<i>Kurdistan</i>								
Duhok	1	96	104	200	18	96	86	182
Sulaimaniya	2	8	66	74	3	8	63	71
Erbil	2	9	117	126	5	9	112	121
<i>Total</i>		<i>113</i>	<i>287</i>	<i>400</i>	<i>26</i>	<i>113</i>	<i>261</i>	<i>374</i>
<i>North</i>								
Nineveh	3	71	129	200	6	71	123	194
Kirkuk	4	8	69	77	5	8	64	72
Diyala	4	5	36	42	9	5	27	33
Anbar	4	7	21	28	9	7	12	19
Salah al-deen	4	1	52	53	4	1	48	49
<i>Total</i>		<i>92</i>	<i>308</i>	<i>400</i>	<i>33</i>	<i>92</i>	<i>275</i>	<i>367</i>
Total		205	595	800	59	205	536	741

Table 2 presents the sample size requirement for a point estimate (proportion) at 0.05 margin of error (alpha level) for 95% and 90% confidence intervals. Similarly, tables 3 and 4 present sample size requirements for a one-sample proportion test against a reference value and to detect changes between rounds (over-time) respectively. The largest sample size is required when the initial prevalence proportion or value is 0.5 and decreases when moving away towards 1 or towards 0.

As seen in table 2, the proposed sample size of 200 per stratum will allow to estimate a prevalence rate of about 0.25 or below and about 0.75 and above within a stratum. Similarly, a change of 0.1 (10%) or greater can be detected even when comparing with the most conservative reference value of 0.5 (table 3). At regional level, KRI and North, and national (overall) round-to-round changes of about 10% or greater can be detected using the

proposed sample size with initial prevalence 0.5 (table 4). For reference, while the MPI poverty prevalence among IDPs vary between 3 to 10 percent (table 5), unemployment vary between 10 to 31 percent among IDPs in 2017-18 (table 6) in these governorates. Additionally, the overall sample will allow to estimate the indicators and monitor changes by in- and out-of-camp IDP status.

2. Returnee Sample

The proposed sampling frame for returnee households is presented in table B. As seen in table 1, the forced displaced households that have returned recently are concentrated in the five governorates of Northern region mostly in Nineveh and Anbar. We grouped the 5 governorates in to 3 strata – Nineveh (stratum 1), Anbar (stratum 2) and rest (stratum 3). Again, a total of 200 Returning IDPs are proposed to be interviewed within a stratum. The proposed sample size of 600 interviews allows to track the change of 10% or over over-time.⁵

Table B: Proposed returnee sample (600 total)

<i>North</i>	<i>Strata</i>	<i>Sample</i>
Nineveh	1	200
Kirkuk	3	54
Diyala	3	36
Anbar	2	200
Salah al-deen	3	110
<i>Total</i>		<i>600</i>
Total		600

3. Post-stratification

IOM's DTM matrix collects information on people forcibly displaced after December 2013 i.e., those displaced due to the ISIS conflict. While the DTM considers those who are still displaced within Iraq as IDPs, returnees (returning IDPs) are those who have returned to their location of origin, irrespective of whether they have returned to their former residence or to another shelter type.⁶

Information from the DTM is used to create post-stratified survey weights. Table 1 reports number of in-camp IDP, out-of-camp IDP, and returnee households for each governorate. Number of individuals for each sub-population is then calculated as per the DTM methodology by multiplying the number of households by six, average household size in Iraq, for out-of-camp IDP and returnee population and by 5 for in-camp IDPs.⁶ According to the *2019 humanitarian needs overview*, out of the 6.7 million people need of humanitarian assistance (almost all of

⁵ The SWIFT survey did not sample Returning IDPs and we do not have reference prevalence rates for relevant outcomes.

⁶ IOM, 2021 : <http://iraqdtm.iom.int/MasterList#Methodology>

which are IDPs and returnees), 51 percent are adults 18 years or older.⁷ Therefore, number of adults is calculated as 51 percent of the total number of individuals for each subgroup. The survey weights are calculated as follow:

$$wgt_{ipg} = \frac{N_{pg}}{S_{pg}} ; p \in [idp\ camp, idp\ out\ of\ camp, returnee] \quad (1)$$

where, wgt_{ipg} is a full (raw) calibrated weight for a household, individual or adult i in sub-group p and governorate g . While N_{pg} is the population of subgroup p in a governorate g , S_{pg} is the number of completed phone interviews in a month from governorate g for subgroup p .

The full (raw) weights are then standardized (or normalized) to make the weighted sum of the interviewed sample units equal to the total sample size. Normalization is done by multiplying the full sample weights by a constant factor equal to the unweighted number of total completed interviews (sample size) divided by the weighted total number of completed interviews i.e., total households, individuals, or adults for each sub-group.

⁷ https://reliefweb.int/sites/reliefweb.int/files/resources/irq_2019_hno.pdf

Annex III

Table 1: Number of IDP and returnee households by governorate

	IDP		Total	Returnee	Returnee + IDP
	Camp	Out of -camp			
Kurdistan					
Duhok	25,458	27,719	53,177	128	53,305
Sulaimaniya	2,509	20,801	23,310		23,310
Erbil	2,874	36,542	39,416	8,834	48,250
Total	30,841	85,062	115,903	8,962	124,865
North					
Nineveh	19,273	34,740	54,013	301,195	355,208
Kirkuk	1,748	14,923	16,671	56,851	73,522
Diyala	1,110	7,838	8,948	38,374	47,322
Anbar	1,486	4,541	6,027	250,578	256,605
Salah al-deen	181	11,269	11,450	115,357	126,807
Total	23,798	73,311	97,109	762,355	859,464
Center					
Baghdad	312	5,527	5,839	15,038	20,877
Babylon		2,834	2,834		2,834
Kerbela	103	2,490	2,593		2,593
Wasit		1,014	1,014		1,014
Najaf		2,091	2,091		2,091
Total	415	13,956	14,371	15,038	29,409
South					
Qadisiya		648	648		648
Muthanna		166	166		166
Thi-Qar		566	566		566
Maysan		371	371		371
Basrah		1,088	1,088		1,088
Total		2,839	2,839		2,839
Total	55,054	175,168	230,222	786,355	1,016,577

Source: IOM DTM 116 (June 2020)

Table 2. Sample size for point-estimate (proportion) with 0.05 margin of error (ME or alpha)

p	1-p	sample size (95% CI)	sample size (90% CI)
0.5	0.5	384	271
0.45	0.55	380	268
0.4	0.6	369	260
0.35	0.65	350	246
0.3	0.7	323	227
0.25	0.75	288	203
0.2	0.8	246	173
0.17	0.83	217	153
0.1	0.9	138	97
0.9	0.1	138	97
0.03	0.97	45	31

Table 3. Sample size for a one-sample proportion test against a reference proportion (alpha = 0.05, Power = 80%, two-sided Wald test with normal-approximation correction for continuity)

Reference (p)	Minimum detectable effect	
	0.05	0.1
0.50	797	199
0.40	797	207
0.30	735	199
0.20	609	175
0.17	559	165
0.15	523	158
0.10	421	136
0.09	398	131
0.03	251	99

Table 4: Sample size per round to detect changes over time (two-sample proportion test, alpha = 0.05, Power = 80%, two-sided chi-squared test with normal-approximation correction for continuity)

<i>Initial prevalence (p)</i>	Minimum detectable effect	
	<i>0.05</i>	<i>0.1</i>
0.50	1,604	408
0.40	1,574	408
0.30	1,417	376
0.20	1,134	313
0.17	1025	288
0.15	945	270
0.10	726	219
0.09	678	208
0.03	365	134

Table 5: SWIFT 2017/18: Proportion of IDPs that are MPI poor

	Mean	Std. Err	[95% Conf. Interval]	
Duhok	0.101	0.008	0.086	0.116
Erbil and Sulaimaniya	0.038	0.005	0.029	0.047
Naneveh	0.101	0.009	0.085	0.118
Anber, Salah al-deen, Kirkuk and Diyala	0.054	0.006	0.043	0.065
Kri	0.069	0.004	0.060	0.077
North	0.081	0.005	0.071	0.091

Table 6: SWIFT 2017/18: Unemployment rate among IDPs

	Mean	Std. Err	[95% Conf. Interval]	
Duhok	0.315	0.024	0.268	0.362
Erbil and Sulaimaniya	0.101	0.015	0.073	0.130
Naneveh	0.158	0.023	0.112	0.204
Anber, Salah al-deen, Kirkuk and Diyala	0.161	0.019	0.124	0.198
KRI	0.207	0.014	0.179	0.235
North	0.160	0.015	0.131	0.188