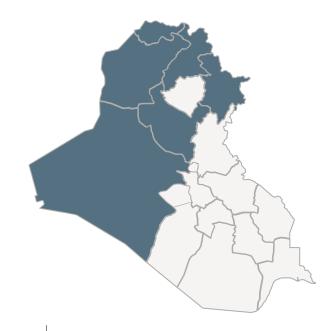


Round one: June 2020

# COVID-19: perceptions of people in need in Iraq



Government curfews were instituted across Iraq in mid-March, two weeks after the first case of COVID-19 was detected in Najaf city, south of Baghdad. By 12 June, there were 15,414 confirmed cases, and 426 people had died.<sup>1</sup>

COVID-19 is compounding existing vulnerabilities for the country's 250,000 refugees, 1.4 million internally displaced persons (IDPs), and the 4.6 million people who have returned to their areas of origin. Government and UN officials are concerned about the healthcare system's capacity, weakened after decades of instability and conflict. Restrictions have impacted livelihoods, making it difficult to adhere to stay-at-home or social distancing policies.

In April and May, as a service to responders and authorities, Ground Truth Solutions (GTS) – in partnership with the Iraq Information Centre (IIC) – conducted phone interviews in Arabic with 556 returnees, refugees, and IDPs across Anbar, Dahuk, Erbil, Ninewa, Salah al-Din, and Sulaymaniyah to gauge their perspectives on information needs and channels, behaviours, trust, and the economic impact of the virus. We found that:

- It has become more difficult for people to meet their basic needs.
- Most people (79% of respondents) feel informed about how to protect themselves and their families from COVID-19, but half of all respondents still say they need more information about the virus. Some feel unable to separate fact from rumour.
- People find it difficult to shelter in place, wear facemasks, and practice social distancing.

In partnership with:



Supported by:





WHO, "Iraq: WHO coronavirus disease (COVID-19) dashboard," https://covid19.who.int/region/emro/country/iq.

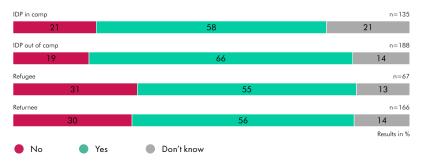
#### Information

The majority of survey respondents (79%) believe they are sufficiently informed about how to protect themselves from COVID-19, thanks to health and humanitarian actors' rapid action. In parallel to routine communication and dissemination of key messages through the IIC and implementing agencies, in April a UNICEF-led campaign reached nine million people across Federal Iraq and the Kurdistan Region (KRI) with mobile messaging on COVID-19 prevention.<sup>2</sup> A Facebook survey suggested this campaign was working.<sup>3</sup>

However, when people are inundated with information, they may find it challenging to weed out rumours. Close to half (43%) of respondents say they are unable to distinguish between rumour and fact around the virus. Refugees and returnees find it more difficult than IDPs. People in Anbar and Erbil find it harder than those in other governorates. We will be unpacking the reasons for this in our next survey.

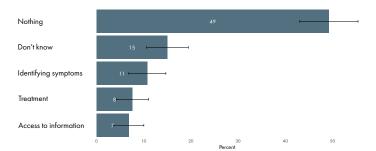
Are you able to separate rumours from facts around the Coronavirus? (n=556)

Status

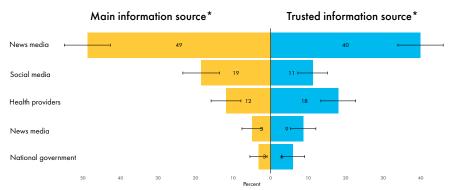


People may feel informed, but not about everything. Around half (49%) of respondents still want more information on how to identify symptoms, treatment options, and the locations of current cases.

What do you need more information on in relation to the Coronavirus?\* (n=556)



Crisis-affected people are relying on news, social media, and health professionals – their most trusted sources overall<sup>4</sup>– to get their information on the virus. Females appear to trust news media far more than other sources, while the trust gap between news media and health providers is narrower among males.



UNICEF, "Iraq: COVID-19 situation report no. 2" (28 April–11 May 2020), https://www.unicef.org/iraq/media/1151/file/IRAQ%20Country%20Office%20COVID%20Sitrep%20Report%202.pdf.

lbid

IDP (internally displaced person): refers to someone who was displaced from their subdistrict between 2014 and 2017, and who continues to reside in Iraq.

**Refugee:** refers to someone who fled their home and crossed an international border in order to seek protection in Iraq. All refugee respondents in this survey are Syrian nationals.

**Returnee:** refers to a person who was displaced between 2014 and 2017 but has since returned to their sub-district in Iraq.

Note: in this report, error bars are included representing the margin of error at the 95% confidence level. A 95% confidence interval is a representation of the spread of the data around the mean. A smaller confidence interval indicates less variance around the mean. If repeated samples were drawn, 95% of those confidence intervals would include the true population proportion.

Do you have enough information on how to protect yourself from the virus? (n=556)



Are you able to separate rumours from facts around the Coronavirus? (n=556)

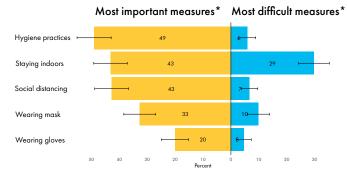


<sup>&</sup>lt;sup>3</sup> Health Cluster Iraq, "Health cluster bulletin no. 4" (April 2020), https://www.humanitarianresponse. info/sites/www.humanitarianresponse.info/files/documents/files/iraq\_hq\_bulletin4\_april\_2020.pdf.

<sup>\*</sup>Percentages do not total 100 because respondents could choose multiple options.

## **Behaviour**

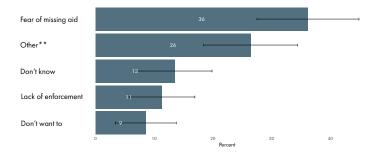
Respondents say better hygiene, staying indoors, social distancing, and wearing a facemask are the most important measures to prevent exposure to the virus, but they also find complying with these measures difficult. Only 41% say they have no trouble following guidance around COVID-19.



Asked what makes compliance challenging, people say they fear missing out on aid or services or going without work. They also say enforcement is lacking. Among female respondents, missing out on aid is the primary impeding factor, while male respondents are more concerned about losing access to jobs.

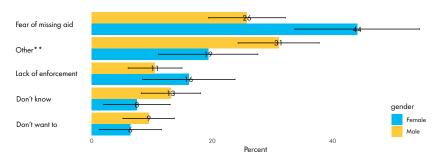
These concerns are unsurprising given delays in cash distributions and the suspension of some emergency livelihoods activities due to movement restrictions.<sup>5</sup> Households across Iraq are experiencing widespread job losses and challenges in meeting their basic needs.<sup>6</sup>

## Why do you find these measures difficult?\* (n=556)



WHO and Health Cluster messaging instructs those who suspect they are infected to immediately self-isolate and call the government hotline for further support. But close to 60% of respondents tell us they would go to a health facility – contravening this advice – even though the primary barrier to health access among returnees and IDPs in the 2019 Multi-Cluster Needs Assesment (MCNA) was the high cost of healthcare. Only one-quarter say they would call a health provider – possibly because they do not know how. Fewer still would self-isolate.

# Why do you find these measures difficult?\* (n=556)



\*\*Among people who selected "other", going without work was identified as the primary challenge in complying with measures. This will be added as a closed answer option in the next iteration of our survey.

# What measures do you find most important to protect yourself from the virus?\* (n=556)

49% Increased hygiene practices
43% Staying indoors

\$\\ \dagger \dagger 43\% \quad \text{Social distancing}

33% Wearing mask

# What measures do you find most difficult to take to protect yourself from the virus?\* (n=556)

41% No difficulty

30% Staying indoors

10% Wearing mask

7% Social distancing

If/when you experience Coronavirus symptoms, what do you think you would do? (n=556)

57% Go to health provider

26% Call health provider

12% Self-isolation

66

"There is no doctor, no disinfectant in the area, there are no masks or gloves." – Male returnee in Salah al-Din

## Impact of Ramadan

Data was collected during the month of Ramadan, during which movement restrictions were more relaxed. After observing an increase in daily confirmed cases, Gol and KRG reintroduced strict lockdown measures on 31 May.<sup>8</sup>

<sup>&</sup>lt;sup>5</sup> OCHA, "Iraq: COVID-19 situation report no. 14" (1 June 2020), https://reliefweb.int/sites/reliefweb. int/files/resources/20200601\_COVID19\_SitRep\_No.14%20%281%29.pdf.

<sup>6</sup> Ibid.

OCHA and REACH, "Iraq Multi-Cluster Needs Assessment (MCNA) VII" (December 2019), available at: https://www.reachresourcecentre.info/country/iraq/cycle/651/#cycle-651.

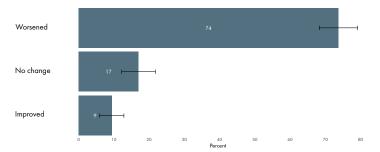
<sup>&</sup>lt;sup>8</sup> OCHA, "Iraq: COVID-19 situation report no. 14" (1 June 2020).

<sup>\*</sup>Percentages do not total 100 because respondents could choose multiple options.

# **Economic impact**

COVID-19 has undoubtedly impacted livelihoods. The majority (74%) of respondents tell us that their ability to meet their basic needs has worsened. Curfews, lockdowns, and other measures have reduced economic activity and have particularly impacted vulnerable groups, including casual and low-income workers. People fear losing their jobs. Of the 4,000+ calls the IIC handled between March and June 2020, the primary COVID-related issue has been loss of employment opportunities.

How has your ability to meet your basic needs changed since the virus started spreading in the world? (n=556)



Price increases for food and household items compound these worries. An ongoing assessment on market perspectives by the Cash Consortium of Iraq (CCI) reports price increases and shortages in basic food and hygiene items – including lentils, rice, vegetable oil, and disinfectant – across five governorates. More than half of the households in the same study report having been unable to meet their basic needs within the last week, with 73% saying they have been unable to work.

#### **Trust**

According to our respondents (90%), preventative measures are working, even though they are difficult to follow. People in Salah al-Din feel notably more negatively on this indicator than those in other locations. The measures introduced there were some of the most stringent, so this may be linked to resentment or discontent with the obligation to comply, especially during Ramadan.

Overall, do you believe the measures that have been introduced in your area will reduce the spread of the virus? (n=556)



WFP, "Iraq market monitor report," Issue 30 (April 2020), https://docs.wfp.org/api/documents/WFP-0000115988/download/?\_ga=2.68168340.440888833.1591881014-1575341897.1591881014

<sup>12</sup> CCI, "Beneficiary market perspectives – 8th round" (30 March–20 May 2020), https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/assessments/19-may\_benemark\_eighth\_round\_brief.pdf.





"Markets are all open and people are going without masks or gloves." – Male IDP in Ninewa



"The curfew affected our livelihood and restricted access to our daily, basic needs." – Female returnee in Anbar

IIC, "COVID-19 dashboard," https://app.powerbi.com/view?r=eyJrljoiNzRmNDc5NjAtN-2QyMS00NmNlLWE4MDAtYTg0N2FiODM5YWVjliwidCl6ljViNGExMjM3LWU1MjUtNDIwOS1iN-WIyLTY5ZTQ0ZWM4MTk5NilslmMiOjEwfQ%3D%3D.

<sup>\*</sup> Percentages do not total 100 because respondents could choose multiple options.

# Methodology

#### Sampling

We designed the sampling strategy using the most recent figures (9 April 2020) from the IOM Displacement Tracking Matrix (DTM) returnee and IDP master lists, as well as UNHCR refugee statistics, which provide the following population figures for Iraq: 1,399,170 IDPs, 4,660,404 returnees, and 247,440 Syrian refugees.

People in Need (PIN), as defined in the 2020 Humanitarian Response Plan (HRP), were divided into four strata across the six governorates: returnees, refugees, IDPs living in camps, and IDPs outside of camps. Not all the strata were sampled in all five governorates. Strata amounting to 1% or less of the total PIN figures were not included.

The sample frame consisted only of people who recently contacted the IIC and is therefore not representative of the Iraqi population in need in the selected governorates. Budget constraints did not allow for the random approaches commonly used in phone surveys, such as random digit dialling. Nonetheless, the sample includes different population types across each location. To generate a more reliable sample, we used oversampling in regions and among population types with small numbers of people in the relevant population.

#### Survey questions

Ground Truth Solutions designed the survey questions in consultation with the WHO Global Risk Matrix<sup>14</sup> and the Global Humanitarian COVID-19 response plan.<sup>15</sup> We identified four metrics to guide our questions: information, trust, behaviour, and economic impact. We reviewed other actors' COVID-19-focused tools and surveys in order to avoid duplicating their efforts and to ensure that our data is useful and actionable. The IIC reviewed the questions and translations to ensure the survey is appropriate to country-specific realities.

#### **Participants**

All participants were IDPs, returnees, or refugees over the age of 18. Of the total number of respondents, 37% were female and 63% were male. Respondents were selected from the IIC database of recent callers and chosen at random by IIC Information Management (IM) within the parameters set by the sample, aiming for a 50:50 gender split. Operators were instructed to obtain consent twice – first to enable IIC to use the stored contact information, and a second time for participation in the GTS survey. In total, 78 individuals did not give their consent to be surveyed, and no interviews were conducted with them. All those who participated in our survey were given information on the government hotline and received key messages on COVID-19.

# Weighting

The overall mean values presented in this report were estimated based on strata means which were weighted based on demographic information outlined in the 2020 HRP. For the multiple choice questions, the maximum margin of error lies at (+/-) 8.5 percentage points, and between (+/-) 3.76 and 5.94 for the binary questions. Margins of error for breakdowns by status, location, and gender are larger than for the overall weighted means. Data points that did not contain the respondent's governorate or status (IDP, refugee, etc.) were not considered for the weighted analysis.

Table 1: Sampling strategy, April 2020 with actual numbers\*

Governorate	IDPs in camp	IDPs out of camp	Returnees	Refugees	Total
Anbar			54/-1		54/-1
Dahuk	77	34/-1		29/-1	140/-2
Erbil		46/+1		38/+8	84/+9
Ninewa	58	45	71/+6		174/+6
Salah al-Din		31/+1	41/+11		72/+12
Sulaymaniyah		32/+2			32/+2
Total	135	188/+3	166/+16	67/+7	556/+26

WHO, "Survey tool and Guidance: rapid, simple, behavioural insights on COVID-19," Table 1: Questionnaire – validation and value of variable and items included (2020), http://www.euro.who.int/\_\_data/assets/pdf\_file/0007/436705/COVID-19-survey-tool-and-guidance.pdf?ua=1.

This report presents highlights from the findings of Ground Truth Solutions' (GTS) telephone surveys with 323 IDPs, 67 refugees, and 166 returnees across six governorates in Iraq in April and May 2020.

Our quantitative citizen survey is conducted in partnership with the Iraq Information Centre (IIC). GTS will collect surveys of approximately 530 respondents per round for an initial duration of six months and will target IDPs, refugees, and returnees across the six governorates with the highest numbers of People in Need (PIN): Anbar, Dahuk, Erbil Ninewa, Salah al-Din, and Sulaymaniyah.

GTS is sharing these findings with humanitarian actors to inform response planning and programme adjustments. Over the coming months, we will provide time-series data to track affected people's perspectives on the COVID-19 response in Iraq in more detail.

#### Perception data

Ground Truth Solutions gathers feedback from affected people, using their views, opinions, and perceptions to assess humanitarian responses. Gathering perception data from affected populations should be viewed as complementary to other monitoring and performance data. Collecting feedback is a vital first step in closing the accountability gap, empowering affected populations to be part of the decisions that govern their lives, building relationships with communities, and understanding local knowledge. Whenever possible, the process of collecting such feedback should be followed up with longer-term dialogue between affected communities and aid agencies. Communicating the results of the surveys back to affected people and triangulating perception data with other information sources is central to our approach in Iraq.

OCHA, "Global Humanitarian Response Plan COVID-19" (April-December 2020), https://www.unocha.org/sites/unocha/files/Global-Humanitarian-Response-Plan-COVID-19.pdf.

<sup>\*+/-</sup> represents number of surveys above or below original target sample.

# Language of the survey

Surveys were conducted in Arabic.

# **Data collection**

#### **Dates**

Data collection took place between 26 April and 15 May 2020.

# **Data collection partner**

The Iraq Information Centre (IIC) is a central accountability mechanism for the humanitarian response in Iraq, implemented by UNOPS on behalf of the Humanitarian Country Team (HCT). A team of 22 operators collected the data, with two IIC supervisors managing the process.

# Challenges and limitations

Response rates: Surveys were conducted during the month of Ramadan, during which those observing the fast are less inclined to pick up their phones. Issues with network connectivity and phones being switched off also contributed to lower response rates.

Gender balance: Women in the affected population commonly suppose that the male head of household's contact information must be provided in order to qualify for assistance. This presented challenges in targeting female respondents when sourcing information from the IIC database. Additionally, a male member of the household often answered the phone. To mitigate some of these challenges, only female operators were instructed to engage with female respondents. Where appropriate, female operators asked to speak to a female member of the household if the call was taken by someone else.

#### Author

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#### Recommended citation

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For more information about our work in Iraq, please contact Cholpon Ramizova (cholpon@groundtruthsolutions.org) or Meg Sattler (meg@groundtruthsolutions.org).