



# Advancing Economic Recovery in Salah al-Din through Livelihoods and improving Social Cohesion – Mini Assessment for people with disabilities



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### Disclaimer

These reports were produced under the United Nations Development Programmer's Iraq Crisis Response and Resilience Program (ICRRP) with the generous funding of the Government of Germany. The Rapid Market Assessment and Community Needs and Gender Analysis were conducted through a partnership with Mercy Hands and DCA. The views expressed in this publication are those of the author(s) and do not necessarily represent those of the United Nations, including UNDP and the UN Member States.

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## 1. Introduction:

The situation in Iraq remains unstable with widespread humanitarian concerns. Years of conflict uprooted millions of people, eroded social cohesion, disrupted access to basic services, destroyed livelihoods and led to increased protection risks. With weak central governance and limited progress towards recovery and development, the situation has become protracted and millions of people across Iraq remain in need of humanitarian assistance.

In 2020, Iraq is simultaneously categorized as an upper middle-income country and one that INFORM's Global Risk Index labels as "very high risk" of a humanitarian crisis. More than two years after Iraq's military operations against the Islamic State of Iraq and the Levant (ISIL) ended, social, ethnic and sectarian tensions persist on multiple fronts.

The level of explosive hazard contamination in Iraq is unprecedented, with a deadly mix of conventional weapons and improvised explosive devices (IEDs). Death and injury from these explosive devices, including the deliberate booby trapping of homes and civilian infrastructure, are a daily reality for families returning to former conflict areas. These injuries have contributed to the number of persons with disabilities in Iraq, including in Salah Al Din.

Mercy Hands for Humanitarian Aid, in partnership with Dan Church Aid (DCA), has embarked on a UNDP-funded project in Salah al-Din (SAD) Governorate to address the unstable situation around protection risks, lack of livelihood opportunities, and deteriorated social cohesion. This project, "Advancing Economic Recovery in Salah-al Din through Livelihoods and improving Social Cohesion," includes multiple community-based assessments, asset replacement, micro-business support grants, vocational training, cash for work opportunities, job apprenticeships, cash for training opportunities, and social cohesion and peacebuilding activities. Mercy Hands is the lead implementer, with DCA providing specialist support in the areas of GBV, hazard mapping and Cash.

Both Mercy Hands and DCA have extensive humanitarian experience, Mercy Hands specifically in Iraq and within the Salah al-Din. Since 2006, Mercy Hands has implemented humanitarian response projects in SAD under the objective "Sustainable Livelihoods & Economic Recovery-Salah Al-Din Governorate-Iraq" with support from UNHCR, IOM, UN WOMEN, UNIFEM, UNESCO and WFP. Through a multi-sectoral and integrated approach, DCA aims to save lives, provide needs-based humanitarian assistance, enable recovery and enhance resilience of the most vulnerable conflict affected communities.

The purpose of this assessment is to better understand the needs of PWD in Shirqat and Baiji districts in Salah Al-Din (SAD) Governorate, particularly around access to service providers/facilities. These findings can then be used to improve access for PWD in humanitarian projects in the area, including this current project.

## 2. Methodology:

In coordination between DCA and Mercy Hands, a quantitative data collection methodology was composed for a household survey (face to face interviews) for a Mini Assessment focusing on people with disabilities to explore the availability of accessing mainstream services in Shirqat and Baiji districts in Salah Al-Din (SAD) Governorate.

The Mercy Hands MEAL Officer coordinated with the Mukhtars of both districts to reach the people with disabilities (PWD) at household level. Every Mercy Hands enumerator conducted the interviews in their area at the addresses provided by the Mukhtars of each neighborhood.

Since Baiji District is larger than Shirqat, a higher number of surveys were conducted in Baiji.

### 1- Study Area:

The survey area for the assessments is Al-Shirqat District and Baiji District in SAD Governorate which are both covered by the UNDP program in partnership with Mercy Hands (MH). The survey included household members with disabilities from a variety of financial backgrounds.

### 2- Survey period:

The survey period took place on 12-Nov-2020 and was conducted by 48 enumerators and 2 team leaders.

### 3- Survey design:

Throughout the survey quantitative data was collected at the household level (with a focus on PWD).

The DCA MEAL Consultant prepared the questionnaire with participation of the DCA Protection Officer. The Questionnaire was then uploaded into KOBO and shared with MH MEAL department for additional inputs and feedback.

A full days training on the questionnaire took place on 9-Nov-2020 with participation of the MH MEAL Officer and Enumerator team leaders for both districts (Baiji and Shirqat). The training aimed to help build the capacity of the enumerators and pilot testing of the survey questionnaire.

Table (1): the below shows a breakdown of the survey participants in both locations.

Location	Percentage	# of assessments
Baiji	68%	168
Shirqat	32%	78

## 3. Limitations:

One of the limitations experienced was in conducting the qualitative research. Due to the current COVID-19 context it was challenging to gather and conduct FGDs or KIIs with PwD who have access to available facilities in Shirqat and Baiji districts due to their increased vulnerabilities. Therefore, the FGDs and KIIs have not taken place and the quantitative survey has been adapted to cover all aspects of the accessibility assessment of PWD.

The other limitation was the bad weather during conducting the assessments (roads were closed due to the heavy rain) therefore further restricting access to participants.

Lastly, it was discovered that the needs of the PWDs for this assessment was the same for both males and females, so no gender disaggregation has taken place.

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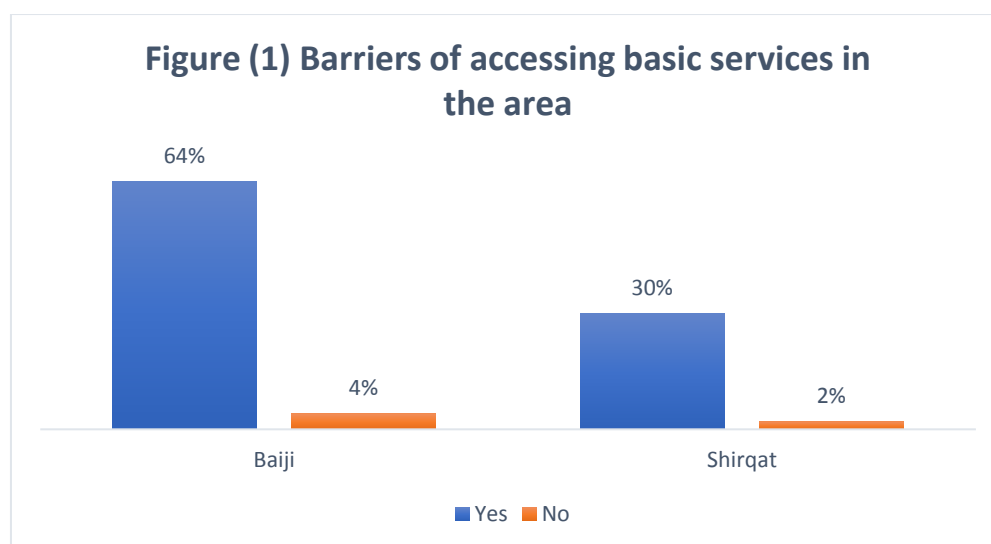
*NOTE: Throughout the report, data is disaggregated by location (Baiji and Shirqat districts) and findings are reported out of the total survey respondents. Since over twice the number of surveys were completed in Baiji than in Shirqat, please note that the results are not evenly weighted between these two districts*

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## 4. FINDINGS:

### A. Accessing basic services in the area

Figure (1) below shows the percentage of people who are facing barriers in accessing basic services.<sup>1</sup> Overall, 64% of respondents in Baiji and 30% of respondents in Shirqat face barriers accessing basic services.

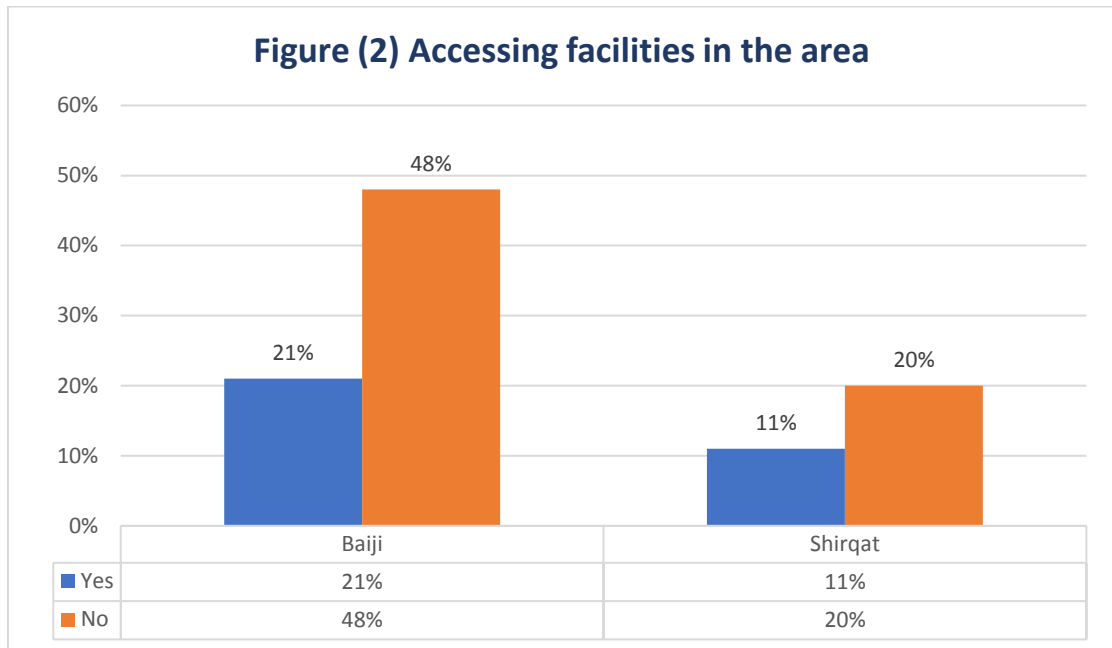


### B. Accessing Facilities in the area

Figure 2 shows the percentage of people who do or do not have any access to the facilities in the area (including schools, community centers, health centers and any other related services). Overall, 48% of participants in Baiji and 20% of participants in Shirqat do not have access to facilities.

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<sup>1</sup> (Schools, Community centers, Health centers.)



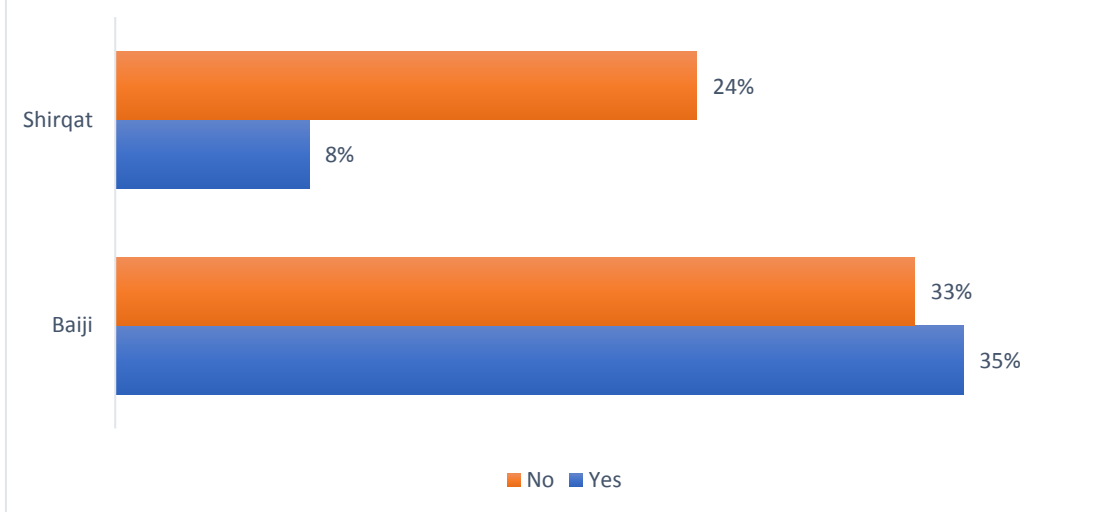
### C. Common challenges for PWD in the area

Respondents are facing a lot of challenges regarding access both areas. The most common challenges can be summarized by PWD inability to move alone, no special transportation for PWD, lack of services, financial situation of PWD, and poor condition of the roads. When asked about alternative solutions, respondents answers are the following: provide PWD with a cane, provide medical treatment by the private sector or NGOs clinic, establish community centres for PWD in both districts, and provide wheelchairs for those that are unable to walk.

### D. Comfort in receiving services

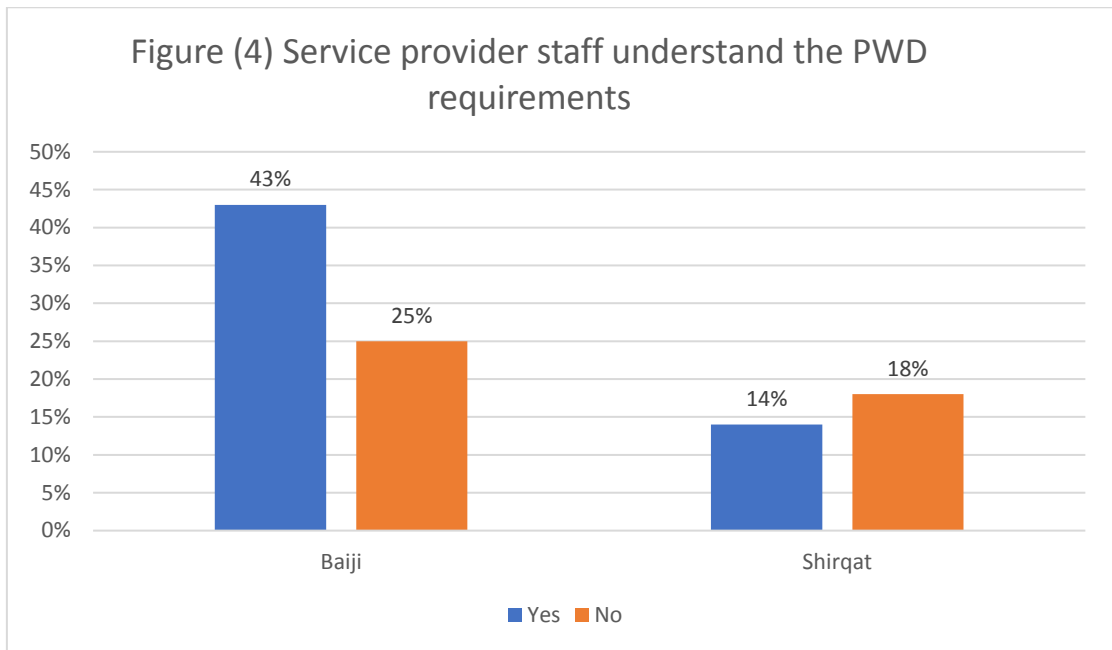
24% of respondents in Shirqat and 33% of respondents in Baiji do not feel comfortable and integrated in receiving services (see Figure 3). Following this, respondents were asked to explore the reasons why they felt uncomfortable to get more information from the respondents' perspectives. Respondents stated that they felt uncomfortable because: PWD can't move without an accompanying person, lack of capacity of the staffs' facilities, and lack of access to facilities.

**Figure (3) Comfortable and integrated in receiving services**



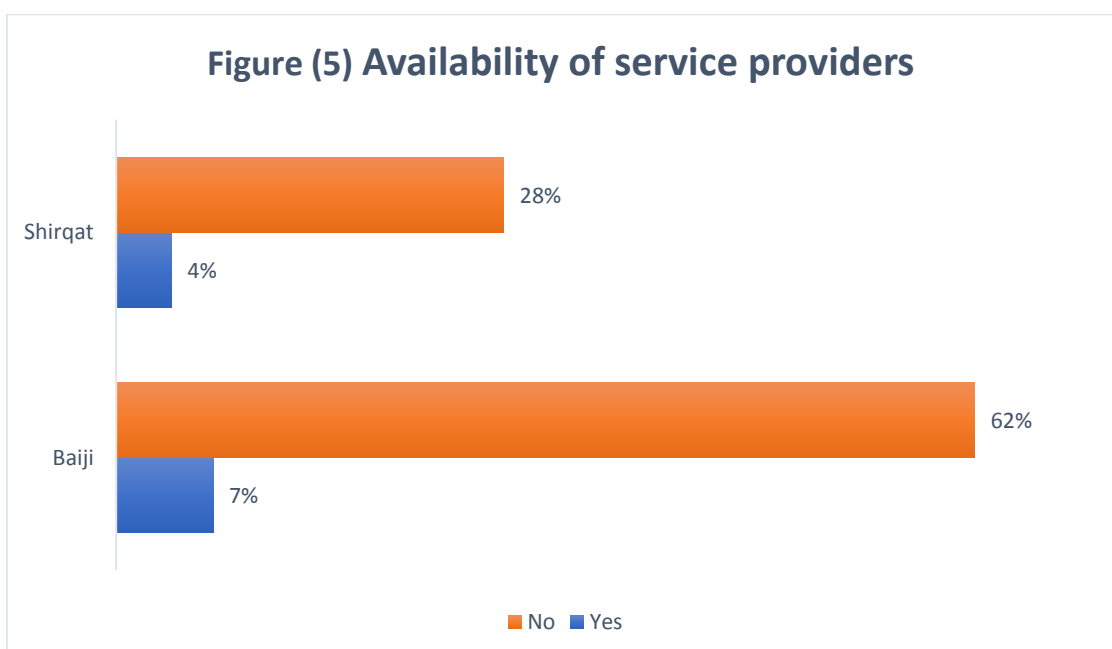
### E. Service provider staff understand PWD requirements and take it in consideration

In this section of the survey, respondents were asked if service providers appear to understand their needs and take them into consideration. 25% of the respondents in Baiji and 14% of respondents in Shirqat stated that service provider staff do not understand their needs. Figure 4 shows the breakdown per location. The respondents suggest various solutions to their needs and/or a better understanding of their needs, such as improving the skills of service providers, paving roads, and providing pathways for PWD in facilities.



### F. Availability of service providers

In this part of the survey, respondents were asked whether there are service providers in the facilities they use. 62% of the respondents in Baiji stated that there are no service providers in the facility they use, while in Shirqat, 28% of the respondents stated there are no service providers. Figure 5 shows the breakdown numbers per districts.





## G. Obstacles in accessing facilities

In this section, several questions have been asked to explore the various barriers for PWD in accessing commonly-used facilities in both districts, such as health centers, community centers, government offices, and other service providers. Figure 6 shows the breakdown number per location of PWD who report whether the facilities they commonly use have barriers in the entrance pathways.

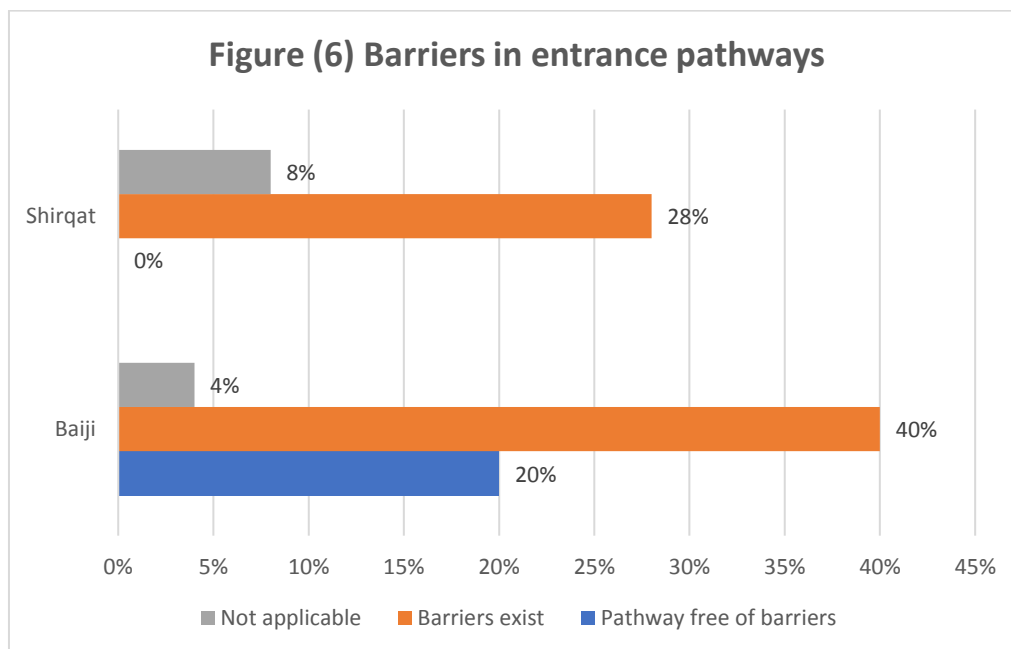
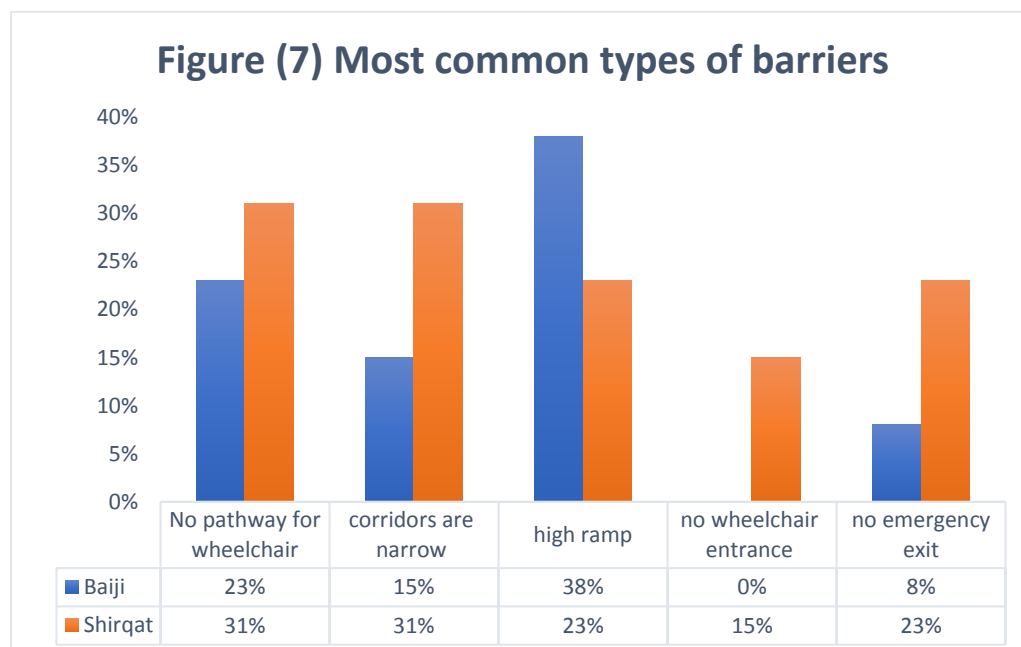
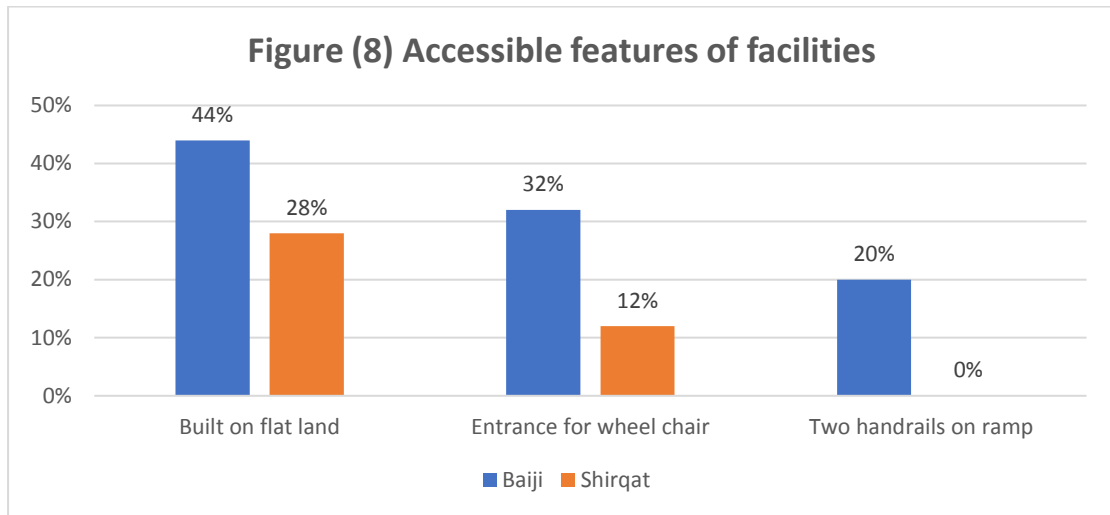


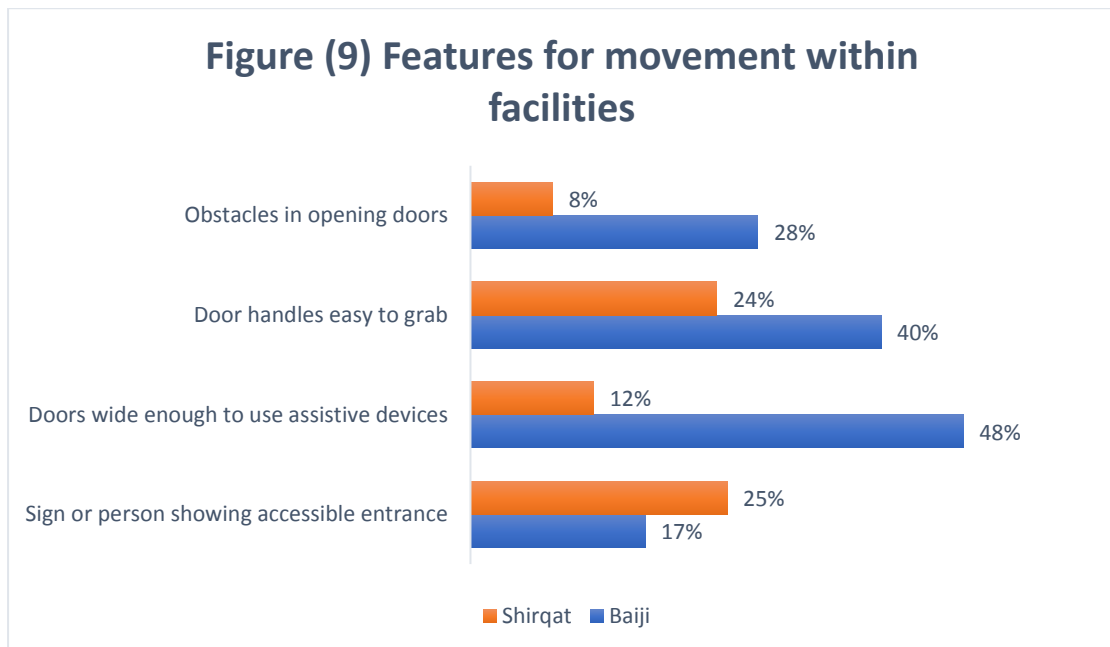
Figure 7 shows the breakdown numbers of the most common types of barriers faced at facilities per district in SAD governorate.



Following this, several questions were asked to respondents in order to gain further information about accessing facilities in their area. Figure 8 shows the breakdown of accessible features of facilities in both districts.



In order to have more information about the access to facilities, several questions were asked about features for moving around within the facility. Figure 9 shows the breakdown per district.



In addition to all the above breakdowns, further information about accessibility was explored:

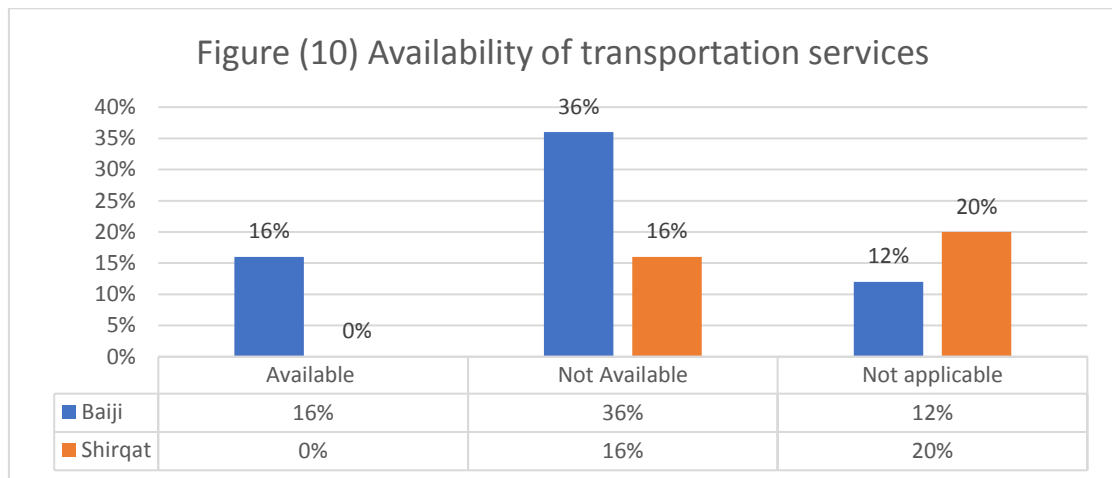
- 40% of the respondents in Baiji districts and 8% of respondents in Shirqat stated that corridors and floors are accessible.
- 40% of the respondents in Baiji district stated that toilets are not too high while 32% of respondents in Shirqat stated that it's not applicable.
- The information desk is easy to find for 48% of the respondents in Baiji and 8% in Shirqat.
- Within the facilities, 32% of the respondents in Baiji stated that there is no large print signage and information while 20% of the respondents in Shirqat stated that there is no signage.

## H. Movement and Transportation

In this section several questions were asked to gain more information about PWD ability to move independently. Overall, 20% of the respondents in Baiji are able to move independently while 12% were not. In Shirqat district, 16% of the respondents can't move on their own and are in need of assistance.

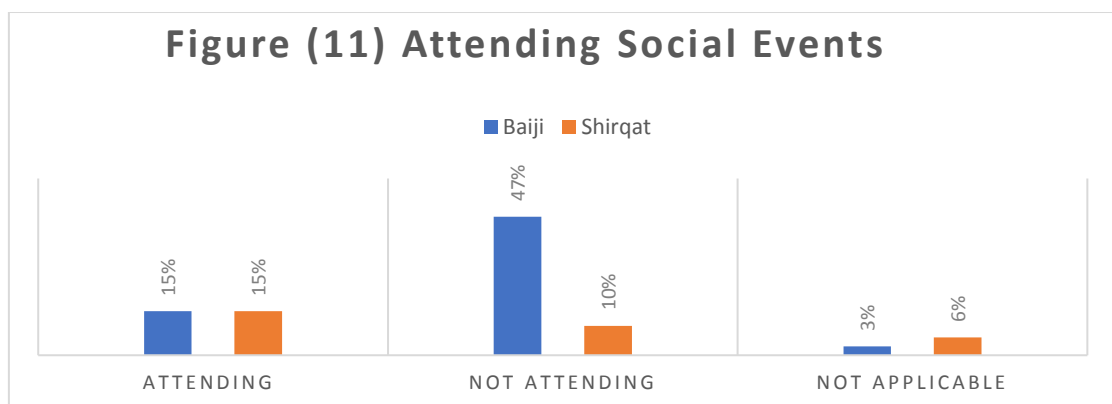
32% of the respondents in Baiji also stated that there are no sidewalks compared to 20% in Shirqat. 40% of Baiji respondents stated that the roads are paved while 23% of the respondents in Shirqat stated that it's not. In Baiji 36% of the respondents stated the roads are not leveled while 36% of Shirqat respondents stated the same.

Figure 10 shows the breakdown of the availability of transportation services. 16% of the respondents in Baiji who stated it is available also confirmed that it is adapted for PWD.



## I. Challenges in terms of inclusion

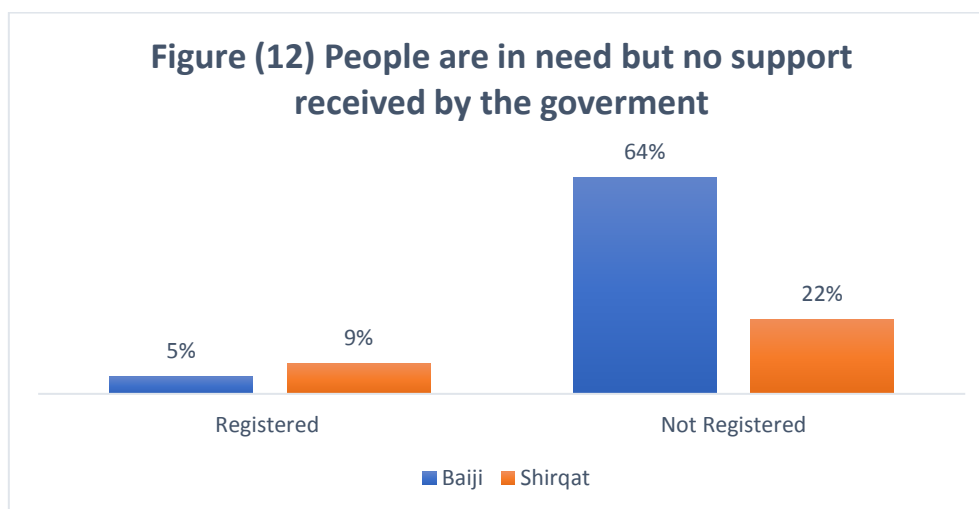
Respondents in both districts were asked if they face any challenges due to inclusion in the community they live in. 52% of the respondents in Baiji and 15% in Shirqat stated they are facing inclusion challenges. Relatedly, most respondents reported that they do not attend any social events. Figure 11 shows the full breakdown for PWD's attending social events.



While the survey did not explore the specific reasons for these challenges, some are undoubtedly due to issues around access, which have been reported on above.

## J. Receiving government Support

68% of Baiji respondents stated they are not receiving any support from the government for wheelchair or other relevant devices, while 31% of Shirqat respondents stated that they are not receiving such support. Figure 12 shows the breakdown of people who are in need but have not received support from the government.



*\*All the respondents for this question have declared they did not receive any support whether they were registered or not*

## k. Conclusion and Recommendation:

According to the collected data and various perspectives of respondents in both districts, and based on the above analysis, it is clear that PWD have very limited access to mainstream services in Baiji and Shirqat. Additionally, the facilities in the area are not fully prepared to receive PWD. Government support for PWDs is very limited and irregular. Moreover, it has been noticed there were very few specialized service providers for PWD. Finally, PWD face barriers to community inclusion, including to social events.

The recommendations below summarize the key aspects that would improve access to services for PWD in Shirqat and Baiji:

- Improve the ability of accessing services in both areas for PWD throughout different modalities i.e. paved road, pathways for PWD who are using assistive devices.
- Awareness-raising should be undertaken in both areas on the resources and available services specifically for PWD and caregivers, many of whom remain unaware of existing services.
- Humanitarian interventions to establish and support community centers for PWD, to address barriers, improve access and provide reasonable accommodations of PWDs to all available services in the area.
  - PWD have specifically requested canes, wheelchairs, medical treatment, and accessible community centers.
- Find solutions for transportation services for PWD in both areas.
- It is necessary to have service providers at main facilities that have an informed understanding of the needs and requirements of PWD.

## 5. Annex



Mini-assessment to  
understand the pers