INTRODUCTION

Years of instability and war have led to between one and two million FHHs in Iraq. Whether widowed, divorced, separated, or caring for their sick spouses, these women face a number of additional challenges in their daily lives as single parents. These include inadequate shelter, a lack of work opportunities, poverty, isolation, stigma against divorce, and a lack of adequate protection.

Between November 2010 and September 2011, IOM monitors identified the locations of 36,959 FHHs throughout Iraq. Monitors spoke with local leaders of vulnerable communities and inquired as to the presence of FHHs to determine estimates of their prevalence throughout the country. With many women unregistered with the Ministry of Displacement and Migration and living in isolated areas, it is difficult to determine exact numbers of FHHs, but figures indicate that 1 in 10 Iraqi households is headed by a woman.

Monitors had personal conversations with and assessed 4,552 of the FHHs, comprising 25.6% of all 17,781 family interviews conducted by IOM since November 2010. It is these interviews on which much of this report is based.

RECOMMENDATIONS

Awareness campaigns and legal aid groups should be established to advise and assist women with their legal claims, as many are unaware of their legal rights regarding divorce, child custody, and property rights.

More primary health care centers should be established, particularly in rural and isolated areas. Cancer awareness campaigns and screenings during home visits would further reduce health risks among FHoH.

Assistance programs for FHHs should include psychosocial assistance and special care for FHoH with mental and physical disabilities or psychological trauma.

FAST FACTS

- IOM-assessed FHHs throughout Iraq list their top three priority needs as: non-food items (NFIs), access to work, and food, indicating a need for regular income and sustainable livelihoods.
- 22% of displaced FHHs assessed by IOM live in improvised shelters, compared to 12% of host community and 10% of returnee FHHs.
- Only 2% of assessed Female Heads of Household (FHoH) are employed regularly, with 98% unemployed, retired, doing odd jobs, or unable or unwilling to work.
- 27% of assessed FHoH who are employed work in unskilled jobs.
- 39% of assessed FHH rely on assistance from relatives and neighbors, with only 18% receiving government or charitable aid.

RECOMMENDATIONS (CONTINUED)

Increased access to work could be realized through more vocational training for women and through the provision of income-generation grants for those women wishing to establish small businesses.

More should be done to identify and assess the needs of FHHs throughout Iraq, paying particular attention to the education and employment opportunities of children raised in female-headed households.

Iraq’s social welfare system should be reviewed and regulated, with an emphasis on accountability, accessibility, and reduction of bureaucracy so as to help FHoHs and their families access the support they need.

NGOs need more support and guidance on the NGO registration process so as to aid local community-based organizations currently working with women and children.

LOCATIONS AND PATTERNS OF DISPLACEMENT AND RETURN

FHHs are widespread throughout Iraq, but appear in higher numbers in the central governorates of Baghdad and Diyala and governorates in the northern Kurdish regions of Iraq.

The majority of displaced FHHs fled their homes in 2006 following the bombing of the Al-Askari mosque and the ensuing sectarian violence. Dates of displacement, however, range from 1975 until 2011, reflecting Iraq’s history of multiple displacements.

21% of the 1,384 displaced women who gave reasons for leaving their original areas said that they had fled due to displacement by force or threat, with a further 20% citing generalized violence. Ethnic, religious, and political discrimination and armed conflict are also common reasons for displacement, cited by 16% and 15% of the women respectively. Less frequently mentioned reasons for displacement were a lack of infrastructure and services, a lack of income or job opportunities, and drought. The displaced families represent a majority of assessed FHHs in Babylon, Thi-Qar, Najaf, and Kerbala.

Note: For the purposes of this report, the “Refugee” category indicates a family that has returned to Iraq after fleeing abroad, and the “Returnee” category indicates families who were displaced within Iraq and have since returned to their places of origin.

METHODOLOGY

IOM Iraq field monitors have assessed 4,552 FHHs (approximately 19,853 individuals) throughout Iraq, representing 12% of the 36,959 FHHs identified by monitors. After holding personal conversations with the assessed families, monitors determined that 2,765 of the families are members of host communities, 1,384 are IDPs, and 361 are returnee families. There were an additional 42 families identified who had recently returned to Iraq after fleeing to another country.

Through location-based analysis and individual interviews, monitors determined the demographic make-up, basic needs, access to services, shelter situation, and the education and employment status of these FHHs throughout Iraq’s 18 governorates.

Monitors based their assessments on their analysis of vulnerable communities, so the information that they collect is not necessarily representative of Iraq as a whole. Rather, it depicts the state and condition in which the most vulnerable families live.

An IOM monitor conducts an interview in the tent of three unregistered and vulnerable displaced FHHs. (Najaf, March 2011)
Displaced FHoH were also interviewed about the main factors preventing them from returning home. 27% blamed the weak security situation, 21% cited poor relations with their original community, and a further 11% spoke of a lack of job opportunities in their original area. 11% also cited a lack of money as among the primary reasons preventing return.

Other, less frequently cited reasons for prevention of return include: lack of access to or destroyed property in their places of origin, lack of services, and drought.

For the 361 returnee families, 95% returned due to the improved security situation in their original area, 73% cited return due to difficult conditions in their area of displacement, and 55% mentioned economic incentives for return, such as financial aid given by the government. There was also evidence of improving relations between groups in Iraq, with 47% of returnee FHHs citing assistance from local community and 26% pointing to improved relations with the local community as factors in their return.

*For full map, see Annex 1.*
The age range of assessed FHHs is diverse, with more than half falling between the ages of 35 and 54. The wide age range of women who manage their households independently is indicative of the impact that war and violence has had on women across generations in Iraq, both since the 2003 invasion, as well as during decades prior. The age range includes women from younger than 15 to older than 100.

While war and sectarian violence can largely explain the millions of FHHs throughout the country, a climbing divorce rate further contributes to the number of single mothers. In the period following the 2003 war, rising social and economic pressures on families led to an increase in the divorce rate. In Qadissiya governorate alone, the total number of divorces since 2003 has exceeded 12,000, marking a dramatic increase over decades prior. Kerbala governorate has experienced a similar increase, with the Director of the Ministry of Human Rights commenting on the “noticeably increased rate of divorce,” and stating that difficult economic circumstances are the primary cause.

Divorce and separation have been most common among mixed religion marriages, many of which fall apart under family pressure and threats from militia groups. High unemployment and financial burdens have also played significant roles in the rise of failed marriages in Iraq, as well as increased physical violence. Many women have fled the family home out of fear for their safety and the well-being of their children. Other reasons for divorce include men marrying multiple wives, and women being forced into marriage with older men at a young age.

There is religious homogeneity of assessed FHHs at the governorate level, indicating increasing segregation in Iraq. This trend has grown exponentially since the sectarian violence that followed the bombing of the Al-Askari mosque in 2006. Families are more likely to settle in areas where their religious sect occupies the majority. This preference is particularly prevalent among FHHs due to their increased vulnerability and dependence on others. With very few FHoH being financially independent, they are forced to turn to relatives and neighbors for help in meeting the needs of their families.

### Religion of Assessed FHHs by Governorate

<table>
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IOM-assessed FHHs throughout Iraq identified access to work, NFIs, and food as their most pressing needs. Shelter and health are also in high demand, as are water and electricity, particularly during the summer months.

NFIs such as blankets and generators are a high priority need, indicating the acute poverty endured by assessed FHHs. The need for food is also common among the women. Although the government is working towards a remedy by offering PDS food rations, the system has encountered difficulties. For example, monitors reported in April 2011 that PDS rations in parts of the Abara district of Diyala governorate had not been delivered for five months, forcing FHHs to endure increasingly high prices of food staples at the local market.

Host community, IDP, refugee, and returnee families remain largely consistent in the prioritization of their need rankings, although some deviations occur, reflecting the differing circumstances of families in those categories. Host community FHHs, who have not been forced to leave their communities of origin, are correspondingly the least in need of housing compared to the other three groups. Similarly, assessed returnee families have a much higher need for legal help than the others, often due to their struggles in reclaiming property lost upon displacement. Assessed IDP families also differ in their needs in the sanitation category, reflecting their status as being more likely than others to live in unsanitary improvised shelters.

The priority needs of vulnerable communities vary greatly from governorate to governorate. The needs of FHHs tend to reflect the quality and quantity of service provision in their local communities. For those women living in more rural regions where services are few and far between and there are cultural barriers preventing women from traveling, particularly in Anbar, Missan, Muthanna, and Salah al-Din governorates, access to work appears as one of the most significant needs. Families in the central governorates appear to have a greater need for shelter, reflecting the high use of improvised shelters in those areas, and FHHs in the southern governorates of Basra, Missan, Muthanna, and Wassit are in high need of water, indicating effects of drought.

*For enlarged graph, see Annex 2.
FHHs are particularly disadvantaged in terms of education and access to employment. Assessed female heads of household tend to be considerably less educated than their male counterparts. Illiteracy rates among assessed FHoH are high throughout Iraq. In some rural villages, such as those in Kerbala, female illiteracy is as high as 95%. This lack of education is an obstacle to awareness of and ability to access rights and benefits.

The children of assessed FHHs only fare slightly worse in terms of education level when compared with all Iraqi children assessed by IOM. For youth aged 15-29, those living in FHHs are slightly more likely to be illiterate (comprising 22% of assessed FHH children) and are less likely to have completed secondary school (10%) than the rest of assessed Iraqi youth of that age group who stand at 19% illiteracy and 13% completion of secondary school.

The rate of unemployment in Iraq has remained at 15% in recent years; however, unemployment among women remains high at just over 30%, with a slightly lower rate of 24% in Baghdad. Women face numerous obstacles in accessing the job market, including illiteracy, lack of qualifications, childcare responsibilities and, particularly in the governorates of Kirkuk and Salah al-Din, the constraints of societal norms and local traditions. The limited participation of women in the workforce throughout Iraq leads to their further marginalization and isolation, contributing to statistics such as the 44% of young Baghdad women who claim to not have friends from other religions or sects, compared with 17% of young men.

The vast majority of women assessed by IOM are without access to work. 21% are unemployed, while 66% are unable or unwilling to work due to societal norms that prevent women from working outside the home. Furthermore, some have expressed concerns over their personal safety and that of their children due to the occasional targeting of working women by militia groups. This lack of employment not only strains a woman’s immediate family, but her extended family and community as well. In Erbil, many women complained of unemployment and said that they were forced to live with relatives, thus creating a financial burden for their extended families.

8. Ibid.

*Employed Daily Wages indicates persons who make their living doing day-to-day jobs and do not receive a regular salary.
Only 2% of FHoH interviewed by IOM monitors are employed and have a steady salary. An additional 6% are employed doing odd jobs and do not earn a regular income, leaving them in an unstable situation. Unskilled labor is the most common employment sector, and includes work in bakeries, house cleaning, and local produce selling at the markets. Agriculture is the second most common sector that employs FHoH, with many women working as shepherds or farm labourers. Women employed in agriculture complain that this kind of work is unsuitable due to its physically demanding nature and long hours that force them to leave their children alone at home. Almost all of the 15% of assessed women working in skilled services are working as tailors.

In Kerbala, a local community-based organization providing vocational and business training for women informed IOM that there were over 1,500 widows registered with the organization in January 2011. Despite the high percentage of those without work, there is a desire among FHoH to learn new skills that would make them more eligible for employment.

A returnee widow, whose son was killed by insurgents, works to support her two single daughters and her grandsons. (Babylon, June 2011)

As there are very few job opportunities suitable for women, and many more are unable to work, poverty is a common struggle for the majority of FHHs across Iraq.

Of those assessed, 39% of women rely on financial assistance from relatives and friends in Iraq, compared to just 19% of all families assessed by IOM. The difficulty that women experience in accessing the job market, even for unsteady day-to-day work, is evident in the gap between the 24% of assessed FHoH who are able to generate an income this way, compared with 44% of all assessed vulnerable Iraqis. FHH are also less likely to have a steady salary and more likely to be receiving aid from the government.

Overall, 58% of assessed FHoH rely on others for income, with 42% able to support their families through work, numbers that contrast starkly with the rest of the population. The vast majority of women interviewed rely on more than one source of aid due to the irregularity of the income and the amount received. Dependency on government financial aid or in-kind and cash assistance from relatives and neighbours puts women at higher risk for being victims of abuse and exploitation. Women in rural areas feel particularly vulnerable as heads of households due to local norms and traditions that discourage women’s roles outside the home. Helping FHoH to access the job market and become more independent would help them to depend less on others in the community for support, thereby relieving all Iraqis of this burden.

In recent years, an alarming trend of mut‘ah or ‘pleasure marriage’ has emerged, in which individuals and, at times, religious and government institutions coerce women into marriage in exchange for charity or benefits. Other widows and divorcees

feel obliged to marry a second time in order to provide for the needs of their children. In Salah al-Din governorate among others, IOM monitors found that some women and children from FHHs are increasingly forced to collect scraps from landfill sites to sell, beg on the streets, or commit acts of prostitution, risking abuse and irreversible stigmatization from their local communities.

IOM monitors visited an IDP FHH in Baghdad governorate and found the mother and her family living in a mud house consisting of a single room without a roof. The woman and her children are forced to live in darkness because they cannot afford to pay their share for access to a private generator. The family is also without safe drinking water and often sleeps at night without having had dinner.

Also in Baghdad, monitors learned of an alarming case in April 2011 when a woman tried to poison herself and her family so as to end their poverty and suffering. These families are particularly vulnerable due to their location in informal settlements in and around Baghdad. They lack the most basic services such as water and electricity, and are less likely to receive financial assistance from the government or assistance from relatives or neighbours due to the nature of the settlement. The financial dependency and instability endured by FHHs contribute to their vulnerability and impedes their ability to integrate or re-integrate into their communities.

Despite Iraq’s history of providing aid and benefits for widows under Saddam Hussein’s regime, social welfare remains problematic in Iraq due to high levels of corruption and an outdated system in need of serious overhaul. At present, the government provides widows with 50,000 to 120,000 ID (43 to 103 USD) in monthly cash assistance, according to the number of dependents. Widows are entitled to further compensation of up to 2.5 million ID (2,138 USD) if their husbands were killed due to terrorist activity. For some women, however, a problem encountered in receiving such benefits is that many husbands are considered ‘missing’, rather than sick, dead, or alive, and therefore they are not entitled to receive much-needed cash assistance.

11. Ibid

A widow whose husband was killed in 2006 with her five children. She has no source of income and relies on in-kind assistance from relatives. (Anbar, May 2011)
In 2009, an ICRC survey of Baghdad found that only 25% of 
women assessed had received compensation for a spouse 
killed by terrorism, and a mere 10% of elderly widows had 
received their pension. Similarly, in 2008 Oxfam reported 
that 76% of 425 widows assessed across Iraq did not receive a 
pension from the government. As a result, FHoH are much 
less likely to be able to afford to send their children to school, 
or pay fees to access generators, clean water, or medicines.

The number of IOM-assessed women receiving aid from the 
government as a primary income source is relatively small, 
with FHHs in some governorates receiving almost no income 
support. None of the 239 vulnerable FHHs assessed in Ker- 
bala received any financial assistance from the government, 
and only 1% of the 165 FHHs assessed in Basrah did.

During their field visits, IOM monitors have heard complaints 
and requests for legal aid from women who are not receiving 
social welfare benefits due to a lack of documents, 
awareness of their rights, or the ability of the Ministry of Labour and Social Affairs (MoLSA) to reach out to those FHHs in 
rural areas.

Others do not even bother applying for benefits due to long wait times, corruption, and a complex process requiring large 
amounts of paperwork. The women who do receive a monthly stipend often complain that the average monthly allowance 
barely covers the cost of living for two weeks, especially for those widows living in rural areas who tend to have larger 
families to support.

Assistance from NGOs and charities is yet more thinly spread. Humanitarian assistance is notably absent in Basrah, and is 
generally lacking in the more rural regions of Anbar, Missan, Muthanna, Kirkuk, Ninewa, Salah al-Din, and Sulaymaniyyah 
governorates. In some cases, religious associations provide widows with financial assistance, but this is neither a sufficient, 
reliable, nor sustainable source of income.
As sole providers and primary caregivers in the home, FHoH are among the most affected by poor quality housing and a lack of basic services in both rural and urban areas. The problem of inadequate housing is compounded by the harsh climate of Iraq during the summer and winter months, with many women and their children living in makeshift or damaged houses without a roof. This lack of shelter, along with poor access to water and sanitation, schools, and healthcare facilities, exerts yet more pressure on the women and their children in daily life.

Informal settlements are most common in central Iraq, owing to the large amount of internal displacement within the area. IOM identified high numbers of IDP FHHs in informal settlements in Karkh and Al Husseiniya districts of Baghdad, as well as Al Rifae district of Thi-Qar governorate. The families in these areas live without basic services and are in urgent need of attention from government and humanitarian actors.

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While women tend to live longer than men in Iraq, they are still quite susceptible to illness and health problems. Under pressure to support their families as the sole breadwinner, FHoH often suffer from stress and depression, and neglect their personal health. Moreover, the majority of FHHs live in poorer areas that are less likely to have health facilities. Nevertheless, many report health problems within

Living conditions vary among IDP, returnee, and host community FHHs. 60% of assessed returnee families live in a home of which they have ownership, compared to 44% of host community and 20% of displaced FHHs.

22% of assessed displaced FHHs live in improvised shelters, compared to 12% of returnee and 10% of host community FHHs. 18% of assessed host community, 16% of displaced, and 15% of returnee FHHs live in the homes of host families or relatives.

Numbers of assessed displaced, host community, and returnee FHHs who rent their housing is relatively low, reflecting the lack of regular income and financial stability of most FHHs, who may not have the reliable income to pay monthly rent installments.

While women tend to live longer than men in Iraq, they are still quite susceptible to illness and health problems. Under pressure to support their families as the sole breadwinner, FHoH often suffer from stress and depression, and neglect their personal health. Moreover, the majority of FHHs live in poorer areas that are less likely to have health facilities.

Health ranks relatively low on the list of priorities for FHHs, although chronic illness and disability are frequently cited as sources of vulnerability among women assessed by IOM. This trend suggests that women have more basic and pressing needs, such as obtaining food and shelter for their children. Nevertheless, many report health problems within

An IOM monitor conducts an interview in front of the home of a host community family. The widow is mentally handicapped and unable to walk. She is unable to provide for her children and in urgent need of a wheelchair. (Erbil, June 2011)
During one visit to an informal settlement in Thi-Qar, monitors encountered a host community family consisting of a widow and her three children, all of whom are mentally handicapped and in need of special care. They are living in acute poverty with no source of assistance other than from neighbours who give them in-kind assistance of food and small amounts of cash from time to time. Nevertheless, the widow talks of her difficulties socializing and the stigma associated with giving birth to disabled children. Despite an estimated 2.75 million people with special needs in Iraq\textsuperscript{15}, social integration and acceptance remain difficult, and special health facilities are rare across the country.

Health vulnerabilities among assessed FHHs

\[ \text{Person with Chronic Illness} \]
\[ \text{Person with mental disability} \]
\[ \text{Person with physical disability} \]

IOM continues to work with donors to provide protection and support for those particularly vulnerable families and to alleviate the pressures of daily life as a FHoH. Under the Programme for Human Security and Stabilization (PHSS), IOM offers both individual assistance to FHHs and also technical assistance for those community-based NGOs working with women and children.

IOM’s program activities for FHHs include livelihood assistance, psychosocial care, health assistance, legal assistance, and awareness-raising campaigns to empower women and inform them of their rights and issues concerning their health.

Livelihood assistance consists of in-kind grants, vocational training, on-the-job training, and business development services. Women have been given grants to start small businesses after receiving the necessary training. This program has empowered a number of women, increasing their financial independence and stability.

Psychosocial assistance takes the form of discussion groups, family sessions, and home visits. Discussion groups offer women a chance to meet others enduring similar problems and experiences and allows them to learn about a number of issues, such as the political role of women, customs and traditions, and the importance of education. Many vulnerable families have suffered from particularly sensitive issues and live in isolation, with no one to talk to about their problems. Thus, IOM representatives also visit women and children in their homes to discuss domestic violence, good parenting techniques, and coping strategies.

Medical Assistance and Health Counseling is vital to ensure that women do not neglect their personal health amidst the struggles of daily life as a single parent and sole breadwinner. IOM organizes health information and awareness-raising sessions in local communities covering everything from women’s health to childcare and the home. IOM also provides individual medical assistance to those requiring urgent medical attention and coordinates referrals with its reliable network of medical partners.

Legal aid for FHHs is in demand due to problems accessing property, social welfare benefits, and an increase in the number of child custody and divorce cases. IOM legal aid consists of one-to-one counseling, small group sessions, and legal representation in court.

For further information on female headed households and other vulnerable groups in Iraq, please contact the IOM Iraq at iraqinformationrequests@iom.int or Keegan de Lancie, IOM Displacement Monitoring Officer, at kdelanie@iom.int.
Female-Headed Households Identified

- **0**
- **1 - 232**
- **233 - 406**
- **407 - 720**
- **721 - 1125**
- **1126 - 2576**

**Governorate** | **FHH**
--- | ---
Anbar | 1664
Babylon | 414
Baghdad | 5985
Basrah | 3750
Dahuk | 991
Diwali | 2415
Erbil | 1173
Kerbala | 1371
Kirkuk | 2885
Missan | 2585
Muthanna | 734
Najaf | 1586
Ninewa | 4433
Qadissiya | 1922
Salah al-Din | 1465
Sulaymaniyah | 1723
Thi-Qar | 1381
Wassit | 482

**Total** | **36959**

*Data collection is ongoing. Numbers will be updated as new data is received from assessments of vulnerable communities.*
Priority Needs of Assessed FHHs

- Water
- Shelter/Housing
- Sanitation
- Other
- NFI
- Legal Help
- Hygiene
- Health
- Food
- Electricity
- Education
- Access to Work
- Work