Iraqi Women Integrated Social and Health Survey (IWISH2)

Summary of Key Findings

April 1, 2022
1. Introduction

The Central Statistical Organization (CSO) and Kurdistan Region Statistical Office (KRSO), with the financial and technical support from the UNFPA, conducted the second Iraqi Women Integrated Social and Health Survey (IWISH 2). The first survey was carried out in 2011 and this survey in 2021. The survey intended to identify the social and health parameters for the Iraqi households, to study women’s status, and to collect enough statistical data that reflect women’s health and social behaviors, issues of violence against women and the cost of violence. Such parameters reflect women’s status, real household role, reproductive issues, child upbringing and their cultural and cognitive qualifications. This survey also shed light on a variety of harmful behaviors against women by the society; involvement in the economic, social and political aspects. The survey shall also provide a direly needed data-base for monitoring and tracking of SDGs, particularly those related to SDG 3 and 5.

1.1 Purpose and Objectives of the survey

The purpose of the survey is to collect data on women of different age groups to be able to assess their conditions in relation to access to education, health care, decent work and good political representation; It provides comprehensive statistical data on women’s social and health issues and violence against women; as well as to study women perception about their participation in the social and economic activities. On the other hand, the results of the survey will provide evidence concerning discrepancies among women in different governorates in order to reduce disparity.

The survey also aims to identify the impact of the COVID19 pandemic on the level of health care and health services.

The findings of the survey will avail the opportunity to compare progress made on different aspects of women’s status after a decade of the previous survey which was conducted in 2011. This report includes an explanatory summary of the main findings of the Iraqi Women Integrated social and health survey 2021.

1.2 Methodology:

1.2.1 Targeted Group

The survey covers all age group in the two questionnaires administered (i.e. Household and women). The household questionnaire which is related to the demographic statue of the population. As for education section, it includes 4+ age group; disability includes 5+ age group; and the section on Covid-19 Pandemic impact on households includes 10+ age group. The section on women studies women from 15+ age group except 15-45 age group of currently or previously married women.

1.2.2 Implementation of the survey

Several preparatory technical meetings were held, led by CSO, in coordination with the directorate of women empowerment at the Council of Ministers Secretariat as well as the ministry of health. KRSO was closely involved at all stages of planning and implementation.
It was agreed that the sample size will be 532 households per governorate equally distributed among the urban and rural communities. Survey detailed workplan was developed with clear timeline, budgets and implementation responsibilities. The survey took 21 days to conduct (August 15th to September 21st, 2021 including holidays).

1.2.3 Sample Design and Sampling Units

The survey sample was designed to acquire highly accurate and efficient indicators, to cover the entire country, to provide governorate representative indicators, and to adjust the available frameworks to have as much representative sample as possible with the absence of an updated framework. The chosen design was consistent with the conditions of the fieldwork in Iraq and the access to effective M&E for the work.

1.2.3.1 Sample size

The survey covers all of the governorates of Iraq and it uses the random sampling for all regions depending on the results of the 2009 census and numbering. Since the purpose of the survey is to produce indicators for each governorate.

A sample size of 532 households for each governorate was decided. The sample was distributed in each governorate by randomly choosing 38 residential blocks in the urban areas and 38 residential blocks in the rural areas. All households in every block were updated to ensure the control over the changing happening in each block. Then, 7 households were randomly chosen from each sampled block. The overall response rate was estimated at 98%.

1.2.4 The Questionnaire

Two versions of the questionnaire were designed, one for all household members and the other for 15+ year-old females. Household questionnaire includes 4 sections: household records, education, disability and Covid-19 Pandemic impact on households. The female questionnaire was divided into 9 sections: demographic background, pregnancy/birth-giving for the last 5 years (the last dead/aborted birth-giving), maternity care for the last alive newborn, morbidity during pregnancy in the last 5 years before the survey (Aug. 2016-Aug. 2021), Household planning, general morbidity, displaced and returned women, ownership and loans, women engagement, empowerment and equality and violence against women.

1.2.5 Fieldwork and data collection

An elaborate field plan was devised to conduct fieldwork, which went on for 3 weeks with the formation of the central oversight team from the staff of the relevant agencies, the local teams that were headed by the directors of statistics in each governorate, and field teams with team leaders and researchers from the female staff members for the sensitivity of the female version of the questionnaire. The total number of the teams was 73, which were deployed over the governorates by 4 teams per governorate except Saladin as it had 5 teams.

1.2.6 Data Analysis and Report writing

Data was processed and produced using ODK software programme. Electronic data collection was employed, using tablets for field data collection. Data was processed at the CSO jointly by the technical staff of CSO and KRSO. The descriptive tables and frequency tables were identified and produced with support from UNFPA.
2.0 Household Characteristics

2.1 Average Household Size

Household size is showing a decreasing trend over the past decade 2011 – 2021, although not a significant decrease. Household size in urban areas is smaller than in rural areas, while Kurdistan region governorates showed smaller household size 5.2 and 5 respectively.

![Household size 2011 - 2021](image)

2.2 Structure – Extended Households

Household structure in Iraq is characterized by prevalence of extended Household structure; an average Household may include husband and wife and children 54%, their spouses 3.2%, and grandchildren 6%.

![Household Structure](image)
2.3 Spatial settlement of Households

Around 92% of families are settled in their original domicile; however, this percentage changes sharply in governorates of Ninawa, Anbar and Salahaddin due to prevalent circumstances in these governorates after liberation from DAISH. Salahaddin governorate has 71% of settled families compared to Ninawa 79% Anbar 57%.

2.4 Changing original place of residence

There is a considerable population mobility between the governorates, especially the governorates that were liberated from the occupation of DAISH. In Ninawa 17% changed their original place of residence while Anbar 52.9% and Salaheddin 33.8%. It was noted that 44% of the those who changed their normal residence were because ‘terrorist operations’, and that 22% of them were for ‘security reasons’, and ‘accompanying the Household’ accounted for about 22%.
3. Education

3.1 Individual attainment of education

Women are still less educated than men. The percentage of illiterate females is 17% compared to 7.6% of the male illiterate, and the percentage of females is lower at any level of education (primary-intermediate-preparatory-university). However, the differences are not significant, which reflects a clear improvement in female education levels.

3.2 Enrollment:

Current enrollment ratios males and females appear to be acceptable in terms of gender parity. in the various levels of education; although there are slight differences, it appears clear that there are equal opportunities for both sexes in all levels of education. Indeed, these rates are witnessing a relative increase in female enrollment at all levels of education, including the preparatory school level. On another note it was found that an estimated 28.8% of males and 21.8% of females did not wish to continue education. It is to be noted that enrollment in government education is 95%.
### 3.3 Satisfaction with e-learning

There have been major efforts made by the government to adopt the e-learning method, especially during the period of the spread of the Corona virus pandemic. Data shows little difference between those who are satisfied 47.6% and those not satisfied 50% with online education. Missan 22.1, Duhok 18.7 and Mothana 18.4 are the governorates with highest illiteracy rates.

![Enrollment in different levels of education](image)

### 4.0 Disability

Data on disability has not shown significant variations on five areas of disability investigated, such as Seeing, Hearing, walking and climbing stairs, communication with others and focusing and remembering, with the answer “no difficulty” in more than 92% cases. Among those disabilities at birth (cognitive) around 51% have issues with communication with others, 37% remembering and focusing, 31% Listening, and 15% walking while those who are disabled by a certain disease; walking has the highest percentage 37%, while hearing 37%, communication 31%, remembering 29% and listening 28%. Much of support should be directed towards disabled persons by involving them and integrating them in community work and development and innovate disability sensitive programmes.

![Satisfaction with E-learning](image)
5.0 Ageing and self-care

Self-dependency of those above 60 years was investigated on some basic care needs of the older persons. Interestingly, the data shows an estimated 85% and above who feel independent on four areas such as a) wearing cloth, b) Bathing, c) Eating, d) Movement.

6.0 Impact of COVID19 on the Household

An estimated 94% of respondents are aware about covid19 out of whom around 67% have sufficient knowledge about the pandemic. Sources of information about the virus include satellite channels 77%, social media 59.1%, friends and relatives 62. And only 12.5 are health authorities. Its to be noted that health authorities used TV channels often to communicate information to the public. The vast majority 96% responded that they did not experience any form of violence due to covid19, either physical or verbal.
7.0 Women social status

7.1 Marital conditions of woman

The average age at first marriage in Iraq has shifted from 22.4 in 2011 to 20.5 in 2021. The figure increases to (21.2 – 25.9) in Kurdistan region. The percentage of women who were married before 18 showed 25.5% and those married before 15 were 5.2%. The results of the previous survey in 2011 indicated that the percentage of women who married before they reached the age of 18 and 15 years old was 21.7% and 4.9%, respectively. The situation is alarming for the age group 20-24 where those married before 18 is 46%; however, this percentage reduces sharply to around 8% for those married before 15 years of age. The age of husbands is higher than wife amongst married couples in 83% cases, with only 13% of couples where wives are of higher age and 4% are not known. In all, 64% of marriages occurred due to Household relationships and a sizable 25.4% were married accidentally without prior arrangements.

Decision regarding girl’s marriage is an indicator of empowerment. In 67% of respondents it’s the Household that took the decision for the marriage of the girl; it goes further up to 70.8 and 68.8% in rural and urban areas respectively.
7.2 Marital conditions of woman

The average age at first marriage in Iraq has shifted from 20.5 in 2011 to 22.4 in 2021. The figure increases to (21.2 – 25.9) in Kurdistan region. Decision regarding girl’s marriage is an indicator of empowerment. In 67% of respondents it’s the Household that took the decision for the marriage of the girl; it goes further up to 70.8 and 68.8% in rural and urban areas respectively.

Premarital medical examination is an established practice and a legal requirement for the official marriage contract in Iraq. 85.2% of the respondent married women did undergo the medical test before marriage, while 15 did not. Out of those who did the medical test about 94.6% are aware about the results of the tests and 85% discussed the results with the medical doctor.

The percentage of unmarried women witnessed a noticeable decrease in 2021 at 23.8% coupled with an increase in the percentage of married women 66.4%. The percentage of widows to all women decreased from 9.3% in 2011 to 7.8% in 2021, and the divorce rates remained close to their rates in the two mentioned years; the average age at divorce among respondents was 30 years. This may indicate that the marital conditions of women have not seen any major changes in the past decade, although this inference may differ in areas affected by insecurity and violence. The major reason cited for divorce is social incompatibility i.e. about 38%, wife battering 23% followed by Household interference about 19%.
Ever married Women 15+ health examination criteria and results %

- Pre marriage Test: 85.2%
- Informing results of tests: 94.6%
- Existence of a medical problem: 9.7%
- Discussing results with Doctors: 85.2%
- Health care to families: 67.6%

Reasons for no pre-marriage medical examination:

- It was not required by court earlier: 52.7%
- Marriage not in court: 30.4%
- Other: 6.2%
- COVID19: 9.9%
- Don’t know: 0.7%
7.3 Women’s Headed Households

Women headed households constituted remained around 10.7% for the past decade. However, the percentage increases to 12.1% in urban areas and reduces to 6.9% in 2021 as compared to 12.4% to 5.9% in 2011, a decade ago.

8.0 Fertility and Childbearing

The total fertility rate for the women age group 15-49 has seen a decrease from 5.3 born in 2011 to 3.3 in 2021. Kurdistan region has shown further reduction in total fertility from 5.7 to 3.2. Significantly, rural women fertility has reduced from 5.1 to 3.2 in 2021. Prenatal care of pregnant women in Iraqis remarkably high among pregnant women showing 93.5% of them were checked up by professional health personnel including medical doctor.
82.6%, qualified nurse 8.7% and professional midwife 1.2%. Among those who sought health care, 58.5% of health care was provided by a private health clinic, while 17.6% government hospital and 9.1% private hospital.

As for pregnancies that ended in stillbirth or abortion, 59% of women received health care from doctors in their private clinics followed by government hospitals by 18%. Ironically, stillbirths or abortions occurred despite the fact that 53% of women made at least one to three visits to health facilities and 34% of them had 4 or more visits. Almost 40% of respondents who had experienced stillbirths or abortions did not seek medical care because they did not experience any health issues at the time, while 27% because of high cost, 9.6% had previous self-experience and 7.6% because of distance to the nearest health facility. Among the married women who made their first visit to a health facility 47.9% attributed it to confirming pregnancy, and 30.4% to check fetus health while 11.4% for routine checkup.

8.1 Skilled birth attendance:

Births attended by health personnel has clearly increased over the past decade to 94% a remarkable increase from 78.5% in 2011. Pregnant women’s awareness and health seeking behavior has improved over the past decade; the percentage of women who gave their last birth in a health facility has improved; including government from 68% 2011 to 73% in 2021; private hospitals 8% in 2011 to 17% in 2021; meanwhile home births has substantially reduced from 19.2% 2011 to 7.5% in 2021.

8.2 Types of delivery:

According to World Health Organization (WHO), caesarean section use continues to rise globally, now accounting for more than 1 in 5 (21%) of all childbirths; similarly, the rate of caesarean sections in Iraq is currently estimated at 36% an increase from 23% for the year 2011. Deliveries by caesarean section operation constituted 23.9 compared to 7.5 in 2011, while normal deliveries 26.7 in 2021 compared to 13.6% in 2021.
9.0 Health seeking behavior

As for the desire to get pregnant an estimated 86.9% of women in the age group 15-19 expressed interest in getting pregnant and the percentage slightly reduced to 72.6% for the age group 45+.

Among the married women who made their first visit to a health facility 47.9% attributed it to confirming pregnancy, and 30.4% to check fetus health while 11.4% for routine checkup. 39% of the women who gave birth to their last child indicated that medical examinations should be conducted on the last child immediately after birth. This percentage converges for the different classifications, noting the decrease in the percentage of examination of the last child with the advancing age of the woman.
In all 82.6 women consulted a medical doctor for pregnancy examination and 8.7% a qualified nurse another 7% consulted an authorized midwife.

### Reason for first visit for pregnant women 15+

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ascertain pregnancy</td>
<td>47.90%</td>
</tr>
<tr>
<td>Ascertain health of foetus</td>
<td>30.40%</td>
</tr>
<tr>
<td>Routine check up</td>
<td>11.40%</td>
</tr>
<tr>
<td>Mother’s safety</td>
<td>2.40%</td>
</tr>
<tr>
<td>Appointment for giving birth</td>
<td>3.10%</td>
</tr>
<tr>
<td>She had a health problem</td>
<td>3.40%</td>
</tr>
<tr>
<td>Vaccination</td>
<td>0.90%</td>
</tr>
<tr>
<td>Other</td>
<td>0.20%</td>
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</tbody>
</table>

### Women 15-49 who consulted medical personnel after delivery

- Medical Doctor: 52.7%
- Nurse/qualified midwife: 32.1%
- Traditional midwife: 13.3%
- Other: 0.7%
- No one: 0.2%
9.1 Stillbirth and abortion

As for pregnancies that ended in stillbirth or abortion, women who received health care from doctors in their private clinics constituted 59% and then in government hospitals by 18%. Ironically, stillbirths or abortions occurred despite the fact that 53% of women made at least one to three visits to health facilities and 34% of them had 4 or more visits. Almost 40% of respondents who had experienced stillbirths or abortions did not seek medical care because they did not experience any health issues at the time, while 27% because of high cost, 9.6% had previous self-experience and 7.6% because of distance to the nearest health facility.
10.0 Family Planning

The ever married women using modern contraceptives was estimated at 43% an increase from 28.3% in 2011. The average age of first use of modern contraceptives is 36 years. Around 75% of couples believe that decision to use modern contraceptives is a joint decision between the husband and the wife; while 13% is wife’s decision, 9% husband’s, 2% don’t know and 1% other. This is a positive indicator that Household planning is a mutual agreement between the couples. Married women also consent to husband using contraceptives as 55.5% agree, while 15.6% do not agree and another 9.8% conditionally agree.

10.1 Use of contraceptives: Women of reproductive age who use all methods of Household planning including withdrawal and safety period 31.2%, out of those using modern contraceptive commodities 32% are using pills, 16.7% IUD and only 8.1% are using male condoms.

Married women respondents cited non interest in child bearing and birth spacing as the major reason for using Household planning methods (67%). On the other hand, the major reasons for stopping use of contraceptives for those ever married women ranges from 32% for the desire to have a baby, the misconception that it may cause health issues 25% and 12% for menopause.
Use of modern contraceptives by Age group

Married women 15-49 - Decision to use Household planning methods
Reasons for using contraceptives

- Not interested in child bearing: 44.0%
- Economic reasons: 15.9%
- Child care: 23.1%
- Child spacing: 10.2%
- Preserve my health: 5.0%

Married women agreement on husband using contraceptives

- Don’t know: 55.5%
- Do not agree: 15.6%
- Conditionally agree: 9.8%
- Agree: 19.1%
Women 15-49 by method used for Household planning

- Pills: 32.2
- IUD: 16.7
- INJECTION: 5.2
- Implant: 0.4
- male condom: 8.1
- female condom: 0.2
- Diaphragm for Women: 0.3
- Topical Ointment or Cream: 0.1
- Male Sterilization: 1.0
- Tube Ligation: 3.7
- Exclusive Breastfeeding: 0.8
- Safety Period: 7.0
- withdrawal: 24.2
- other: 1

0 5 10 15 20 25 30 35
11.0 Level of Information about key issues of Reproductive Health

The level of receiving information for women who gave birth to a live baby in the five years preceding the survey is relatively acceptable, such as the place of birth (71%) and the importance of breast-feeding (75%), during pregnancy, childbirth and postpartum (61%), while the awareness rate about Household planning and birth spacing is relatively low (55.2). On another note, the percentage of women diagnosed with cancerous diseases is 0.5%, and the average age of a woman at the time of infection is 43 years. Women who have been protected and their fetus protected from tetanus constitute about 50% of the total cases of the neonatal cycle, and 18% of women believe that they do not need protection, while 27% of them indicated that they did not receive protection from tetanus.
12. Infertility

The percentage of women with infertility is estimated at 10.3%. Awareness about the reasons for not being able to get pregnant or infertility has increased during the ten years, as 57% of women are currently aware that this is related to their health problems, compared to 31% of women in 2011, while 34% of them are still ignorant of the reason, compared to only 18% in 2021, and 16% of women believe that the reason is related to problems with the husband.

[Chart showing reasons for infertility: Health problem for wife, Late marriage, Health problem for husband, Don’t know, Other]
13. Women Empowerment:
13.1 Economic Empowerment

The percentage of employed among the women 15+ is only 9.2%. Out of whom 10.6% are in Urban areas and 6.3% are in Rural areas. Those who are prepared to work but not getting opportunities are 21% and 7% are prepared with reservations and 72 not at all prepared to work. 37% of women attribute their lack of work to devoting themselves to housework and raising children, and to their unwillingness to work by 22%; while about 12% of them devoted their time to education. The percentage of women who own their own property of residential land, homes, collectibles, etc. is 9.4%, and women’s agricultural holdings are declining and only 1.5%. The proportions of women who have private or joint property converge between geographical divisions, as the proportion of private property for all of Iraq is 9.4%, for the governorates (except for the Kurdistan region) 9% and for the Kurdistan region is 11.5%. Increase her educational level. The use of the electronic bank card in transactions is still limited to less than 10%, especially in the Kurdistan region, where the percentage decreased to less than 1%, and women's ownership of it increases clearly with age, and it generally increases with the increase in educational attainment.

Demand for loans for women is still limited to no more than 0.8% and is mostly related to housing purposes (buying a house, apartment, plot of land, or rehabilitating a house...) where the percentage reaches 69%, while women request loans for debt repayment purposes is 20%, declining Requesting loans to establish a business to 1.1% only.
Women 15-49 Preparedness to work

- 21% Prepared to work
- 7% Prepared with conditions
- 72% Not prepared to work

Women 15+ reasons for unemployment

- Not interested: 22.4%
- Busy with domestic work: 36.5%
- No work available: 11.3%
- Not qualified for work: 6.2%
- Do not have sufficient skills or training: 1.1%
- Wages are little: 0.2%
- Employers do not prefer married women: 0.1%
- Family not allowing: 6.3%
- Studying: 11.9%
- Other: 3.9%

Women joint ownership of assets

- Kurdistan: 11.5
- Other governorates: 9
- Total: 9.4

Women individual ownership of assets

- Kurdistan region: 1.1
- Other governorates: 1.6
- Total: 1.5
13.2 Political Participation

Participation in general elections is an aspect of women's political empowerment. Women expressed their support for 78% of women to run for election, and 86% of her support for participating in the elections as a voter. The characteristics of the environment, age and education did not show a different effect on the opinion of women regarding participation in the elections. The level of women's involvement in civil society organizations and community work is still limited. Indicators of women's participation in civil society organizations, forums or voluntary work reflect a clear decrease in participation rates, with a slight increase with the increase in women's age and the improvement of their educational attainment.
13.3 Women’s believe on their marginalization and discrimination

In all 35% of women indicate that they are marginalized. The ratios converge for the different characteristics, as no significant differences were recorded in the opinion of women regarding their freedom to express or respect their opinion in different fields. Attributing 67% of marginalization cases to society itself, while attributing it to men at 16%, and women believe that laws and policies lead to the marginalization of women by 8%. However, women have strong views about discrimination. The percentage of women who believe that they do not distinguish between males and females is close to sons and daughters in most matters. Except for the aspects related to not allowing the girl to go out on her own, where the percentage of non-discrimination drops to 64%, while almost 90% of them do not discriminate between sons and girls in the aspects of spending on education and daily expenses.

The main reason for discriminating between boys and girls is related to keeping girls at 53%, and to customs and traditions at 39%. About 38% of women believe that they are equal in rights in general, 25% that they are partially equal, and 37% believe that they are not equal in rights with men. Women attribute inequality with men to their conviction that men bear greater responsibility (49%), or that men are the guardians of women (39%).

An indicator of knowledge is the exposure and use of internet. The percentage of Internet usage is still limited to 40%, while 60% of women do not use it. With reference to the increase in the percentage of Internet use with the improvement of women's educational attainment. It starts with 18% for those without a degree to 69% for women with a university degree or higher.
Women 15+ views on Elections

Elections are useless: 34.1%
It concerns men: 26.7%
Women should not interfere in politics: 15.1%
Women do not have chances to win: 14.8%
Society supports men: 9%
Other: 0.4%

Perceived reasons for discrimination between boys and girls:
- To safeguard girls: 39.1%
- Favour boys for economic reasons: 7.6%
- Customs and traditions: 53.1%

Perceived views on equality on rights:
- Yes: 37.9%
- Yes, Partially: 37.4%
- No: 24.7%

Perceived reasons for inequality:
- Men are superior to women: 18.4%
- Men have greater responsibilities: 19.4%
- Laws do not favour women: 27.7%
- Wrong interpretation of religion: 0.3%
- Culture: 12.1%
- Other: 22.1%
14.0 Violence against women

Women's reactions to being subjected to violence by their husbands vary, 52% of the women remain silent and do not inform anyone, and 57% ignore the husband and refuse to talk to him, while they talk to his parents about this at a rate of 23%. Economic violence is the most common form of violence practiced by the husband towards his wife, followed by verbal violence 12%. Other types of violence are much less than that, such as physical violence 5.7% and sexual violence 2.1%, and 29.5% of women in general are exposed to all forms of violence.

Jealousy is one of the most important forms of violence practiced by Household members (except for the husband), followed by interference in choosing clothes, limiting contact with others and preventing expression of opinion. There are other violent practices in many forms, but their rates are less than 0.97%, such as smashing women's things, or slapping in the face. Jealousy is the dominant pattern in the nature of violence practiced by the husband towards the wife, 63%; Reducing contact with others comes second with a rate of 35%, followed by intervention in choosing clothes by 32%.

Women's reactions to being subjected to violence by their husbands vary; 52% of the women remain silent and do not inform anyone, and 57% ignore the husband and refuse to talk to him, while they talk to his parents about this at a rate of 23%. The social aspects and considerations of the practice of violence constitute the main reason from the point of view of women, as 52% of women believe that this is related to education and Household upbringing or the social system by 40%, in addition to the weak awareness of men. On the other hand, a percentage of women blame the women themselves for the causes of violence on aspects of women's lack of awareness or acceptance of reality.
Patterns of violence against women by Family

Patterns of violence by Husband

Jealousy

Interference in dress code

Stop her communication with others

Debar from expression of opinion

Refuse to inform about family income

Jealousy

Interference in dress code

Stop her communication with others

Debar from expression of opinion

Refuse to inform about family income

Jealousy
Behaviour of wife towards violence by Husband

Types of violence

Verbal violence: 12.1%
Economic violence: 22%
Physical violence: 5.7%
Sexual violence: 2.1%
General violence: 29.5%
15.0 Conclusion

This summary report presents a simple presentation of key findings covering all aspects of areas covered by the survey. Visual presentations are provided with simple comments to show case various data elements and their manifestations, highlighting significant trends and comparisons between the previous survey conducted in 2011 and the current survey carried out in 2021. The survey tools and procedures were certainly improved and use of technology was also a major shift in data collection, processing and analysis.