

# Iraq

September 2020

**98,153**

IDP and refugee families (**556,028 individuals**) have received COVID-19 cash assistance since April

**69,078**

Refugee and IDP women and girls have received sanitary kits since April

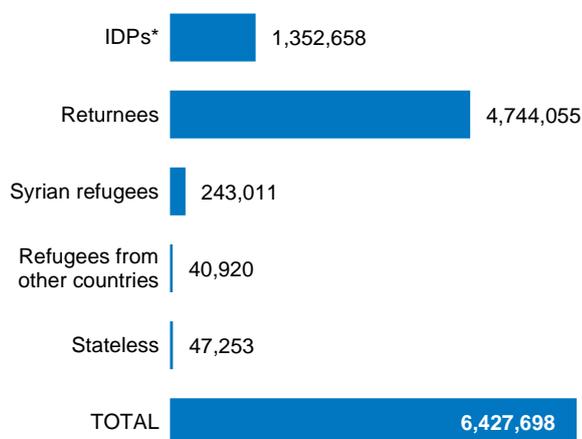
**4,168**

IDPs and refugees received remote legal assistance in August

**+375,000**

Persons of concern have benefitted from COVID-19 awareness raising since April

## POPULATION OF CONCERN

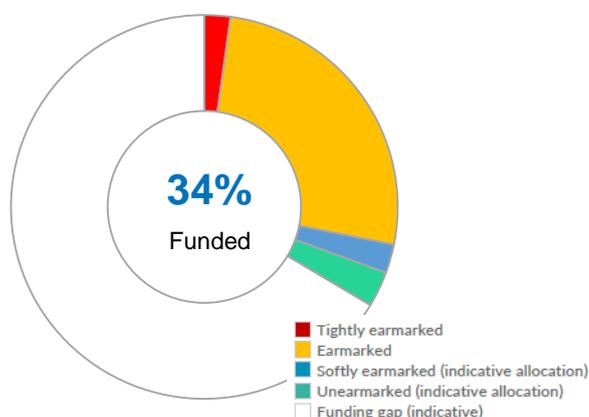


\* Internally displaced persons (IDPs) since 2014, as of 31 August 2020, in accordance with IOM Displacement Tracking Matrix (DTM)

## FUNDING (AS OF 8 SEPTEMBER 2020)

**USD 538.6 M**

requested for the Iraq operation for 2020



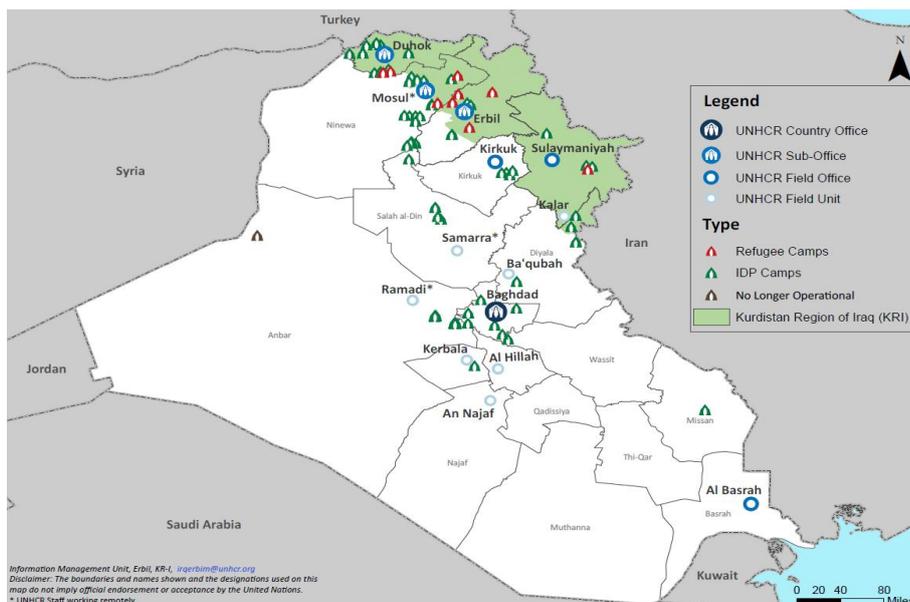
## UNHCR PRESENCE

### Staff:

- 367 National Staff
- 101 International Staff

### Offices:

- 7 Offices located in Baghdad, Basrah, Duhok, Erbil, Kirkuk, Mosul and Sulaymaniyah
- Field presence in Hilla (Babylon), Ba'quba (Diyala), Kerbala (Kerbala), Ramadi, Fallujah, Qaim (Anbar), Najaf (Najaf), Tikrit (Salah al-Din), and Khanaqin (Diyala) based in Kalar (Sulaymaniyah)



UNHCR produces regular updates on its response in Iraq, which can be found at [UNHCR Global Focus](#)

## Working with Partners

- Through the Regional Refugee and Resilience Plan (3RP), UNHCR leads the humanitarian response for Syrian refugees in Iraq in close coordination with humanitarian actors and government authorities to protect and assist refugees and asylum-seekers, and to prevent statelessness. Under the 3RP, UNHCR leads the Protection, Shelter, and Basic Needs sectors, and co-leads Health with WHO and WASH with UNICEF.
- UNHCR is engaged in the inter-agency response to internal displacement and returns. UNHCR is leading the Protection, Camp Coordination and Camp Management (CCCM), and Shelter/Non-Food Items (also known as core relief items or CRIs) clusters, as part of the cluster coordination mechanism for the IDP response. UNHCR also co-leads with UNFPA and WFP the UN Sustainable Development Cooperation Framework (UNSDCF 2020-2024) Priority Working Group “Achieving Social Cohesion, Protection, and Inclusion”, and supports the National Social Protection Forum chaired by the Ministry of Planning and co-chaired by the World Bank.

## Main Activities

### Protection

- **Refugees** – UNHCR coordinates with the government, UN agencies, and local and international partners the response for all refugees in Iraq, including activities related to: registration; protection monitoring and advocacy; legal aid; psychosocial support; child protection; prevention, risk mitigation and response to sexual and gender-based violence (SGBV) and sexual exploitation and abuse (SEA); and resettlement to third countries which is pursued for a small number of refugees with acute vulnerabilities.
- **IDPs** – Direct interventions are undertaken with local, regional, and national authorities to ensure that the displaced can access safety in camps and non-camp locations. Protection monitoring teams have been deployed to identify protection and assistance needs, which directly inform protection responses, including: provision of legal assistance on a range of issues such as missing civil documentation; prevention, risk mitigation, and response to SGBV and SEA; child protection; the reunification of separated families; and the coordination of IDP protection responses with the government, NGOs and other UN agencies.
- **Returnees** – Durable solutions, including voluntary, safe, and dignified return, are a strategic priority for UNHCR and the humanitarian community in Iraq. UNHCR monitors the return of displaced persons to their areas of origin and advocates with authorities when there are incidents of barred returns, risks of forced returns to areas that are unsafe due to contamination of explosive remnants of war (ERW) and improvised explosive devices (IED), presence of militias, widespread destruction of property, and absence of critical infrastructure and basic services.

### Camp Coordination and Camp Management

- As the CCCM Cluster and 3RP lead, UNHCR works with local authorities and humanitarian actors to provide coordinated services to IDP and refugee camps. In camps, this translates to ensuring adequate shelter, delivery of food and water, presence of education and health facilities, as well as capacity building for camp management actors and service providers. Partners' mobile teams provide CCCM services to camps and informal settlements throughout Iraq. UNHCR, alongside other humanitarian partners, are advising on a government-led process for the consolidation of camps in line with the Principled Returns Framework. As of September 2020, over 261,000 IDPs are hosted in 43 camps across Iraq, and around 100,000 Syrian refugees reside in ten camps throughout the Kurdistan Region of Iraq (KR-I). Currently, 99 per cent of Syrian refugees live in KR-I, out of whom 41 per cent reside in camps and the remainder in urban, peri-urban, and rural areas.

### Shelter and NFIs

- UNHCR provides shelter assistance, core relief items, and coordinates with humanitarian actors to complement the work of local authorities to improve living conditions of IDPs and refugees in camp and non-camp settings throughout Iraq. This includes the distribution of tents, blankets, mattresses, kitchen sets and sanitary kits.

### Basic Needs

- UNHCR assists vulnerable displaced and refugee families to cover their most basic needs through the distribution of cash assistance. In areas where markets are functioning and accessible to beneficiaries, unconditional cash provides an efficient way to meet the needs of those affected by displacement, allowing families to prioritize their own needs while upholding their dignity and making them less likely to resort to harmful coping strategies.

## COVID-19 in Iraq

As of 15 September, the Iraqi Ministry of Health has confirmed 298,702 COVID-19 cases throughout the country, including 8,166 fatalities. The majority of cases have been detected in central and southern governorates, with Baghdad accounting for more than 30 per cent of the cases followed by Basrah, Kerbala and Wassit. Meanwhile, the Government of Iraq (GoI) and the Kurdistan Regional Government (KRG) have conducted 1.9 million tests.

Since the beginning of the outbreak, the GoI and the KRG established a series of measures to prevent the spread of the virus, including strict curfew measures, closure of border crossing points, suspension of international flights, and disinfection campaigns, among others. However, during the past month, most of these actions have been gradually eased. While UNHCR, NGOs, and other entities delivering humanitarian assistance continue to be excluded from strict movement restrictions, the capacity to deliver support has been slightly affected, and the overall impact on the protection environment of refugees, IDPs, returnees, and stateless persons has been significant.

According to UNHCR's feedback and complaint mechanisms, and ongoing remote protection monitoring, the main concern raised by refugees, IDPs, returnees, and persons at risk of statelessness across Iraq is the inability to access livelihood opportunities as a result of current and previous movement restrictions. Most individuals affected by displacement were living on daily wages, and the movement restrictions have significantly affected their ability to make ends meet. This has translated into an increase in the number of individuals resorting to negative coping mechanisms. Challenges to reach persons of concern in certain locations, psychological trauma, stress and anxiety, halt of education activities, and the rise of domestic violence, among others, have also been raised widely as a direct concern.

### UNHCR Response to the COVID-19 outbreak in Iraq

Through regular contact with authorities at the federal, regional and governorate level, UNHCR has ensured that all PoCs are included in national COVID-19 response plans. This guarantees that any vulnerable displaced individual will receive assistance in case of contracting the virus. However, as the number of cases continue to grow, health facilities across Iraq are facing increasing pressure to serve all affected individuals, and at the beginning of August, most Directorates of Health (DoH) already indicated that only moderate, severe, and critical cases would be accepted for hospitalisation.

Most basic services continue to function (albeit at limited capacity) in camps and areas with a high density of displaced populations. UNHCR has adopted new distribution modalities to ensure assistance continues to be delivered. The new modalities include door-to-door assistance to avoid mass gatherings and respect physical distancing, and remote protection monitoring, legal counseling, and psychosocial support, among others. In addition UNHCR is implementing the following series of measures across the country to respond to the virus outbreak:

- **Access to basic hygiene items:** UNHCR is currently providing IDP and refugee families in camps and in urban, peri-urban, and rural areas with cash assistance of IQD 240,000 (USD 200) so they can afford basic hygiene items. As of 12 September, UNHCR has provided cash support to 98,153 refugee and IDP families throughout Iraq, along with 69,078 sanitary kits for women and girls.
- **Health awareness:** UNHCR is conducting ongoing health awareness-raising sessions on transmission and prevention of COVID-19 in refugee and IDP camps, as well as in registration centres and some urban areas. Posters and leaflets are distributed through camp management, PHCCs, and community outreach volunteers;
- **Provision of medical Protective Personnel Equipment (PPE):** UNHCR is procuring medical PPE, masks with filters, and disposable shoes to use at borders and in refugee camps. Should funds permit, UNHCR will procure other protective equipment such as surgical masks, gloves, and disposable medical gowns for daily use by medical staff at Primary Health Care Centres in refugee camps and other sanitary items to public health institutions.
- **Provision of additional specialized medical equipment:** based on consultations with health authorities, as well as other agencies in the country, UNHCR is providing material support as needed to ensure public health facilities have the capacity to provide appropriate care and case management of suspected COVID-19 cases on PoCs.

**UNHCR in Iraq is urgently appealing for US\$35.7 million to scale-up its activities in response to the COVID-19 outbreak**, as reflected in the UN Global Humanitarian Response Plan. Since the launch of the UNHCR Global COVID-19 Emergency Appeal, UNHCR Iraq has received generous contributions of US\$ 6.5 million from the **United States of America**, US\$1.5 million from **Japan**, US\$1.1 million from the **European Union**, and US\$ 135,000 from **Badr Jafar**. UNHCR is immensely grateful for this swift support to cover the most immediate health, protection, and basic needs of vulnerable displaced families in Iraq.

At this critical time, humanitarian action to save lives and alleviate the suffering of vulnerable populations remains imperative. UNHCR further appeals to donors not to deprioritize funding for regular programmes and thanks major donors of un-earmarked and broadly earmarked funds as well as donors who have contributed directly to Iraq operation in 2020 (as of 8 September)

**Belgium | Canada | Czechia | Denmark | Eid Charity | European Union | Finland | France | Germany | Ireland | Italy | Japan | Kuwait | Luxembourg | Netherlands | Norway | Other Private Donors | Qatar | Spain | Sweden | Switzerland | United Kingdom | United States of America**

**Baghdad:** Marwa Hashem, Reporting Officer, [hashemma@unhcr.org](mailto:hashemma@unhcr.org) Alejandro Staller, Associate Reporting Officer, [staller@unhcr.org](mailto:staller@unhcr.org)

**Erbil:** Yanet Bahena, External Relations Officer, [bahena@unhcr.org](mailto:bahena@unhcr.org)