



I. Operational Updates

A. THE EXPANDED HUMANITARIAN RESPONSE FUND (ERF)

Project and Financial Status:

As of December 31, a total of 24 project proposals have been submitted to the ERF since August 2007, with a total value of \$4,614,157. Nine project proposals have been submitted by international NGOs and fifteen by Iraqi NGOs. Nine projects have been approved, while 12 projects are currently under consideration. Three projects have been rejected by the Technical Review Committee (TRC). A total of \$2,162,442 has been donated to the ERF, of which \$1,848,660 has been committed, leaving the ERF with a balance of \$313,781 on hand. With twelve projects in the pipeline, totalling a present requirement of \$2,072,389, further contributions to the ERF are urgently required.

Current partners of the ERF include Mercy Corps, Islamic Relief Worldwide, Terre des Hommes, Iraqi Relief Organisation, Iraqi Youth League, Todya Organization, Mamoura Humanitarian Establishment, New Iraqi Woman Organization and Relief International.

Status of ERF Projects:

24 projects submitted between August and December 2007

3	12	9
Rejected	Under review	Approved
	\$2,072,389	\$1,848,660

Contributions to the ERF - \$2,162,442

Sweden (SIDA): \$439,097

Canada (CIDA): \$474,023

Norway: \$511,858

Ireland: \$737,463

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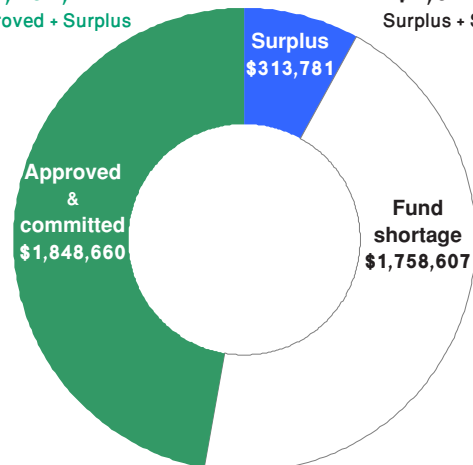
Case Study: Um Khashim



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Contribution to the ERF
\$2,162,442
Approved + Surplus

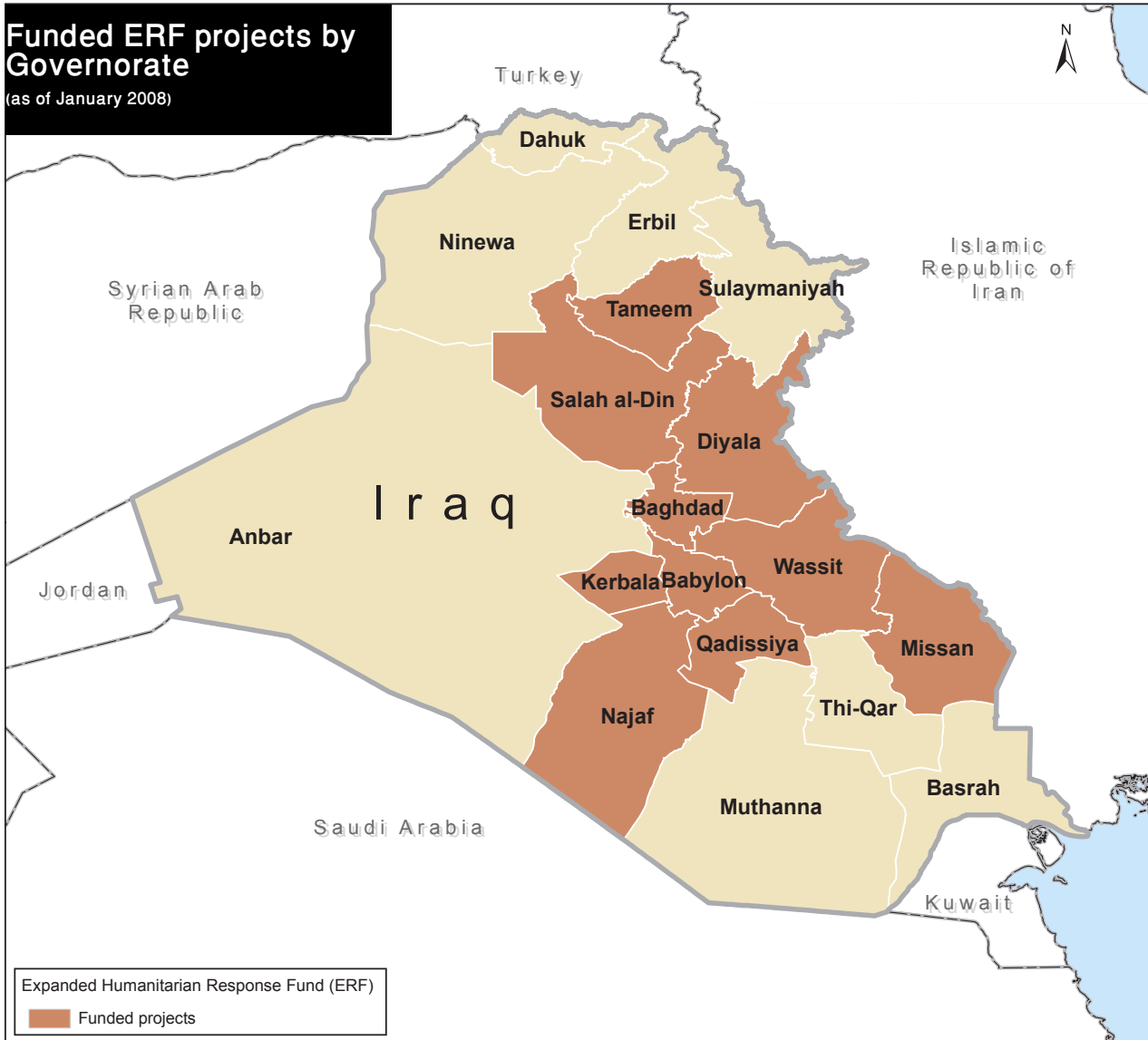
Projects Under review
\$2,072,389
Surplus + Shortage





Funded ERF projects by Governorate

(as of January 2008)



Expanded Humanitarian Response Fund (ERF)
 Funded projects



United Nations Office for the Coordination of Humanitarian Affairs

Created by OCHA, January 2008

NB: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

TABLE1: PROJECTS FUNDED BY THE ERF

NO.	GOVERNORATE	SECTOR / ACTIVITIES	BENEFICIARIES (APPROX.)
1	Baghdad	Food and Shelter / Food and NFI Distribution	300 families
2	Diyala, Tameem (Kirkuk) and Salah al-Din	Shelter / NFI Distribution	1,420 families
3	Baghdad	Food / Food Distribution	1,500 families
4	Qadissiya	Food and Shelter / Food and NFI Distribution	1,540 families
5	Kerbala and Diyala	Food and Shelter / Food and NFI Distribution	1,500 families
6	Babylon	NFI Distribution	1,500 orphans
7	Kerbala, Missan, Wassit	WATSAN / Shelter	1,420 families
8	Baghdad	Food / Food Distribution	1,000 families
9	Najaf	Food and Shelter / Food and NFI Distribution	1,000 families

B. THE NGO MICRO GRANT

As of December 31, a total of 45 projects have been funded under the NGO Micro Grant for a total of \$1,935,415. Six project proposals have been submitted by international NGOs and 26 by Iraqi NGOs. These 45 projects have provided food, non-food (NFI) items and medical assistance to more than 88,000 families across 15 governorates. Currently, with a total of \$50,000 available in the NGO Micro Grant, two proposals were submitted. One has been approved and the other is still under review. The approved project, in the Food NFI Distribution sector, will target Tameem (Kirkuk) Governorate and benefit 1,352 families. With 23 projects in the pipeline, totaling a present requirement of \$1 million, further contributions are urgently required.

The current partner of the NGO Micro Grant is the Iraqi Institute for Development. While the ERF aims to support larger humanitarian interventions; the NGO Micro Grant, with a limit of \$50,000 per grant, supports smaller scale projects. The NGO Micro Grant has proven to be a successful tool for punctual and responsive humanitarian interventions, capacity building of national NGOs and expanding partnership and operational space, particularly with national NGOs inside Iraq.



Babylon widows, by New Iraqi Women Organization

FACTS ABOUT THE ERF

- The ERF provides quickly-disbursed funds for national and international organisations to undertake urgent humanitarian activities in Iraq to alleviate suffering of the civilian population. The ERF is not intended to respond to chronic social problems, reconstruction or other long-term development needs.
- The ERF will seek replenishment with fresh contributions on a rolling basis. The Fund will grant a maximum of \$400,000 and a minimum of \$25,000 per project.
- Contributions to the ERF will be treated as un-earmarked and pooled, i.e. they lose their donor identification.
- A Technical Review Committee (TRC) is an integral part of the ERF comprising of UN/IOM and NGO representatives.
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(For further details, please see the ERF Charter, which can be obtained from OCHA Iraq office in Amman.)

HOW TO APPLY FOR THE ERF:

Prior to submission of a project proposal the applicant organization must revise the selection process (refer to article 10 / page 6) of the guidelines to ensure that the mandatory criteria has been met, in order to be eligible for ERF funds, organizations need to provide relevant required documents.

It is also advisable for the applicant organization to seek comments from UN agencies, according to their mandate on each proposal. As per OCHA's guiding process, selection and approval of project proposals will take around 23 working days. However, in order not to prolong the procedure, applicants are strongly advised to make sure the proposal is submitted complete with all background information, to avoid delays in the approval process.

Project objectives should focus on contributing towards addressing the humanitarian priorities of Iraq's under-served areas and vulnerable groups.

D. HUMANITARIAN OVERVIEW

IDPs & RETURNEES:

The Iraq displacement crisis continues to cause grave concern, as the number of registered IDPs has risen to an estimated 2.4 million people as of mid-November 2007¹. Approximately 155,000 more IDPs have been registered in Iraq. This increase in the number of recorded IDPs is attributed to improved registration of already displaced persons, and the entry of previously registered IDPs into the central MoDM database, as well as new displacements reported by implementing partners inside Iraq. Of the registered IDPs, 1.19 million were displaced or transferred after the bombing of the Al Askari shrine in Samara in February 2006 (UNHCR)¹.

Whilst small-scale returns, mostly to Baghdad, have begun from Syria and places of displacement inside Iraq, it remains difficult to verify the extent to which initial movements have been safe, dignified and voluntary. In view of the absence of general baseline data, including the lack of sufficient monitoring and reporting, it is difficult to determine the exact scope and sustainability of these return movements. As such, the UN does not encourage or promote return under current circumstances.

It is also difficult to ascertain the exact number of Iraqi refugees returning from Syria. Assistance to refugees spontaneously returning will be in the form of a Rapid Response Plan of \$11 million, launched in December 2007, and targeting 5,000 families. According to MoDM, 3,461 IDP families returned to Baghdad between February and November 2007, and another 6,000 IDP families are undergoing the registration process (UNHCR and IOM).

Over 1,800 people (300 families) were displaced from border villages in Sulaymaniyah and Erbil due to the shelling of the Iraq-Turkey border areas by the Turkish Military. In addition, some families have been relocating to second homes or relatives in the city. On the request of the KRG, UNHCR and partners have distributed relief items to displaced populations but urgent help is still needed.

HEALTH – CHOLERA OUTBREAK:

By the end of December 2007, no new cholera cases were being reported from Baghdad or from Iraq's other governorates. 98 percent of Iraq's cholera cases, since the start of the outbreak in mid-August 2007, were reported from Erbil, Sulaymaniyah and Tameem (Kirkuk) in northern Iraq. After a gradual decrease of cholera cases in these three affected governorates, cholera's transmission intensity was steeply increasing in Baghdad, in mid-November 2007, where the majority of new laboratory confirmed cases of cholera

were being reported. The cumulative number of laboratory confirmed cases in Baghdad is 1392.

As of December 30, 2007, 46 districts, 28 in northern Iraq and 18 in the centre and south, have reported laboratory confirmed cases of cholera. As of December 30, 4,697 persons have reportedly been infected by the disease and 24 people have died². Iraq remains at risk of the further spread of cholera to previously unaffected areas, as demonstrated by outbreaks in Baghdad, Wassit and Anbar Governorates.



Drinking water source in Baghdad

Humanitarian Crisis in Iraq

BASIC FACTS & FIGURES

- It is estimated that over 2.4 million people are currently displaced inside Iraq as of mid-November 2007. Of these, 1.2 million were displaced after February 2006.
- Four million people in Iraq, corresponding to 15 percent of the population, are considered food insecure. As for IDPs, access to food is a priority need for almost 71 percent of them.
- Access to shelter is considered a priority need by over 72 percent of Iraqi IDPs.
- Access to education is considered a priority need by almost six percent of IDPs surveyed.
- Only one in three Iraqi children under the age of five has access to safe drinking water.
- Among children under five, 25.9 percent suffer from stunting and nine percent suffer from wasting. 15.7 percent are considered underweight.
- The under-five mortality rate is currently estimated at 41 per 1000 live births. Diarrhoea and acute respiratory infections account for about two out of three under-five deaths, with malnutrition a major contributing factor.

(Sources: UNICEF, WFP, UNHCR, IOM, 2006 Multiple Indicator Cluster Survey.)

C. HUMANITARIAN PRIORITIES FOR THE ERF

A large number of internally displaced people (IDPs) continue to depend on humanitarian assistance to sustain their daily lives.

With the continued rise in internal displacement and the severe access restrictions in most parts of Iraq, the need for shelter, employment, access to clean water, food, health and proper sanitation remain the common requirements of the Iraqi IDPs.

According to IOM assessment³, access to food remains the highest priority for IDPs in Diyala, Kirkuk and Najaf while the IDP population in Erbil, Najaf and Basra identifies shelter as their top priority. Around 150,000 Iraqi IDPs live in group settlement in tented camps, public buildings, mud and reed houses and former military camps

Insufficient sanitation structures in some areas are causing serious health hazards; access to clean water and sanitation remains a concern, especially in Anbar, Wassit and Missan. Access to health services is a priority need in Muthana, Babylon and Wassit.

Women and children often experience unique challenges during displacement, since they may require specialized types of health care and may be impacted differently by culture customs in the place of displacement. Many families are displaced after the head of the household is killed, leaving a traumatized widow to care for her children in a new, alien environment. These groups are considered the most vulnerable populations in need of help.

In the coming month, the World Food Program (WFP) will be starting its emergency food distribution programme – a 12-month operation that will provide 50 percent of the recommended daily energy requirements – to 750,000 IDPs across Iraq.

It is then anticipated that the food needs among this population group (including host communities) would be adequately addressed by WFP and other humanitarian actors (e.g. ICRC, IOM and NGOs)⁴. In the food sector, funds from the ERF will therefore mainly support proposals that target vulnerable groups among the non-IDP populations.

In Next Month's Issue of the ERF Bulletin:

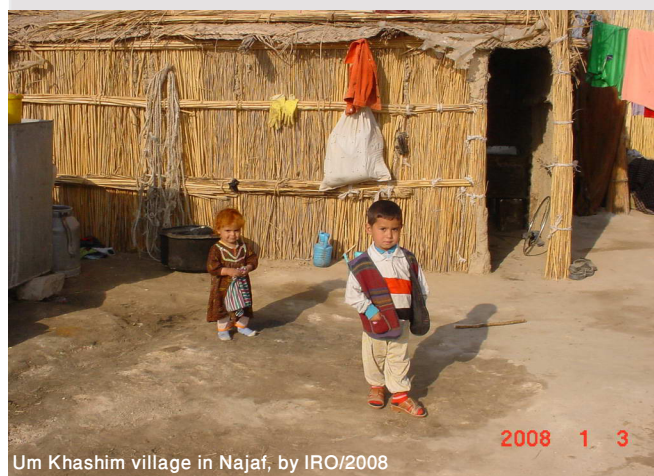
- 1- The ERF in Context to the CAP
- 2- NGO Training
- 3- Project Impact To Date

Case Study: Um Khashim

The civilian population in Iraq is currently facing one of the most complex and violent situations in the world. The humanitarian situation affects not only internally displaced persons (IDPs), but also other vulnerable groups like host communities, people living in areas where access and freedom of movement is limited and people who continue to live amidst the ongoing violence and security.

The vulnerable population of Um Khashim village, which lies 29 km south of Najaf, is an example. Um Khashim is inhabited by 200 families, who have been settled there since 1994 and who had come from the marshes of southern Iraq. After their marshlands were dried by the former regime, the families are now living in cottages made of canes and mud and are threatened to be removed. This vulnerable population suffers from lack of shelter, clean water, electrical network and hygiene.

This population mostly drinks from a nearby river, use kerosene for lighting, heating and cooking. They suffer from an accumulation of dirt and cattle garbage, which causes many diseases, due to a lack in hygiene and medical treatment.



Um Khashim village in Najaf, by IRO/2008

Endnote

- 1 Cluster F Report, update of November 21, 2007
- 2 WHO Situation Report on Cholera in Iraq, Sitrep #43, week 52, December 30, 2007
- 3 IOM's Iraq IDP Governorate Profiles, December 2007
- 4 UNHCR is involved in emergency food distribution for refugees only inside Iraq (e.g. Palestinians).

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