

HIGHLIGHTS

- Preparing for COVID-19 in IDP camps
- New NGO Access Support Unit created
- Liquidity crisis for cash programming
- WFP tackles food insecurity during curfews



Heevie NGO responds to COVID-19 in Kabarto 2 IDP camp in Duhok. [Photo Credit: Heevie NGO]

CONCERNS ABOUT COVID-19 QUARANTINE FOR SECURITY FORCES ON ROTATION IN NINEWA

A government campaign in late 2019 to recruit security personnel saw a number of internally displaced persons (IDPs) gaining employment with the Iraqi Security Forces (ISF) and as police officers. ISF and police forces frequently deploy on rotation within or across governorates, and after deployment IDPs normally return to their camp of residence during breaks. With the arrival of COVID-19 in Iraq in February, safeguarding the health and well-being of IDPs, particularly those in crowded camps, became a priority. Directives have been issued by health authorities and camp managers which instruct any camp resident to quarantine for 14 days in specially equipped isolation areas prior to mixing with other residents.

Security personnel are among the few exemptions to strict nationwide curfews, and this, together with close living quarters of personnel, increases the risk of COVID-19 transmission. Despite the high level of COVID-19 awareness-raising conducted among IDPs, during April there were several reported incidents of security personnel re-entering the camps through informal entry points, such as breaks in fences, in order to evade quarantine and avoid separation from their families. Humanitarian actors have had difficulties enforcing the prescribed isolation measures.

There are still no confirmed cases of COVID-19 in IDP camps, but such conduct presents an unreasonable risk to the health and wellbeing of IDPs. Mitigating this risk requires coordination between government authorities, health actors, and security and military personnel. Humanitarian partners have raised the health and protection concerns with senior ISF officials in Ninewa, with the Governor of Ninewa and the Ministry of Migration and Displacement, requesting suspension of the deployment of IDPs living in the camps during the COVID-19 outbreak. The Governor of Ninewa has supported the quarantining of all military personnel returning to the governorate.

Towards the end of April, most IDP camps in Ninewa were strictly enforcing the quarantine rules, preventing admission of anyone who failed to quarantine, and establishing designated quarantine areas. Challenges remain in certain camps where upgrades to perimeter fencing and additional sensitization of residents are ongoing.

NEW NGO ACCESS SUPPORT UNIT CREATED

Since November 2019, NGOs have found access to affected populations and project sites to be highly constrained. Humanitarian NGOs in Iraq require access letters to allow them passage through the multiple security checkpoints which are present in areas where they operate. By the end of 2019, all access authorization letters had expired, as the previous system for granting monthly letters to NGOs—which had been in place for many years—was no longer endorsed by the Government of Iraq, and alternative modalities had to be found. In the interim period, there has been a proliferation of access authorizations required at the local level, which has led to an unpredictable and unreliable approvals system, where access could not be assured, and where project activities could often not be fulfilled.

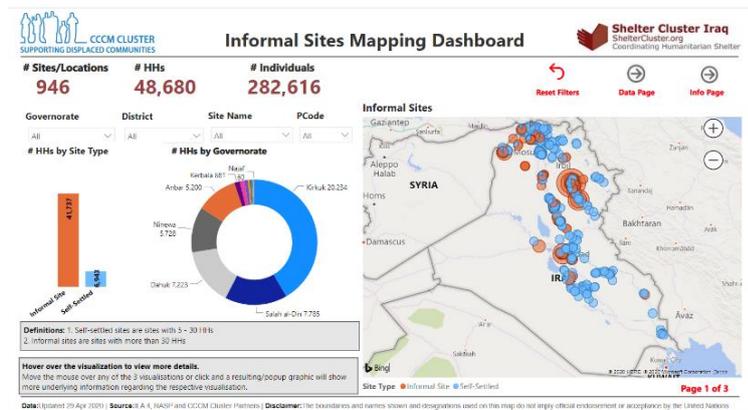


Checkpoint in Anbar Governorate
[Photo Credit: H. Stauffer/OCHA]

The Humanitarian Coordinator, OCHA and NGO Coordination Committee for Iraq (NCCI) have been working since early 2020 with both the central government in Baghdad and governorate authorities to establish a predictable, transparent, timely and fair access authorization system. To support the fulfillment of access requests with the National Operations Centre (NOC), NCCI has established a temporary access support unit to validate NGO access letter applications before OCHA periodically submits them to the NOC, thereby reducing delays caused by administrative errors. COVID-19 movement restrictions have added an additional layer of access constraints for NGOs already affected by bureaucratic access issues. There are 1.5 million Iraqis in need of humanitarian assistance who live in districts with medium or high severity of access constraints.

MAPPING INFORMAL DISPLACEMENT

More than two years since the end of the armed conflict against ISIL, 1.4 million Iraqis remain internally displaced. Although meeting the needs of IDPs in camp settings has been the priority in recent years, the focus of humanitarian partners is increasingly shifting from camps to out-of-camp displacement sites, as the population of out-of-camp IDPs continues to grow. During late 2019, at the behest of the Government of Iraq, there was a rapid consolidation and closure of IDP camps, particularly in Ninewa. During that period, many IDPs left camps fearing security screening and/or involuntary relocation, often becoming secondarily displaced in out-of-camp settings due to an inability to successfully return to their areas of origin.



The Camp Coordination and Camp Management (CCCM) Cluster and the Shelter and Non-Food Items (S/NFI) Cluster have launched an [Informal Sites Mapping Dashboard](#) to consolidate and present key data relating to non-camp displacement. At the end of April, while there were 277,177 IDPs living in 67 camps, there were 280,348 IDPs living in 938 informal sites, some with as few as five households self-settling. These include abandoned, war-damaged or unfinished buildings, farms, streets, mosques, schools and offices. Providing humanitarian assistance and protection services in informal sites across a vast geographic area can be more challenging than servicing camps, where populations are more cohesive and where access and security are more assured.

Informal sites are locations with no camp management appointed or recognized by the government. Due to the often highly insecure and volatile living conditions of IDPs in these locations, with ever-present threat of eviction, unaffordable rents and explosive ordnance, partners are focusing on how to effectively support the most vulnerable among these IDPs and ensure humanitarian needs are met. The CCCM and S/NFI Dashboard supports partners by providing timely and integrated assessment data for these sites.

COVID-19 HEALTH SCENARIO PLANNING IN IDP CAMPS

The Health Cluster, with support from the S/NFI Cluster, has developed a scenario and contingency plan to prepare IDP camps for various health context that might be realized during the COVID-19 pandemic. [The COVID-19 Outbreak Preparedness and Response Operations in IDP Camps](#) document outlines preparedness measures to be put in place by humanitarians to respond to potential confirmed mild/moderate cases of COVID-19 in IDP camps, should the Ministry of Health's ability to manage cases in hospitals be overwhelmed due to a rising caseload. It is intended to provide guidance to partners in the field so that they are able to quarantine/isolate confirmed cases within the premises of camps, utilizing available resources in the most efficient manner.

The plan takes into account the capacity of the public health system to respond to the broader community's COVID-19 needs and the possibility that onsite COVID-19 treatment might be required if local primary health care centres and hospitals are overwhelmed with patients. IDP camps are being prepared for these scenarios, including the identification of quarantine and isolation locations, triage, contact tracing, procurement and storage of PPE, training of staff, and onsite case management of mild, moderate and severe cases among IDPs.

COVID-19 AFFECTS ACCESS TO CASH

During April, the impact of COVID-19 and the associated curfews and movement restrictions posed a difficulty for NGOs and some UN agencies in accessing cash and distributing cash-based assistance.

Cash transfer programming is widely used in Iraq, including for food, protection, livelihoods, winterization and the purchase of health and hygiene items to prevent COVID-19 transmission. Access to functioning markets is generally assured for those who receive cash as opposed to in-kind assistance, and cash is often distributed through mobile money transfer (MMT) provided by third-party telecommunications providers. During April, as government-imposed curfews restricted the movement of most people in Iraq, cash distributions were delayed as third-party providers were not granted exemptions to the movement restrictions, and were subsequently unable to access camps and other distribution locations. In parallel, IDPs were also heavily constrained in their ability to physically visit markets, and prices of available items were increasing due to closed borders and the impact on trade with Turkey and Iran, which are major exporters to Iraq.

With banks and money markets closed, it was reported that some IDPs resorted to engaging unauthorized vendors to enable the cash-out process, who charged them a significant commission to access their money. In parallel, bank closures and movement restrictions also affected several NGOs who were unable to access their accounts to implement projects or pay staff. Some humanitarian activities were suspended by NGOs that were affected by the interruptions to their cash flow.

RESPONDING TO FOOD SECURITY NEEDS DURING COVID-19

Globally, COVID-19 is more than a public health crisis; in Iraq the restrictions that have been imposed in order to safeguard people's health have had economic consequences causing financial hardship for many families. With access to employment severely curtailed, the World Food Programme (WFP) has expanded its target population of people identified as most at risk of food insecurity. This includes an additional 10,000 IDPs and 35,000 refugees to whom WFP will provide food assistance.

Due to the disruption in banking and difficulties in accessing cash and markets, there were delays in WFP's Financial Service Providers (FSPs) accessing camps (see above). Through WFP and its partners' engagement with authorities, access to camps for FSPs and their agents improved in all governorates from the third week of April.

WFP is also working with food markets in the camps to accept cashless MMT transactions by phone. These interventions will reduce the need for physical cash for food purchases, as cash payments can be a COVID-19 transmission route. Special precautions during distributions have included maintaining safe distances as people redeem their entitlements, using masks and hand sanitizer, disinfecting frequently used items and washing hands regularly.

WFP, the Food and Agriculture Organization and the World Bank are undertaking an ongoing joint assessment on the impact of COVID-19 on the food security of vulnerable people, both in and out of camps, including food prices. WFP publishes monthly reports on market prices and is monitoring changes in market prices to ascertain whether the cash transfer value need to be adjusted. Meanwhile, as access to markets remains uncertain for Iraqis, WFP is preparing to restore one month of in-kind food distribution if the situation requires it. Emergency livelihoods projects are also being planned in order to help affected people to earn an income again, as soon as it is safe to do so.



Cash-for-food distribution in Anbar
[Photo Credit: WFP/Photo Library]

2020 Humanitarian Funding Overview



US\$429.7M
HRP UNMET REQUIREMENTS
as of 4 May 2020

US\$161.6M
TOTAL FUNDING RECEIVED
as of 4 May 2020



The total funding received represents the overall funding linked to the requirements of the response plans/appeals; the HRP funding is a subset of overall funding to the affected country.

US\$519.8M
FUNDING REQUIREMENTS

US\$90.1M¹
FUNDING RECEIVED

82.7%
FUNDING GAP

US\$90.1M
FUNDING THROUGH 2020 HRP

US\$71.5M
FUNDING OUTSIDE 2020 HRP

BY CLUSTER (US\$)

Cluster	Funding received \$	Covered within HRP	Requirements \$
		Received (blue) / Gap (yellow)	
CCCM	0M	Received: 0M, Gap: 23.96M	23.96M
CP	0.7M	Received: 0.7M, Gap: 38.18M	38.88M
Education	5.4M	Received: 5.4M, Gap: 23.37M	28.37M
EL	0M	Received: 0M, Gap: 15.67M	15.67M
FSC	13.0M	Received: 13.0M, Gap: 52.26M	65.26M
GBV	0.2M	Received: 0.2M, Gap: 29.31M	29.51M
Health	8.7M	Received: 8.7M, Gap: 51.41M	60.31M
Protection	2.5M	Received: 2.5M, Gap: 80.25M	82.75M
Shelter/NFI	0M	Received: 0M, Gap: 43.18M	43.18M
WASH	4.0M	Received: 4.0M, Gap: 39.76M	43.76M
CCS	2.9M	Received: 2.9M, Gap: 12.1M	15.0M
MPCA	3.5M	Received: 3.5M, Gap: 70.16M	73.16M
Not specified	46.9M	Received: 46.9M, Gap: 0M	0M
Multiple clusters	2.4M	Received: 2.4M, Gap: 0M	0M

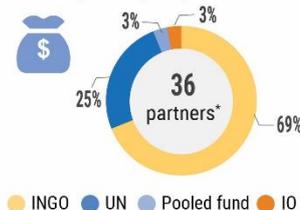
BY STRATEGIC OBJECTIVES (SO)



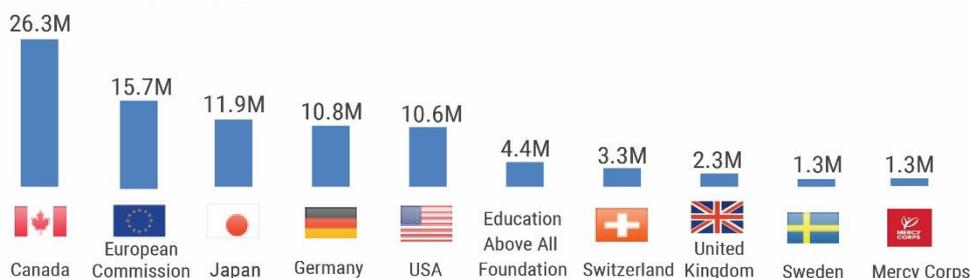
BREAKDOWN OF CASH FUNDING REQUESTS BY CLUSTER



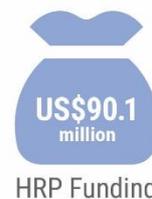
HRP FUNDING RECEIVED



BY DONOR (US\$) (TOP TEN DONORS)



*Partners reported on FTS. Numbers are rounded up



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