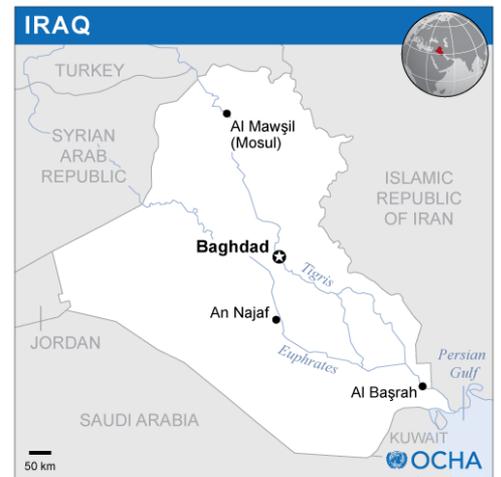


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Map Sources: ESRI, UNCS.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created in Sep 2013.

COVID-19 in IDP and Refugee Camps

The first case of COVID-19 in a refugee camp was confirmed at the end of April 2020, and in an IDP camp at the end of May 2020. Isolated cases of transmission continued over the summer; humanitarian partners have supported the Government in preventing or mitigating transmission in camps, establishing contact tracing, and adapting camp services to assist IDPs and refugees in quarantine and isolation. Transmission rates in camps increased in September 2020, as they did in the rest of the Iraq, largely attributed to large crowds which gathered to mark the religious festival of Ashura. As of 30 September 2020, the [World Health Organization's \(WHO\) Dynamic COVID-19 Dashboard](#) recorded 134 cases in 32 IDP and refugee camps: 17 active cases, 110 cured cases, and seven fatalities.



IHF-funded mobile clinic providing services in West Mosul, Ninewa. August 2020 [Photo Credit: DARY]

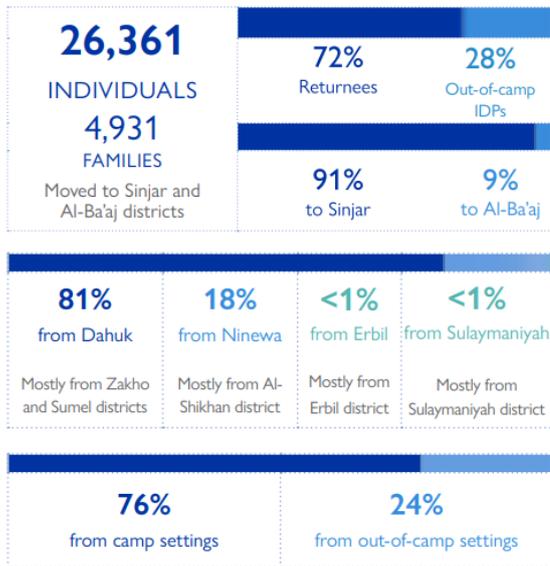
In view of the increasing number of COVID-19 cases in Iraq, humanitarian organizations have been working together to scale-up support to the Government in managing a larger number of cases in camps. Technical guidance in the form of suggested operating procedures has been drafted, including on the recommended establishment of quarantine and isolation units within each camp, where possible. Humanitarian organizations are also working with Government counterparts to identify the financial, material and personnel requirements for full preparedness, mitigation and response in each camp.

In parallel, international and national NGOs funded by the [Iraq Humanitarian Fund \(IHF\)](#) have revised existing projects to incorporate assistance adapted to the context of the pandemic. One national NGO, [Dary Human Organization](#), worked to ensure proper implementation of infection and prevention control in IHF-supported health facilities through the provision of personal protective equipment (PPE) to health staff and contracting to

disinfect premises. COVID-19 health promotion and awareness sessions were provided by IHF-supported primary health clinics to improve beneficiaries' awareness for proper infection and prevention control measures.

Other national and international NGOs funded by the IHF provided awareness-raising sessions and hygiene kits for vulnerable IDPs, returnees and host communities in Duhok, Kirkuk, Al-Anbar and Ninewa, and for out-of-camp IDPs in Ninewa, Salah Al-Din and Al-Anbar.

Returns to Sinjar and Al-Ba'aj



Graphic taken from IOM DTM Emergency Tracking report of Sinjar/Al Ba'aj movements, 1 October 2020

Beginning in June 2020, tens of thousands of IDP families undertook seemingly spontaneous large-scale return movements from Duhok and Ninewa governorates to Sinjar and Al Ba'aj districts in far western Iraq. According to the [Emergency Tracking](#) feature of the International Organization for Migration's (IOM) [Displacement Tracking Matrix \(DTM\)](#), between 8 June and 1 October 2020, 26,361 people (4,931 families) left the Zakho and Sumel districts in Duhok and the Al-Shikhan district in Ninewa to return to Sinjar (91 per cent) and Al Ba'aj (9 per cent). The majority of those returning (76 per cent) came from IDP camps, while the remainder came from out-of-camp settings. The returnees were largely—although not exclusively—Yazidis, and according to DTM, anecdotal reasons for return include an emotional desire to go home, the improved security situation and availability of services in their areas of origin, and encouragement from Mukhtars, local NGOs and other returnees. The [Returns Working Group \(RWG\)](#) also notes that COVID-19 may have played a factor, as movement restrictions may have hampered the ability of IDPs who were working near their areas of origin to visit families who had been living in camps.

Returns, even undertaken on a large-scale, do not guarantee smooth re-integration for the families who choose to resettle in their areas of origin. DTM notes that many IDPs have returned to areas which witnessed

massive destruction of infrastructure and have limited basic services such as healthcare, markets, water, and electricity. Both Sinjar and Al Ba'aj districts were at one point occupied by ISIL; Sinjar is infamous for the widespread atrocities committed against the Yazidi population at the hands of ISIL militants. The [RWG](#) notes that even prior to ISIL occupation, Sinjar was one of the disputed internal boundaries between the Government of Iraq (GOI) and the Kurdistan Regional Government (KRG), and among the most complicated political and security contexts across Iraq. [*N.B. on 9 October, the GOI and KRG signed an agreement to normalize the status of Sinjar, but at the time of writing no assessment regarding the implementation of this agreement had yet been made.*] In Al Ba'aj, IDPs may encounter their former homes being occupied by armed actors, and female-headed households may find particular challenges with community tensions and perceptions that they (or their relatives) are ISIL-affiliated.

Humanitarian organizations are currently assessing how to best support returnees in Sinjar and Al Ba'aj and how to transition programming in the area, from one of emergency response towards more durable solutions.

SGBV in Informal Settlements

A [report](#) from the [Iraqi NGO Mercy Hands](#) released in September 2020 details the phenomenon of sexual and gender-based violence (SGBV) perpetuated against IDPs living in informal settlements and out-of-camp locations in Salah Al-Din. Informal settlements are sites hosting five or more IDP families that have spontaneously settled in locations that are often privately owned and are not recognized or regularly supported by the national government; although services and assistance may be available, they may not be provided regularly. The report focuses on IDPs who reside in informal settlements in Samarra and Balad districts, who are displaced from elsewhere in the governorate, and who cannot return home due to rejection by their respective communities.

In assessments carried out in nine informal settlements, key informants identified different groups at risk of being exposed to SGBV: adolescents, divorced women, underage girls, children, widows, and orphans. Respondents noted that tribal customs and conservative households compounded with an inability to maintain privacy, and often impede victims from reporting cases of violence and abuse due to the fear of reprisal and stigmatization within the community. Women also often had insufficient knowledge of their legal rights. Types of SGBV reported included domestic violence, child marriage, sexual abuse or exploitation, and survival sex. When asked what they believe are the main reasons women who experience SGBV incidents do not seek support, most women responded, "fear of revenge and punishment" and "fear of social stigma."

When asked what else would be most helpful for women and girls in their location, the majority of women interviewed requested vocational training for women and girls, lending credence to the findings that women believe livelihood support to be among the most beneficial types of assistance.

Facilitated returns from Salamiyah IDP camp

Departures from camps and the returns of IDPs to their areas of origin (AOO) have slowed considerably in 2020, due in part to the COVID-19 pandemic as well as issues relating to security and post-conflict recovery. With the Government of Iraq remaining committed to ending the displacement of 1.3 million IDPs in and out of camps, humanitarian partners have scaled up support to displaced families who would like to return home.

In September, the International Organization for Migration (IOM)—together with the Ministry of Migration and Displaced (MOMD), the UN Refugee Agency (UNHCR), and humanitarian NGOs—facilitated the return of 114 families from Salamiyah IDP camp in Ninewa Governorate. IDPs were supported prior to departure and on arrival with vital assistance including assistance with housing and livelihoods support; transportation; cash assistance in the form of departure and reinstallation grants; rehabilitation of basic services in areas of origin; and post-return reintegration support. The facilitated group returns followed a similar exercise in Al-Anbar in July, when 40 families were supported to leave Ameriyat Al-Fallujah (AAF) camp to return to their homes over a two-day period.



Departing Salamiyah IDP camp on 10 September with COVID-19 measures in place. [Photo Credit: IOM]

With displacement being a key humanitarian concern, humanitarian organizations continue to regularly survey IDPs regarding their intentions. In May/June 2020, assessments carried out in Salamiyah camp found that although three-quarters of camp residents perceived their AOO to be safe, 67 per cent of IDPs did not intend to return home within six months, citing damaged or destroyed housing, lack of livelihood opportunities, and lack of financial means. Most IDPs surveyed indicated they would prefer to move to Mosul than return home if the camp were to close prematurely. More than 12,500 people reside in the camp.

The Government of Iraq has previously expressed its intention to close “all” camps within Iraq by the end of 2020. The humanitarian community in Iraq is broadly supportive of camp closures and consolidations, when performed in line with humanitarian principles, including ensuring voluntary, safe and dignified departures, and when undertaken with the objective of achieving minimum humanitarian standards. Nevertheless, there are some IDPs in Salamiyah and elsewhere for whom return is not a viable option due to conditions in AOO, ethno-religious considerations, or communal tensions, and these families will likely require ongoing humanitarian assistance for the foreseeable future.

Mapping Financial Service Providers and Cash Transfers in Iraq



In September 2020, the [Cash Working Group for Iraq \(CWG\)](#) published a [mapping](#) of financial service providers (FSPs) and transfer mechanisms for cash in Iraq. The mapping covered all governorates, and it sought to understand the financial environment and infrastructure in Iraq, and to explore the capacity of FSPs to respond to different shocks.

The report notes that cash is considered as a preferred response modality in the 2020 Iraq Humanitarian Response Plan and is one of the modalities adopted to mitigate COVID-19 impacts. Given the trend towards longer-term protracted humanitarian crises, cash has been recognized for its role in supporting local economies and linking humanitarian assistance to longer-term assistance and social protection systems.

The mapping found that there were multiple transfer mechanisms available, including mobile money service providers, hawala services, E-vouchers, pre-paid cards, governmental electronic cash transfer mechanism, and bank accounts, although it was not clear which of these modalities would be best suited to humanitarian cash transfer. Although there is a wide geographic coverage of service providers, they are usually clustered around areas of high-population density. Other challenges include liquidity issues, poor mobile network coverage in some areas, and low financial literacy among the population.

The CWG will continue to work with partners, donors, and the private sector to strengthen the financial infrastructure for humanitarian cash transfer in Iraq. Recommendations include determining a more regulated approach for contractual issues, including harmonizing transfer fees among FSPs. Partners were also advised to employ the most appropriate modality and suitable distribution arrangements during COVID-19.

Research into the Impact of COVID-19 on Conflict-Affected Communities



UNICEF and partners preparing for the new academic year in Al-Anbar, with a focus on COVID-19-safe learning. [Photo Credit: UNICEF]

As part of its global research into perceptions of COVID-19 in humanitarian settings, Ground Truth Solutions (GTS) has partnered with the [Iraq Information Centre \(IIC\)](#) to understand how conflict-affected people are responding to the pandemic and its mitigation measures. [Round 1](#) covered the period April to June 2020; GTS released its [second report](#) in September focusing on the period June to August, a time when many restrictions were being relaxed and when COVID-19 case numbers began to rapidly escalate nationwide. During the period, the first cases were also detected in camps for internally displaced persons (IDPs).

In [round 2](#), GTS interviewed 545 IDPs, returnees and Syrian refugees in Al-Anbar, Duhok, Erbil, Ninewa, Salah Al-Din and Sulaymaniyah governorates, as well as 150 humanitarian staff working in those locations.

The report found that 85 per cent of respondents reported confidence in their knowledge of basic preventative measures, an increase from June, although one third were unable to separate COVID-19 rumours from facts.

Respondents broadly indicated that prevention measures are challenging, with most finding it difficult to comply with lockdown instructions, largely due to the impact of stay-at-home orders on their employment income, in the absence of broad coverage of social safety nets. Face masks were used by many respondents, but were also cited as a challenge, which could be partially attributed to the summer heat.

Respondents indicated that they generally understood and adhered to government public health measures despite the measures having some negative impact, including perceptions that the measures have led to the scaling back of government and humanitarian assistance. Misinformation and spreading of rumours were significant concerns among respondents who had to decide which reports and sources are the most reliable. Most obtained their information from health-care providers and news media, with 64 per cent indicating trust in those sources and less engagement with social media or humanitarian agencies. Notably, following the initial outbreaks and subsequent lockdowns of IDP camps in Sulaymaniyah in June, respondents in that governorate found it more difficult to identify misinformation, suggesting that outbreaks are fertile ground for rumours and inexpert information. United Nations agencies, led by the World Health Organization and UN Children's Fund (UNICEF), are countering COVID-19 misinformation nationally through a targeted risk communication and community engagement (RCCE) campaign and public mobilization campaigns in heavily affected governorates, in collaboration with high profile and trusted Iraqis including religious leaders, athletes and celebrities.

COVID-19 has had a critical impact on respondents' livelihoods, with economic concerns outweighing health concerns for many. Most of those interviewed (86 per cent) were less able to meet their basic needs due to reduced income, movement restrictions and a reported increase in prices of household staples, forcing people to adopt alternative coping mechanisms such as forgoing meals or borrowing money. This is supported by World Food Programme data which indicates that 4.9 million Iraqis (12.7 per cent) were using negative coping strategies in September to meet household food needs during the pandemic.

COVID-19 has increased stress and anxiety among respondents for a range of reasons including ongoing uncertainty and economic impact at the household level. Resource shortages and reduced income can lead not only to the deterioration of mental health but increased social tensions between individuals and groups, at a time when improving relations and harmonious co-existence is vital for post-conflict recovery and durable solutions for the displaced. An increase in gender-based violence has been documented throughout the pandemic and reinforced by the GTS study.

For further information, please contact:
 Hilary Stauffer, Head of Reporting, Policy, Strategy: staufferh@un.org
 Yvette Crafti, Humanitarian Affairs Officer: yvette.crafti@un.org