



IRAQ

IFRC network mid-year report, January – June 2023

13 December 2023

IN SUPPORT OF THE IRAQI RED CRESCENT SOCIETY



18

National Society branches



2,400

National Society staff








11,853

National Society volunteers

FINANCIAL OVERVIEW

in Swiss francs (CHF)

Total		Funding requirements	 10.8M
IFRC	Longer-term	Funding requirements	 4.9M
		Income	 2.6M
Participating National Societies		Funding requirements	 5.9M
		Income	 704,000

[Click here for more financial information](#)

Appeal numbers **MAAIQ002**

ENABLING FUNCTIONS

Strategic and operational coordination

Number of formal interagency/international coordination platforms the IFRC network is part of 1

Number of government led coordination platforms the National Society is part of 1

All volunteers are covered by health, accident and death compensation Yes

National Society Development

One National Society Development plan is in place Yes

Strategy for strengthening the auxiliary role developed or implemented Yes

Humanitarian diplomacy

National Society is participating in IFRC-led communication campaigns Yes

Accountability and agility

National Society has demonstrated progress in digital transformation according to the digital maturity model outlined in the IFRC Digital Transformation Strategy Yes

National Society has strengthened integrity and reputational risk mechanisms Yes

IFRC NETWORK SUPPORTED ACTIVITIES

National Society	Multilateral Support	Bilateral Support					
		Climate	Migration and displacement	Values, power and inclusion	Enabling Functions	Disasters and crises	Health and wellbeing
British Red Cross	●						
Danish Red Cross						●	●
Finnish Red Cross	●						
German Red Cross						●	●
Norwegian Red Cross					●	●	●
Swedish Red Cross		●	●	●	●	●	

Planned
 Supported

OVERALL PROGRESS

The protracted humanitarian crisis in Iraq remains one of the largest and most volatile in the world. After years of armed conflict and instability, the health sector in Iraq is struggling to meet the dire needs of its population. The political, economic and social instability in Iraq is challenging the humanitarian response and the people most in need of assistance continue to be those directly affected by the conflict as well as by the recent pandemic, and include internally displaced persons (IDPs), refugees, returnees, and host communities.

Post-conflict recovery

As of 2022, some 2.5 million people in Iraq are in need of humanitarian assistance, including over one million IDPs who have not yet found a sustainable path back home as a result of the conflict with the Islamic State of Iraq and the Levant (ISIL). People in need are present in nearly all of Iraq's eighteen governorates, but vulnerabilities continue to be highest in the conflict-affected governorates of north and central Iraq.

Sixty-six per cent of these IDPs or hundreds of thousands of people first fled their homes eight years ago. While some have managed to create lives of relative stability in displacement, the most vulnerable among them live in critical shelter conditions such as abandoned or unfinished buildings, including informal settlements, lacking access to health care or sanitation facilities, and facing food insecurity and heightened protection risks.

Four years after the conclusion of the large-scale military operations against the Islamic State of Iraq and the Levant (ISIL), significant progress has been made in Iraq, enabling more than 80 per cent of the 6.1 million people displaced to return home and slowly bringing many of those directly impacted by the conflict back towards parity with other Iraqis.

However, at the same time, more than one million people remain in protracted displacement, and deep and acute humanitarian vulnerabilities persist among a segment of those directly impacted by the horrific suffering, widespread destruction and displacement, which took place during the 2014–2017 crisis. This includes people who live in critical emergency shelter, who lost their civil documentation during the crisis, or whose access to essential services or livelihood opportunities remains compromised due to the large-scale destruction and displacement, and therefore rely on harmful negative coping mechanisms, including those that result in significant protection concerns, such as child labour and early or forced marriage.

These population groups continue to require lifesaving and life-sustaining humanitarian assistance to live in safety and dignity in their displacement and return locations, to be able to access essential emergency services, and to meet their most basic survival needs and reduce reliance on harmful negative coping mechanisms.

The scope of Iraq's humanitarian needs has shifted into a new phase, but despite the fact that the number of people in need has decreased by 41 per cent to roughly 2.5 million people since 2021, and the number of people in acute need has decreased to around 1 million, the severity of their needs has actually worsened. Displaced communities are typically forcibly repatriated to areas with insufficient access to essential services, deteriorating infrastructure, and unmet housing, livelihood and protection needs, as camp closures continued until 2021.

Some people have also lost their livelihoods and incomes as a result of the ongoing COVID-19 pandemic, resulting in an increased use of negative coping mechanisms among the most disadvantaged. Furthermore, as a result of the heightened socio-economic vulnerabilities during the previous year, the populace is seeing an increase in mental health challenges. Following protracted lockdowns, an increased risk of gender-based violence, a lack of access to essential services, and a lack of access to education have been recognized as important protection issues needing to be addressed.

The many years of continuous conflict and economic stagnation in Iraq have affected nearly every aspect of Iraqi society. Many people have lost their ability to recover economically and their resilience to overcome the crisis, as it affected their access to food, safe drinking water, protection, education, hygiene and shelter.

A great number of vulnerable households have had to adopt some sort of survival measures, such as reducing the number of meals, neglecting health care needs, accumulating debts, and some households were forced to evacuate their homes, as they were no longer able to afford the rent. All of this has affected mental health and increased the fragility of already vulnerable groups. Health care, education, and water and sanitation services, which were already

lacking prior to the COVID-19 outbreak, are still inadequate in the aftermath of the pandemic, and Iraq, as a food import dependent country, is also struggling with the effect of the global economic downturn.

In light of the evolving context, and particularly the accelerated efforts towards durable solutions, including the development of a Durable Solutions Framework and the launching of the United Nations Sustainable Development Cooperation Framework (UNSDCF), and cognizant that many of the remaining challenges require long-term structural solutions beyond the humanitarian response, the humanitarian community in Iraq has refined its criteria for assessing humanitarian needs. The revised criteria aimed to better identify people with the highest levels of vulnerability, particularly those with a multitude of needs, and also on those needs that are a direct result of the impact of the conflict. Meanwhile, the Government of Iraq continues to work towards ending displacement, and through accelerated joint efforts, with the support of the international community, progress is foreseen over the next year to facilitate return and to advance durable solutions for affected populations.

Health care

After decades of war, sanctions, and occupation, Iraq's health services are struggling to regain lost momentum. Many skilled health workers have moved abroad, and young graduates continue to leave. Despite much rebuilding, health infrastructure is not fully restored. National development plans call for a realignment of the health system with primary health care as the basis. Yet the current health care system continues to be centralized and focused on hospitals. These development plans also call for the introduction of private health care as a major force in the health sector, but much needs to be done before policies to support this change are in place. New initiatives include an active programme to match access to health services with the location and needs of the population.

The ongoing COVID-19 pandemic caused considerable disruptions to the provision of health services. Health services have deteriorated, and the sector has faced continuous shortages in drugs and other supplies. The limited availability of primary health care services, the lack of sufficiently trained health personnel, the destroyed or inadequate health care infrastructure and shortages of medicines and medical supplies weakened the health system. Furthermore, the health care system always faces additional pressure when there are critical incidents and violent crackdowns in the country. COVID-19 stretched these services further, hitting the public health care system particularly hard, which exacerbated pre-existing vulnerabilities among conflict-affected populations, resulting in the increased use of negative coping mechanisms.

There are many capacity constraints in the health sector related to overall governance, financial management, human resources management, procurement, surveillance, monitoring and evaluation, and laboratory services. Despite these challenges, the Ministry of Health and Environment, with support from the Iraq Health Cluster, has continued efforts to improve routine health care, public health services and health system development. Current government efforts focus on the development of the health sector with a particular emphasis on enhancing the Health Information System and on generating evidence for decision-making. In line with current efforts to respond to national, regional and global demands for reliable and timely health information, this comprehensive assessment aims to align national efforts to improve health outcomes with accelerating progress towards universal health coverage.

Climate and environment

Iraq faces a unique set of environmental challenges, the impact of changing weather patterns has already been felt in recent years, with increased frequency and intensity of extreme weather events and rising environmental degradation throughout the country. As demographic growth puts further strain on natural resources that are becoming increasingly scarce, the Government's capacity to devise and implement the necessary adaptation and mitigation policies is hampered by a daunting context of post-conflict reconstruction. The water crisis in the country is expected to persist and may have humanitarian, economic, security, and social ramifications, including population movements. The most serious long-term threat to the country however, is the potential economic impact and environmental devastation caused by climate change. According to the UN Environment Programme, Iraq is the fifth most vulnerable country in the world to the effects of climate change. Extreme heat is becoming more common, drought is becoming more frequent, and dust storms are becoming more intense, affecting 39 per cent of Iraq's territory, and increased salination threatens agriculture on 54 per cent of the land.

Iraq is ranked 119/182 in the Notre Dame Global Adaptation Initiative index (ND-Gain index), reflecting that the population is highly vulnerable to climate change with a low level of readiness. Climate change induced disasters have different impacts on the population, depending on its level of exposure to hazards and threats, its vulnerability and ability to cope with the adverse impact of disasters and the levels of community resilience. With fewer resources to buffer against shocks and low investment in mitigation, the most vulnerable families suffer disproportionately

when disaster strikes and among them vulnerable groups such as women (especially widows), children, people with disabilities, the elderly, landless tenants and sharecroppers, are the most affected.

Further intensified climate change effects and water shortages will decrease agricultural production. Even before the recent disruptions in global food supplies, Iraq faced significant food security risks as domestic food production fell short of demand from the country's rapidly growing population. Across the region, rising temperatures, record low levels of rainfall, and drought are depriving people of drinking and agricultural water. It is also disrupting electricity as dams run out of water, which in turn impacts the operation of essential infrastructure including health facilities.

Higher temperatures caused by climate change increase the risks and severity of droughts. In Iraq, the loss of access to water from the rivers, and drought, threaten more than seven million people. Some 400 square kilometers of agricultural land risk total drought. Large swathes of farmland, fisheries, power production, and drinking water sources have been depleted of water. In the region, Tigris and Euphrates rivers are currently experiencing drought conditions, resulting in lower river flow, and affecting dam storage.

Drought has been a severe recurring phenomenon in Iraq over the last two decades due to climate change, although Iraq has historically been one of the most water-rich countries in the Middle East. There are security risks associated with water depletion, which could be exacerbated by drought and climate change. Balancing the needs of the environment and agriculture in Iraq is a challenge, and the Iraqi government lacks a clear management plan for the future.

Disasters

Due to extreme risks in Iraq, disasters will continue to occur continuously for the foreseeable future. It is necessary, therefore, to assist the communities to strengthen their capacities to minimize loss and suffering when disasters do occur, through disaster risk reduction activities, early warning information and increased capacity of institutions for emergency management at all levels. Disaster risk reduction interventions aim to minimize the effects of natural hazards on communities by reducing their vulnerability to loss of life and livelihoods, within a broad context of sustainable development. This may include protecting and diversifying livelihoods, for example through crop diversification as well as tackling chronic food insecurity. Tackling the causes of hazardous events is also crucial, for example reducing the likelihood of landslides through reforestation or ensuring appropriate cropping and water-use practices in drought-prone areas in the country.

Security

Sectarian issues continue to damage social cohesion in certain areas. Iraq is considered one of the most high-risk countries by the Index for Risk Management (INFORM index), due to the growing likelihood of conflict, <https://www.undp.org/geneva/inform-index-risk-management>.

The political situation in Iraq remains unstable, destabilized by pervasive corruption. On Transparency International's Corruption Perception Index, Iraq is placed 157 out of 180 <https://www.transparency.org/en/cpi/2022>. Many partner organizations believe that further instability and weak state structures are inevitable in the future, posing a threat to the efficiency of the humanitarian response.

The situation in Iraq is punctuated by episodes of extreme violence, which require the implementation of stringent security measures. The complex humanitarian situation is compounded by disease outbreaks such as acute watery diarrhea and cholera, COVID-19, and Crimean Congo Hemorrhagic Fever, affecting the whole country in general, and not helped by the weak community-based surveillance and health management information systems. Potential resurgence and new waves of COVID-19 could potentially further undermine the already fragile health system. The deteriorating security situation could also be a risk factor for the implementation of any humanitarian operation.

Humanitarian response

Although the situation in Iraq remains precarious, there is a general agreement that the focus should shift from humanitarian assistance to longer-term objectives and interventions. However, community tensions, IDP and returnee intentions and protection risk for the displaced do not facilitate the programme planning processes. The international community is struggling to develop programmes that both meet humanitarian needs and at the same time, strengthen the resilience of Iraqi communities.

The Government of Iraq has traditionally responded reactively to disasters associated with flooding, earthquakes, drought, conflict and industrial accidents. However, the institutional capacity of the state to effectively manage disaster risk and climate change was limited during the post-war transition. The absence of a national platform to coordinate the efforts of institutions at all levels of government also acts as a barrier to institutional and legislative capacity.

The next few years will most likely be a period of consolidation and phasing out and this may bring an opportunity to build synergies between strategies and programmes through close collaboration between the humanitarian organizations and other partners in Iraq. Nonetheless, a general decline in international support for Iraq is foreseen, combined with an exit of humanitarian actors.

Current funding is insufficient to maintain core services in IDP camps, much less fill the gaps in public services. Humanitarian organizations have recorded a deterioration of living standards in affected communities and certain IDP camps, with gaps in services attributed to lack of funding. Shortfalls in food, WASH and health services are particularly critical. Partners note an increase in higher household debt levels and negative coping standards in the camps most affected by the service gaps. The humanitarian organizations are working towards understanding community and conflict dynamics to engage vulnerable conflict-affected women in the economic life. A key element of this is influencing local communities and in turn, other agencies, to advocate for gender-sensitive livelihoods programming in such a fragile context.

The humanitarian community in Iraq has taken several steps in support of the transition and scale-down of the collective international humanitarian architecture. In recent months, the United Nations and its humanitarian partners have conducted discussions with key counterparts to address funding shortfalls that were leading to gaps in services in several communities and camps for internally displaced persons (IDPs). Robust advocacy undertaken by the humanitarian community in Iraq has since secured financing to bridge the immediate service gaps. Nevertheless, challenges remain for medium-to-long term scenario planning, while more acute crises in other parts of the world compete for limited global resources.

Key achievements

The Iraqi Red Crescent Society has a long history of providing life-saving assistance to people in need and local networks which are exceptionally well established across the country. The Iraqi Red Crescent has extensive expertise with various types of programming through multilateral projects supported by the IFRC, ICRC, and the Movement partners. This includes humanitarian response operations, disaster risk reduction/management, climate change and anticipatory action, cash and voucher assistance (CVA), youth and volunteers' development, community-based health and first aid (CBHFA), restoring family links, community resilience (including WASH and livelihoods, etc.), dissemination of international humanitarian law (IHL), humanitarian values, and Red Cross/Red Crescent principles, and rehabilitation for people living with disabilities, and for internally displaced people.

Iraqi Red Crescent volunteers play a critical role at all stages of the organizational response. The branches in targeted areas have teams of trained volunteers in disaster preparedness and response such as the Emergency Response Teams who are active in operational activities through the governorate's branches.

IFRC NETWORK ACTION

STRATEGIC PRIORITIES



Climate and environment

Iraq faces multiple challenges caused and exacerbated by climate change, including prolonged heat waves, declining precipitation, loss of fertile land, salinization, insufficient infrastructure investments, transboundary water shortages and a prevalence of dust storms.

Climate change continues to evolve as a critical threat to development in Iraq, fueling conflict, humanitarian suffering and population displacement. Iraq is frequently at odds over water issues, as the country depends on the Tigris and Euphrates rivers for nearly all its water needs. Water resources are becoming increasingly scarce, especially for the millions who already lack access to sanitary water. Desertification is an environmental problem which has a major impact in Iraq.

The Iraqi Red Crescent has conducted sessions on Enhanced Vulnerability and Capacity Assessment (EVCA) in target governorates. As the lead organization present in communities before during and after emergencies, the staff and volunteers come from those local communities and are the best placed to define the risks that the communities face but also the local solutions to address the local needs and mobilize the communities.

The Iraqi Red Crescent has been supported by in-country participating National Societies to address the needs of local communities affected by the climate crisis. The IFRC MENA Regional Office will continue to increase National Society capacities to work on climate and environmental crises in communities; to enhance the integration of climate change and environmental sustainability into plans, programs, and operations; to build capacities of staff and volunteers to address the climate crisis and to help National Societies to leverage their auxiliary role and be the 'partner of choice' in Iraq.



Disasters and crises

Iraq is at risk of multiple disasters ranging from natural disasters such as droughts, sandstorms, heatwaves, floods, desertification and epidemics, all through to man-made ones. Floods and epidemics pose the greatest risks in the country, followed by earthquakes and droughts. These disasters accounted for approximately 45% of deaths and 80% of economic losses from disasters in the country. Increasing disaster occurrence and loss, therefore, is a predictable variable, which must be factored into planning and programming decisions. Community based disaster risk reduction and resilience means taking into consideration the underlying causes of risks and vulnerability factors of the Iraqi population and ensuring that cross-cutting topics such as gender and diversity inclusion, youth engagement, social networks strengthening, women empowerment, livelihood diversification and protection approaches are incorporated into the mid-term and longer-term initiatives of all the programme and operations, where possible.

The Iraqi Red Crescent has organized an Enhanced Vulnerability and Capacity Assessment (EVCA) workshop for 28 staff (21 males and 7 females) from 18 branches of Iraq. The workshop aimed at familiarizing programme staff in the use of EVCA for the participatory community risk assessment process. This tool enables communities to assess and analyze the risks they face, explore where these risks come from, which members of the community are most exposed, what coping capacities are available, and what initiatives can be undertaken to strengthen coping capacities and reduce the risks.

The Iraqi Red Crescent has formed 20 Village Disaster Management Committees (VDMCs) and organized community based DRR awareness raising sessions for the targeted communities, which covers (3,675 males and 2,371 females:). Twenty community-based disaster risk management (CBDRM) plans have been developed and the Iraqi Red Crescent has also organized school safety activities in twenty targeted schools including awareness raising sessions, evacuation plans and conducting mock drills in the schools.

Water scarcity, the removal of topsoil and a decline in land productivity have led to reduced food production in Iraq. Drought conditions in Iraq have been exacerbated by the threat of climate change, which has contributed to record low rainfall and increasing temperatures throughout the country. The drought has affected northern Iraq since early 2021, while governorates in the south have witnessed decreased water supply and quality for several years. Crop and livestock production have since plummeted, impacting vulnerable communities that have also been affected by conflict and displacement over the last several years. At least seven million people in Iraq have been affected by the drought in recent times which took a massive toll on access to water, food, basic services such as electricity. These circumstances have had a significant harmful impact on livelihoods and have exacerbated food insecurity while the pandemic greatly reduced people's purchasing power and ability to secure food for their families.

The Iraq Red Crescent distributed food parcels to the most vulnerable families to close the nutrition gap that the financial circumstances created. With the support of the Ministry of Planning and public authorities, the most vulnerable communities were selected based on surveys and statistics highlighting the areas with the highest COVID-19 incidence as well as the highest poverty rates.

A total of 11,000 families (66,000 people - male: 33,462 and female: 32,538) received a one-time food parcel, the latter being in line with the Ministry of Health's quality standards for consumables. All foods were tested for quality control prior to distribution, and all manufactured goods were purchased with a minimum of 12 months expiry date.

The Iraqi Red Crescent has distributed agricultural inputs to 200 farming families affected by the drought to address the challenges facing agriculture.

Orientation trainings were conducted with the local communities in vegetable gardening including climate smart practices, soil and water conservation, and 200 farmers in four governorates were instructed on how to increase agricultural productivity and address food security challenges.



Health and wellbeing

The Iraqi Red Crescent is one of the few humanitarian actors in Iraq with presence and access in all areas across the country including in hard to reach and remote areas. From its Headquarters hospital in Baghdad, the Iraqi Red Crescent provides medical support including emergency response, intensive care, physiotherapy and mental healthcare. It also delivers primary and secondary healthcare including services for expectant and new mothers, treatment for chronic diseases, surgery and rehabilitation for the wounded, mental health support and health education activities. The treatment of emergency cases is considered a fundamental component of health systems in Iraqi Red Crescent hospitals as they are essential to prevent, diagnose, treat and rehabilitate illnesses and diseases in a safe and effective way.

Iraqi Red Crescent community outreach programmes bring health education and direct health services delivery to the communities. The situation in Iraq is punctuated with episodes of extreme violence, which requires the implementation of stringent security measures to enable the Iraqi Red Crescent to operate.

Besides the complex humanitarian situation compounded with AWD and Cholera, there are several risks directly associated with the outbreak, including COVID-19, protracted droughts, and CCHF, affecting the whole country in general, as well as the weak community-based surveillance and health management information systems (HMIS). Iraqi Red Crescent is also committed to building the capacity of local communities on Community-based health and first aid (CBHFA) approaches to empower communities and their volunteers to take charge of their health. These tools are simplified and adapted to the local context, so that communities can be mobilized to address priority health needs.

Iraq: Cholera Outbreak DREF Response

On 19 June 2022, Iraq's health authorities announced a cholera outbreak after at least 13 cases were confirmed across the country and thousands of hospital admissions for acute diarrhea were reported. The number of diarrhea cases kept increasing well beyond the normal ranges witnessed in previous years. As of 02 November 2022, there were a total of 3,063 confirmed cholera cases and 19 deaths across the country. Cholera remains a threat to public health and an indicator of inequity and lack of awareness in communities.

Under a DREF operation, the Iraqi Red Crescent deployed two Mobile Medical Units (MMU) in both Al Muthanna and Sulaymaniyah governorates, to provide basic health services to those in need. Awareness-raising activities were also conducted 340 sessions in Sulaymaniyah, Al Muthanna, Baghdad, Kirkuk, and Al Qadisiyyah governorates. Further, 40 volunteers were trained on Oral Rehydration Therapy (ORT) usage, along with cholera prevention and management. Similarly, 60 community leaders were also trained on cholera prevention and management, including environmental health management, as well as community-based surveillance in all six governorates. Under Risk Communication and Community Engagement (RCCE), activities are ongoing to promote community-based disease control and health promotion by engaging traditional leaders. Communication and engagement with target communities related to case detection and referral systems were established and are well functioning. Information, Education, Communication (IEC) materials were produced according to the Ministry of Health guidelines, including five videos that were completed, which were distributed through various media in the target governorates.

Under the WASH component, 10 assessments were carried out to establish the hygiene situation in the targeted communities, along with the water and sanitation quality. A pre and post Knowledge, Attitudes and Perceptions (KAP) survey was conducted for WASH activities. A total of 420 sessions on hygiene promotion were conducted, mainly focusing on the use of latrines, handwashing, and Infection, Prevention and Control (IPC) activities with teams in all six governorates. During the implementation, the Iraqi Red Crescent distributed 2,000 hygiene kits to the targeted communities under water, sanitation, and hygiene (WASH) interventions.

The Iraqi Red Crescent engaged the trained staff and volunteers' network in six target governorates, which are well capable of providing relief in times of emergencies. They are trained in disaster response, specialized in health, Mental Health and Psychosocial Support (MPHSS) and hygiene promotion.

The IFRC delegation in Iraq with the support of the MENA HDCC team were in regular coordination and providing technical support to the National Society. In addition, PMER support from the MENA Regional Office was deployed.

Post-distribution monitoring was carried out under the WASH component after distribution of the hygiene kits.

A lessons learned workshop (LLW) was conducted at the end of the operation, in February 2023.

Referral services in camps and areas of return have been compromised due to the shortage of ambulances, exacerbated by the increasing number of returnees and internally displaced persons (IDPs) in need of emergency referral services. According to the WHO, the conflict in Iraq has resulted in the destruction and damage of hundreds of ambulances. Ambulatory care services are pivotal to providing a service for those with urgent and life-threatening health conditions. To help address this issue, the project will procure and buy medical equipment (a Continuous Positive Airway Pressure (CPAP), an Endoscopy Machine, a Ligature System, an Infant Baby Incubator and Mammography System) and two fully equipped ambulances which will be operated and managed by the Iraqi Red Crescent.

With the decline in the medical and surgical services provided by the Iraqi Ministry of Public Health and facilities overwhelmed with COVID-19 cases, it is hard to find accessible accredited medical and surgical services especially in urgent trauma and accidents.

Since the Iraqi government's health system lacks proper medical equipment and diagnostic tools, this is considered a fundamental component of health systems in Iraqi Red Crescent hospitals as they are essential to prevent, diagnose, treat and rehabilitate illnesses and diseases in a safe and effective way.

This equipment should be installed in the 16-bed emergency ward at the Iraqi Red Crescent hospital which is also supported by the Government of Japan.

Building Trust during the COVID-19 Pandemic in Humanitarian Settings (USAID / BHA) programme

Iraq witnessed two outbreaks in 2022, namely 380 cases of Crimean-Congo hemorrhagic fever and cholera, and more than 3,400 confirmed cases of cholera reported all over the country. Additionally, the COVID-19 pandemic continued in Iraq with two waves in 2022. The communicable diseases surveillance programme was implemented to support the Ministry of Health in controlling these outbreaks, ensuring the availability of diagnostic kits for early detection and confirmation of cases, and sustaining the delivery of public health services. The Iraqi Red Crescent under the 'Building Trust during the COVID-19 Pandemic in Humanitarian Settings Programme' (USAID/BHA), carried out several risk communication and community engagement campaigns. This became a cornerstone of the Iraqi Red Crescent's work, seeking to enhance community participation in preparedness and response to various health issues, including emergencies and outbreaks. Iraqi Red Crescent has reached out to a total of 208,394 people (male: 114,171 and female: 94,223) in this programme.

Iraqi Red Crescent has been incorporating hygiene and health promotion activities in the above mentioned USAID/ BHA programme in line with the revised plan and hygiene promotion activities. Iraqi Red Crescent aims at enhancing the overall well-being of affected families through comprehensive WASH and health activities with the engagement of 53 volunteers and staff from the local branches, to improve people's hygiene behavior and prevent the spread of disease. These hygiene promotion activities enable people to take action to prevent water, sanitation and hygiene-related diseases by mobilizing and engaging the population, their knowledge, and resources. Iraqi Red Crescent has also been involved in the delivery of messages during the time of shrine visits to Karbala and Baghdad.



Migration and displacement

The Iraqi Red Crescent has been regularly coordinating with the Ministry of Migration and Displacement to secure sustainable return of displaced people in Iraq. The National Society has been extensively engaged in the implementation of durable solutions to issues related to the return of displaced people, as well as in providing appropriate support to ensure safe and dignified return and reintegration into society with all its components such as health service provision, infrastructure, hygiene and sanitation facilities etc.



Values, power and inclusion

Iraqi Red Crescent teams are constantly thriving to ensure the inclusion of vulnerable populations (people living with disability, pregnant and lactating women, elderly heads of households, and widows) into their interventions. All programme interventions ensured an equitable access to all genders. In addition, data collection tools included gender disaggregation where possible. Awareness sessions on hygiene promotion, disaster preparedness, in addition to all-female Mental Health and Psychosocial Support (MPHSS) sessions were delivered by Iraqi Red Crescent teams. An integrated strategy to mainstream gender protection and inclusion and community engagement and accountability (CEA) projects is being implemented. Special attention is being paid to some of the most vulnerable groups, e.g., women and children, ensuring their needs are met.

The Iraqi Red Crescent has given a high priority to ensure gender and social inclusion of all those concerned in the programme and operations activities. The National Society ensures that data collection regarding sex, age and disability is disaggregated to increase the understanding of each segment of the society and what their distinct needs, protection concerns, and priorities are. The Iraqi Red Crescent is committed to ensure the implementation of IFRC Code of Conduct and Child Safeguarding Policy, as well as obligations of volunteers, staff and management to ensure a Zero tolerance to sexual exploitation and abuse (PSEA). Beneficiary groups are involved in all aspects of the project planning and implementation, to ensure their needs are recognized and met. Special attention is paid to the most vulnerable groups, e.g., women and children.

The National Society is part of the IFRC Network Building Trust Project supported by the USAID Bureau for Humanitarian Assistance. This project aims to keep people safe before, during and after public health emergencies by building people's trust in the responses, health measures and responders trying to keep them safe using Community Engagement and Accountability (CEA) approaches.

In the framework of the Building Trust Project, activities were conducted across all governorates, reaching 125,026 people through awareness sessions, participation in the (Al Khaleeji 25) football championship, and awareness campaign for pilgrims. Through the increased visibility and outreach at these events, as well as the mix of people attending from all over the country, the Iraq Red Crescent has been able to reach persons at a higher risk of being affected with the diseases that the National Society is conducting awareness sessions on, increase the reach to hard-to-reach populations in their sessions, and enhance the Iraq Red Crescent's visibility to target communities.

The Iraq Red Crescent also conducted a CEA/feedback assessment survey to engage the community in developing a feedback mechanism. In this survey, the Iraq Red Crescent volunteers reached out to 1,210 community members across the 18 governorates, focusing on women, hard-to-reach populations, elderly, and other vulnerable community members. The aim was to find the best and most suitable means of communication and delivering feedback to the Iraq Red Crescent. Based on the findings, a feedback mechanism design workshop was conducted with mid- and upper-level management of the National Society, to identify and set up a feedback mechanism to be implemented in three governorates as a pilot phase.

The Iraqi Red Crescent integrates the Community Engagement and Accountability (CEA) element into its programmes and ensures that people always have the ability to engage with the National Society, and the guarantee that their feedback and needs will be respected.

Based on the community structures in the governorates, the Iraqi Red Crescent focused on women's participation and decision making in the community and on promoting elders as active agents in all activities including longer-term

social inclusion initiatives. Iraqi Red Crescent governorates teams are equipped with referral information and have received orientation on Protection, Gender and Inclusion to be able to support with house-to-house visits when any difficulties in access may be encountered.

ENABLING LOCAL ACTORS



Strategic and operational coordination

IFRC membership coordination

The Iraqi Red Crescent maintained daily communication with the IFRC's Delegation in Iraq, as well as with participating National Societies, based on need. There are coordination mechanisms for the IFRC and Iraqi Red Crescent at the national government level in the country. During the implementation period, the IFRC and the Iraqi Red Crescent were represented in disaster management and health departments and clusters at governorates level. All internal partners and external stakeholders were informed about the support from the Japanese government, progress updates were shared, and colleagues were invited to give their inputs and feedback to help ensure quality project implementation.

External coordination

At the national and governorates level, the Iraqi Red Crescent coordinates its activities with the Prime Minister's office, local governments in the targeted governorates, the Ministries of Health, the Environment, Education, Displaced, Reconstruction and Ministry of Labour and Social Affairs. Additionally, the Iraqi Red Crescent coordinates with other national and international humanitarian organizations.

The Iraqi Red Crescent governorate branches administration shared updates and progress of resilience and humanitarian assistance programme activities in cluster meetings which occur monthly at the national level and which are coordinated by the respective cluster lead agencies through Cluster Coordinators. Meetings are attended by cluster partners, members and observers and aim to strategize and coordinate humanitarian activities at the cluster or sector level, as well as to share information on challenges and bottlenecks faced at the operational level.



National Society development

National Society development is in the first instance the responsibility of National Society. The IFRC is engaged with its member National Societies both on a bilateral basis and also in other ways, all aiming to support the Iraqi Red Crescent in its development and programme implementation.

Following the Organizational Capacity Assessment and Certification (OCAC) exercise, national in-country partners have pledged to support the Iraqi Red Crescents National Society Development Plan. Participating National Societies take the lead in supporting the Iraqi Red Crescent in finance development, strengthening the data management system, WASH and in running a portfolio of multiple grants mainly focusing on WASH, health, livelihoods and disaster risk reduction. Some Participating National Societies are supporting on cash programming. In addition to reviewing the Strategic Planning for next year, the IFRC is closely coordinating with the Participating National Societies to ensure capacity building of Iraqi Red Crescent staff and volunteers and to reinforce their presence in the country.



Humanitarian diplomacy

The Iraqi Red Crescent with the support of IFRC and the Movement partners focuses its humanitarian diplomacy efforts on vulnerable people and meeting their basic needs.

In this regard, Iraqi Red Crescent focuses to strengthen and disseminate the key role of the NS and in this regard, the Iraqi Red Crescent developed the Humanitarian Diplomacy Guidance Briefing Note. This document serves as a guide for senior-level Movement partners wishing to engage with donors, policymakers, and other relevant stakeholders with an interest in Iraq. The highlights of this Note include.

- Auxiliary role of the National Society as an evidence-based trustable credible and professional organization in the country
- Reinforcing the position of the Iraqi Red Crescent as the main responder to disasters in the country
- Promote Red Cross Red Crescent Principles and Values and International Humanitarian Law
- Advocate towards more localization among donors and international partners with the necessary investment in local capacities of the National Society
- Promoting a programmatic approach rather than a fragmented project approach.
- Call for donors and partners to invest in longer-term programming.



Accountability and agility (cross-cutting)

No activities reported during this reporting period.



The International Federation of Red Cross and Red Crescent Societies (IFRC)

is the world's largest humanitarian network, with 192 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 30 June 2023. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies. Mid-year reporting data may have been based on estimations, with plans to submit more robust numbers at the annual reporting stage.
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) and which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.

ADDITIONAL INFORMATION

- [IFRC Global Plan and Country Plans](#)
- [Subscribe for updates](#)
- [Donor response](#) on IFRC website
- [Live Disaster Response Emergency Fund \(DREF\)](#) data
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)

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