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A child playing while her family sets up a tent in a returnee area in Ba'aj
[Photo Credit: OCHA]

Closure of IDP Camps Continues in Federal Iraq



A family packing their belongings to leave Salamiyah Camp
[Photo Credit: OCHA]

At the beginning of 2021, five formal camps for internally displaced persons (IDPs) remained open in federal Iraq: Ameriyat Al-Fallujah in Al-Anbar, Jad'ah 5 and Salamiyah camps in Ninewa, and the smaller Latifya 1 & 2 sites in Baghdad. These camps hosted 22,200 IDPs, some of whom had complex needs that presented barriers to safe, voluntary and dignified returns to their areas of origin.

After a short pause during December 2020, in January 2021, the Government of Iraq resumed IDP camp closures, starting with Salamiyah, which closed on 14 January. Approximately 900 people opted for facilitated returns to their areas of origin, assisted by the International Organization of Migration (IOM). An additional 7,400 felt unwilling or unable to safely return to and stay in their areas of origin, and opted instead to travel to new locations. A small number of people opted to transfer to the one remaining camp in Ninewa, Jad'ah 5.

The closure of Salamiyah camp interrupted an ongoing project by UNHCR and relevant government agencies to issue civil documentation to IDPs, which may have assisted with return and resettlement prospects. Protection partners indicated that those who had left the camp without the relevant documents may face additional challenges in return and resettlement.

The closure of Jad'ah 5 camp, hosting more than 8,500 people, was announced to humanitarian actors on 23 January, despite earlier indications at both local and national levels that a planned and collaborative closure process could be expected. Camp management partners, as well as governorate authorities, highlighted that many of the residents of Jad'ah 5 had high levels of vulnerability and would face significant obstacles with onward travel and resettlement. Such obstacles include perceived affiliations with extremist groups; the unavailability of shelter, basic services or jobs in areas of origin; the presence of explosive remnants of war; and/or ongoing military operations in return areas. After concerted advocacy efforts by the Humanitarian Coordinator, humanitarian organizations, and donors, the closure of Jad'ah 5 was temporarily suspended by the Government of Iraq. Government representatives indicated they would visit the camp to better understand the challenges families would face if compelled to leave the camp at short notice.

In November 2020, the Special Rapporteur for the Human Rights of Internally Displaced Persons and the Special Rapporteur on Adequate Housing issued a communication to the Government of Iraq expressing concerns about the camp closures, which was [published on the OHCHR website in January 2021](#). A reply from the Government of Iraq has been received, and [also published on the OHCHR website](#).

In December 2020, the CCCM and National Protection Clusters disseminated [Operational Guidance on Response to Sudden Camp Closures and Evictions](#) to support partners in planning, monitoring and responding to camp management, protection and communications needs arising before, during and after camp closures. In tandem, the Iraq Humanitarian Fund made available US\$5.7 million in a 2nd Reserve Allocation, to support the response to IDP returns and secondary displacement prompted by sudden camp closures, and to provide funding to families that have faced unexpected returns as a result of uncoordinated camp closures.

Operationalizing Area-Based Coordination in Iraq

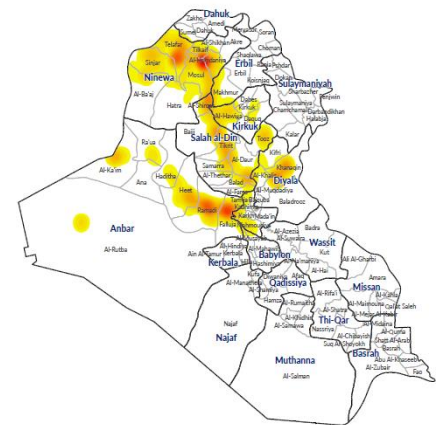
As IDP camp closures increase the population of returnees and secondarily-displaced persons throughout Iraq, humanitarian, stabilization and development actors in Iraq are working to establish **area-based coordination** to ensure the needs of vulnerable people in return areas are met. Facilitating durable solutions for Iraq's displaced people is primarily the responsibility of the Government of Iraq, however successful and sustainable alternatives to displacement for vulnerable Iraqis will also require engagement from the international community working closely with government counterparts.

In Iraq, achieving durable solutions for affected communities will need the parallel efforts of the humanitarian, stabilization and development actors, coordinated under the auspices of the Durable Solutions Task Force (DSTF)¹ and the Durable Solutions Technical Working Group (DSTWG).² In 2021, the humanitarian community will actively engage in the nexus between these sectors in order to provide maximum support towards durable solutions, through appropriate humanitarian programming and through contributions to durable solutions coordination. Humanitarian partners will actively participate in the work of the DSTF and its subsidiary bodies, including through the participation of representatives of humanitarian clusters in the DSTWG. Programmatic complementarity with stabilization and development programming will be pursued through information sharing, including assessment data, advocacy, provision of legal assistance and other key services to the most vulnerable, referral of cases to durable solutions and development actors or government-led social protection schemes, as well as through engagement with and capacity-building of local actors and authorities.

While area-based coordination is implemented differently across various contextual settings, at its most basic, it foresees aid which is multi-sectoral and based on geography, rather than on the specific objectives of a cluster or sector. It envisions dedicated geographic focal points who are present in a certain area coordinating a multi-sectoral response for the local population in need. The focal points can be humanitarian, stabilization, development, or peacebuilding actors—or perhaps an organization which has multiple mandates—but they ideally would have a nuanced understanding of the local context, and would have established good working relationships with local authorities.

Potential target areas for area-based coordination will be based on a number of criteria, including the availability of actors willing to support and lead durable solutions area-level planning and implementation; a strong evidence base of demonstrated need; the willingness and commitment of authorities to support and participate within the area; and the access and/or feasibility to respond with interventions across the spectrum of humanitarian, stabilization, development and peacebuilding actors for a specific area.

Area-based coordination focal points have recently been identified for initially-selected priority areas in Iraq. Under the guidance of the DSTWG, and in line with durable solutions implementation guidelines, area-level groups and their focal points will be responsible for a series of objectives related to outreach, planning, implementation and monitoring of durable solutions plans of action at the local level.



Potential target areas for Area-Based Coordination in Iraq

¹ The Durable Solutions Task Force in Iraq is co-led by UNDP and IOM, reports directly to the RC/HC, and is responsible for the development of national durable solutions strategy, and strategic level engagement with government and donors.

² The Durable Solutions Technical Working Group in Iraq is co-led by IOM, UNDP and NGOs; it is the national forum for the overall technical coordination of implementation of durable solutions in Iraq.

Explosive Ordnance Contamination Continues to Challenge Iraq's Recovery

The [death of a humanitarian deminer working in Iraq](#) in early January 2020 renewed attention on explosive ordnance contamination in Iraq, and the challenges explosive hazards present to Iraq's reconstruction and recovery.



Mine action partners at work in Anbar.
[Photo Credit: OCHA]

As of January 2021, the total known explosive ordnance (EO) contaminated area in Iraq is 3,184 square kilometers, yet the full extent of contamination is uncertain. The presence of EO endangers the lives of vulnerable populations and hampers the safe return of displaced people. About 8 per cent of both in-camp and out-of-camp IDPs cite the presence of explosive ordnance as a reason not to return to areas of origin.³ In 2020, mine action actors including government bodies, humanitarian partners and commercial organizations found and/or destroyed 28,561 explosive devices.⁴

Between 1 January 2020 and 31 December 2020, the Iraq Humanitarian Fund-sponsored [iMMAP Explosive Hazards Incidents Dashboard](#) recorded 1,720 explosive hazard incidents in Iraq, which killed 248 people, and injured 689.⁵ During the Multi-Cluster Need Assessment conducted in 2020, approximately 8 per cent of households who were interviewed reported family members who have been injured or killed by explosive ordnance. The five districts with the highest percentage of households reporting family members injured or killed by explosive ordnance are Al Kufa (Najaf), Al Kut (Wasit), Balad (Salah Al-Din), Tikrit (Salah Al-Din) and Samarra (Salah Al-Din). There is no integrated explosive ordnance victim data collection system to properly assess the needs of the victims.⁶ Men and boys comprise the majority of direct explosive ordnance victims, but the indirect effects such as physical, psychological and economic pressures impact all family members.

About 25 per cent of recorded contaminated land is adjacent to agricultural areas, which has a significant impact on livelihoods. Despite considerable effort from mine action partners,⁷ IDPs and returnees continue to lack awareness of the extent of contamination in their areas of origin, and/or are fully capable of recognizing and avoiding threats. Children are more at-risk of accidents related to explosive ordnance than other groups. The prevalence of disability, as a result of explosive ordnance detonation, is significant, with eight per cent of affected households requiring access to specialized services, including emergency and long-term medical care, rehabilitation, mental health and psychosocial support.⁸

In 2021, Mine-Action sub-cluster members will work to further reduce the EO risk to affected communities by conducting surveys and clearance of 12 million square meters of land—including residential areas—to support the safe return and access to agricultural land, roads and critical infrastructure.⁹ Sub-Cluster partners will assist victims through referral pathways to access health care, protection, rehabilitation and psychosocial support services and promote their participation and empowerment in social and economic life.

Mental Health and Psychosocial Support Services for IDPs/Returnees in Anbar

In January 2021, the International Organization for Migration (IOM) published [an assessment of the Mental Health and Psychosocial Support \(MHPSS\) services](#) available in Anbar governorate. The report assessed returnees, IDPs, and host community adults and young people aged 14-17 years old in the districts of Fallujah and Al-Qaim. Anbar Governorate experienced significant displacement during the military operations against ISIL. About 480,000 individuals left Anbar Governorate between January and May 2014; others remained in the areas under ISIL control either by choice or force. A

³ Multi-Cluster Needs Assessment VIII (2020)

⁴ Information provided by the Mine Action sub-cluster

⁵ These statistics include explosive remnants of war and landmines, as well as other kind of improvised explosive devices which may have been employed by armed actors.

⁶ 2021 Iraq Humanitarian Need Overview, publication forthcoming

⁷ Per [UNMAS in Iraq](#), between January 2020 – September 2020, 19,277 people received explosive ordnance risk education and risk awareness training in schools, internally displaced person (IDP) camps, and other high priority areas.

⁸ Multi-Cluster Needs Assessment VIII (2020)

⁹ 2021 Humanitarian Response Plan, publication forthcoming

second wave of displacement occurred in 2016 in the face of the military campaign to expel the Islamic State in Iraq and the Levant (ISIL). As of June 2020, over 1.5 million people have returned to Anbar.

Assisting vulnerable communities with mental health coping strategies in one of the objectives of the 2021 Iraq Humanitarian Response Plan (publication forthcoming). The psychological impact of the ISIL crisis and years of subsequent displacement remain high among IDPs and returnees. Over the past year, psychosocial trauma, stress and anxiety have further increased as the COVID-19 pandemic caused growing distress, whether linked to health concerns, financial worries, or the increased exposure to domestic violence and forms of abuse during home confinement. Uncertainties related to camp closures and forced population movements also contribute to increased stress and anxiety among the conflict-affected populations.

IOM's objectives in carrying out the assessment were to identify mental health and psychosocial problems and needs of returnees in Fallujah and Al-Qaim; explore the community perceptions and understanding of mental health and psychosocial needs and existing resources in target areas; and explore perceptions about the availability, accessibility, and need for MHPSS services. The report found that leading causes of emotional distress differed between the two locations. In Al-Qaim, displacement, traumatic experiences in the area of origin, and loss of loved ones were the most commonly stated causes of emotional distress. The most urgent needs in this region were provision of psychosocial support services; awareness raising activities regarding harassment against women and girls; recreational activities, such as the parks and kindergartens; opening educational and vocational courses and other courses to build computer and literacy skills; and improved access to basic services.

In Fallujah, the most frequently reported causes of emotional distress were displacement, COVID-19 pandemic, living situations/conditions, and lack of job opportunities. The most urgent needs for respondents in Fallujah were addressing drug abuse and mental health conditions, such as depression, anxiety, suicide and addiction. Respondents also cited the need to address other psychosocial-related issues such as marital conflicts, daily stress, and addiction to technology; addressing issues of injustice, inequality, and corruption in the community; and addressing protection-related problems, including gender-based violence, child neglect, and child labor. The need to enhance the provision of services to persons with special needs was also highlighted.

As indicated by the fairly stark differences in both reported causes of emotional distress and the most urgent MHPSS needs cited by the two communities, there can be no "one-size fits all" approach to tackling the mental health crisis in Iraq, and the findings from this report cannot necessarily be extrapolated to other communities. However, the report makes several recommendations which can help inform the programming of mental health partners and donors in Anbar and elsewhere as they try to address the psychosocial trauma, stress and anxiety which is endemic in many displaced or returnee communities in Iraq.

IOM IRAQ

NEEDS ASSESSMENT REPORT: MENTAL HEALTH AND PSYCHOSOCIAL CONDITIONS IN ANBAR

Republic of Iraq, Al-Anbar Governorate,
Fallujah and Al-Qaim Districts



IOM
UN MIGRATION

The Iraq Humanitarian Fund in 2020 and Looking Ahead to 2021

From 1 January 2020 to 31 December 2021, the Iraq Humanitarian Fund (IHF) received US\$23.6 million in donor contributions, which added to its existing balance of \$19.2 million in carried-forward funds from 2019.

The first Standard Allocation of 2020, launched in May, supported 2020 Humanitarian Response Plan (HRP) activities in eight sectors that contributed to COVID-19 prevention and response in Iraq, mainly in out-of-camp and other underserved locations. The allocation funded 20 projects implemented by 42 partners including 20 international NGOs, 16 national NGOs, five UN agencies and one Red Cross/Red Crescent organization. It prioritized the consortium approach aimed at enhancing the participation and response capacity of national partners; a net funding of \$3.6 million (30 per cent of the total allocation) was disbursed to national NGOs.

In October 2020, the Humanitarian Coordinator approved a **Cost Extension Strategy** to top up cluster-recommended projects funded through the 2020 1st Standard Allocation and 2019 2nd Standard Allocation (the latter approved on an exceptional basis as explained in the strategy). These cost extensions allowed for quick disbursement of funds with minimum processing time and work for clusters and partners to support the expanded operation of already-formed consortia in Education, Food Security, Health, MPCA, Protection, Shelter/NFIs and WASH sectors, addressing critical operational and funding gaps in the 2020 HRP.

In November 2020, the IHF launched its first Reserve Allocation to support COVID-19 quarantine and isolation (Q/I) areas in selected IDP camps. The strategy initially agreed-upon was revised in light of anticipated camp closures and consolidation. The revised **allocation strategy** aimed to support Q/I area installation and running costs in camps that are least likely to close in the foreseeable future, with an envelope of \$2.4 million to fund shelter/NFI, health and WASH interventions.

In late December 2020, in light of the sudden closure of a number of IDP camps, the IHF launched its second Reserve Allocation to support rapid response of shelter/NFI, protection and WASH partners targeting the areas of the highest number of new arrivals resulting from camp closures. Up to \$5.75 million will be allocated under this allocation, to address the most urgent needs of families that have been affected by the uncoordinated camp closures (see the allocation strategy for details).

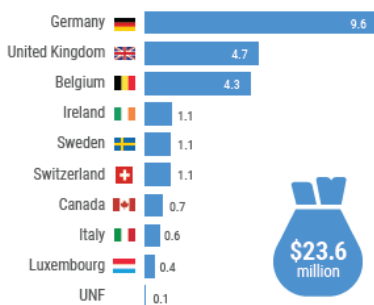
After allocations and administrative costs in 2020, as of January 2021, the IHF has an approximate programmable balance of \$8.9 million for the year ahead. The fund currently has 105 eligible partners (61 INGOs, 30 NNGOs, 2 RC/RC and 12 UN agencies). The next meeting of the IHF Advisory Board will discuss updates on donor contributions, allocations, risk management activities, the Fund's strategic objectives for 2021, and the timing for a possible future allocation subject to sufficient donor contributions.



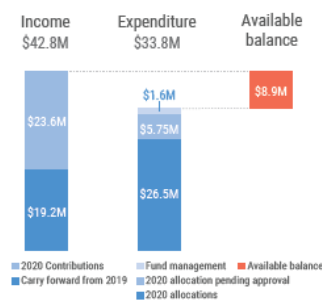
IRAQ

Iraq Humanitarian Fund Dashboard (1 January - 31 December 2020)

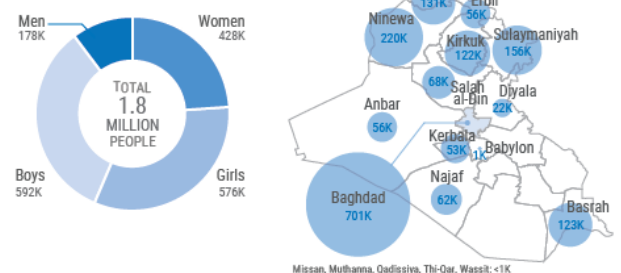
DONOR CONTRIBUTIONS (US\$ MILLION)



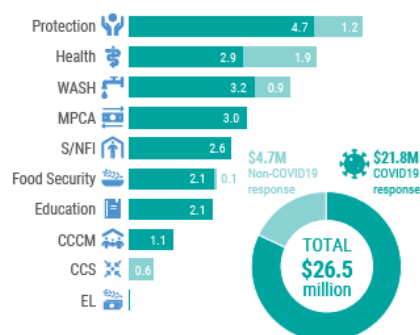
FUNDING OVERVIEW



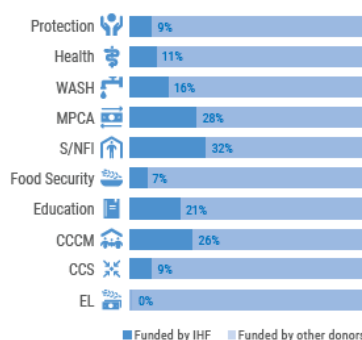
TARGETED BENEFICIARIES BY GENDER, AGE AND GOVERNORATE³ 1st Standard Allocation (SA1), 1st Reserve Allocation (RA1) & 2020 cost extensions⁴



ALLOCATIONS BY CLUSTER (US\$ MILLION) SA1, RA1 & cost extensions



HRP FUNDING COVERAGE BY CLUSTER⁵ 4.3% of HRP funding channeled through IHF



TARGETED BENEFICIARIES BY CLUSTER⁶ SA1, RA1 & 2020 cost extensions⁴

