

COUNTRY EXPERIENCES

Iraq

Rapid Response Mechanism Saves Women's Lives Along the Route to Safety



Providing lifesaving services to those fleeing armed conflict requires an agile response

Millions of Iraqis have fled their homes because of armed conflict, including the Mosul Offensive of 2016-2017, which led to one of the most complex humanitarian interventions in the history of the region. To ensure that lifesaving supplies and services were available, UNFPA and partners deployed a Rapid Response Mechanism (RRM) to provide agile response and save countless lives. UNFPA deployed mobile reproductive health teams along routes of displacement.

Though military operations against the Islamic State of Iraq and the Levant (ISIL) ended in 2017, 8.7 million of Iraq's people, including 1.9 million still internally displaced, remain in need of humanitarian assistance. Among them are women and girls in dire need of reproductive health and psychosocial support services. As the humanitarian emergency persists in Iraq, UNFPA continues to mobilize resources and expand partnerships to revitalize local facilities.

Women of reproductive age are especially vulnerable in Iraq's volatile humanitarian crisis

HUMANITARIAN SITUATION

The number of displaced civilians drastically increased during the Mosul offensive of 2016–2017, when the Iraqi Government and its allies began operations to retake eastern Mosul from ISIL. The operations caused thousands of people to flee their homes, and an estimated 10 million Iraqis needed humanitarian assistance, including 1.5 million in Mosul alone. Of those, Mosul's 60,000 pregnant women and women of reproductive age needed special and timely attention.

Through the Rapid Response Mechanism, UNFPA with the United Nations Children's Fund (UNICEF) and the World Food Programme (WFP) adopted a flexible approach to providing services and lifesaving packages of assistance along the routes of displacement, including UNFPA's deployment of mobile health teams along the Mosul corridor, a crucial path for people fleeing the violence. As a leading partner for RRM during the Mosul operation and its aftermath, UNFPA provided critical supplies and services to the victims of the Iraqi crisis and was at the forefront of the humanitarian response alongside UNICEF and the WFP. When women of reproductive age were unable to access lifesaving sexual and reproductive health and GBV services and protection, UNFPA was able to provide critical humanitarian assistance through mobile and static clinics to populations on the move, in camps and in host communities.

"As families flee conflict and become displaced, women often prioritize the needs of children and their families above their own... By contributing to women's dignity as they are on the move, the UNFPA dignity kits are also a means of empowerment," said Ramanathan Balakrishnan, UNFPA Representative in Iraq, speaking about health and hygiene supplies distributed in the crisis.

A country recovering from three years of conflict

As Iraq rebuilds after its devastating period of conflict, UNFPA and its partners continue to work tirelessly to provide humanitarian relief by providing contraceptives, lifesaving maternal health medicines and other reproductive health supplies along with dignity kits that contain essential hygiene supplies including soap and sanitary napkins. UNFPA is also establishing women's centres and safe spaces, setting up reproductive health clinics and deploying mobile health teams and trained personnel to assist the affected population.

In every humanitarian situation, the risk of sexual exploitation and abuse escalates during times of crisis. When people are displaced, community protection systems are disrupted, giving perpetrators a more enabling environment to abuse and exploit those who are vulnerable. In Iraq, UNFPA and its partners are working to end these abuses through a range of actions known as "protection from sexual exploitation and abuse". UNFPA and WFP have delivered training sessions to help humanitarian staff understand how sexual exploitation and abuse can occur in different scenarios, as well as the consequences for survivors, the community and all humanitarian actors.

UNFPA and its partners are working to strengthen and rehabilitate maternal and reproductive health facilities affected by the conflict. In Al-Qaim City, ISIL had turned the maternity ward of Al-Qaim Hospital into an emergency room for its fighters. Maternal health personnel were relegated to a small room to perform deliveries. When they left, the ISIL militants stole all the hospital's equipment, and then set fire to the building. The damage was extensive.

"I felt as if my world had just fallen apart. This hospital was my home. I had been working here for 15 years," said midwife Um Qassem, who had remained to assist birthing mothers throughout ISIL's occupation, then saw the hospital burned as she left.

UNFPA has been supporting Al-Qaim Hospital since early December 2017, helping to rehabilitate the operating theatres and delivery room. UNFPA has provided financial and logistical support to the hospital's reproductive health team, and covered the cost of generators and waste management. UNFPA has also provided a well-equipped mobile delivery unit, able to manage uncomplicated deliveries as well as caesarean sections, and helped establish a referral system to transfer more complicated cases to comprehensive care.

Among those profoundly affected by the conflict is Nadia Murad, a member of Iraq's Yazidi community who was enslaved and raped in Iraq by ISIL fighters in 2014. Named a UNODC Goodwill Ambassador in 2016, Ms. Murad won the Nobel Peace Prize in 2018 for her work to raise awareness about the plight of human trafficking victims during humanitarian crises.

Objectives

- Ensure humanitarian access to eastern Mosul and along the routes of displacement.
- Deploy necessary personnel and commodities by these routes to deliver emergency sexual and reproductive health services to the affected population.
- Provide sexual and reproductive health services to internally displaced persons in camps after the exodus from eastern Mosul.
- Support the stabilization of reproductive health facilities and services after the crisis.

Strategy and interventions at the height of the crisis

Rapid Response Mechanism: With partners, UNFPA conducted regular field visits and designed and implemented the RRM to plan the intervention and preposition the assistance packages. Its design followed a sequential approach:

Planning and prepositioning of supplies



24 hours of displacement = rapid assessment



48 hours of displacement = deployment of mobile health teams/clinics



4 to 6 weeks = transition to static facility



> 6 weeks = revitalization of facilities



UNFPA has been active in Iraq since 2004. This photo depicts the distribution of dignity kits to displaced families in Sharia, Iraq. © UNFPA Iraq 2018

Preposition supplies: As the crisis escalated, UNFPA prepositioned reproductive health kits and other supplies in health facilities to speed delivery of services to the displaced population.

Avoid supply shortages: Accurate planning and forecasting resulted in zero instances of stock-outs at 61 UNFPA-supported health facilities in Mosul. UNFPA tracked procurement and transport lead time, which was instrumental in avoiding stock-outs.

Deploy mobile health teams: To provide essential services to women and girls fleeing the conflict, UNFPA supported the deployment of nine mobile delivery units and six mobile gynecological clinics to hard-to-reach areas along the routes of displacement. In addition, 14 ambulances were deployed for the referral of reproductive health emergencies.

Provide lifesaving services: UNFPA-trained health professionals were on the front line in Mosul, and were instrumental in providing sexual and reproductive health services and safe deliveries. UNFPA established two field maternity hospitals attached to the World Health Organization's trauma field hospitals to provide caesarean sections to women with complicated deliveries.

Since the end of Mosul offensive of 2016–2017, the strategy has focused on supporting the stabilization of reproductive health facilities and services.

Progress and results

From January 2017 to June 2018, 402 health personnel were trained on GBV management with support from UNFPA. Since 2014, UNFPA has established more than 94 reproductive health service delivery points and 147 women's safe spaces and community centres offering GBV treatment and response services.

January 2017 to June 2018



1,642,842
Total people reached with all types of SRH and GBV services



312,624
People who directly benefited from reproductive health kits



35,267
Number of UNFPA-assisted safe deliveries



25
Number of UNFPA-supported mobile health teams



237,840
People reached with family planning services

Source: Information is updated on a rolling basis. See the UNFPA Transparency Portal at www.unfpa.org/data/transparency-portal/unfpa-iraq and the Iraq Humanitarian Emergency page at www.unfpa.org/data/emergencies/iraq-humanitarian-emergency

Lessons and conclusions

Partnership was critical at many levels

- In the Mosul operation, close and transparent engagement with donors enhanced UNFPA's credibility as a front-line actor in this humanitarian response.
- UNFPA's collaboration with UNICEF and the WFP on the RRM initiative was instrumental to reaching vulnerable people and addressing their needs. It enabled UNFPA to distribute lifesaving commodities to the affected population swiftly and effectively.
- Within the organization, close coordination among UNFPA logistics, supplies and programme teams in planning and implementing humanitarian interventions yielded optimal results.

Secure, steady and reliable supplies

- Keeping shelves stocked with reproductive health supplies during the Mosul crisis (no stock-outs) was achieved through planning (including pre-positioning), resource mobilization, efficient and effective operations, and regular follow up.
- Contingency planning contributed to a comprehensive procurement plan. In addition, coordination with national authorities ensured the fast clearance and transportation of commodities into and within the country.
- Efforts to build resilience in the national health system are taking the lessons learned beyond the crisis to the recovery period. UNFPA has worked in partnership with the Iraqi Ministry of Health to ensure a solid reproductive health commodity security system is in place even in challenging situations.

Through collaboration and coordination, UNFPA and its many valued partners ensured the continuity of lifesaving services and the timely delivery of commodities during the Mosul crisis and its aftermath; and they continue to support pregnant women and women of reproductive age throughout Iraq as its facilities and communities rebuild.



Dignity kits with hygiene and safety supplies staged in Bamo, Iraq. © UNFPA Iraq 2017

Partners

Al-Mesalla Organization for Human Resources Development

Civil Development Organization

Dary Human Organization

Harikar NGO

International Medical Corps - Iraq (IMC)

Iraq Health Access Organization (IHAO)

Islamic Relief Worldwide

Ministry of Health

QANDIL Swedish Humanitarian Aid Organization

TAJDID Iraq Foundation for Economic Development

The United Iraqi Medical Society

United Nations Children's Fund (UNICEF)

Women and Health Alliance International (WAHA)

World Food Programme (WFP)

World Health Organization (WHO)

Zhian Health Organization

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United Nations Population Fund

605 Third Avenue
New York, NY 10158
Tel. +1 212 297 5000
www.unfpa.org

Cover photo: A young mother in Iraq holds her newborn at a UNFPA-supported health facility.

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