HIGHLIGHTS

- The humanitarian situation in Iraq is largely a legacy of the 2014-2017 conflict with the Islamic State of Iraq and Syria (ISIS) that resulted in millions of Iraqis displaced. Overall, 2.5 million people, including 1.1 million children, continue to need humanitarian assistance, including 960,000 people (422,400 children) with acute humanitarian needs.

- The COVID-19 pandemic, coupled with protracted and multiple displacements, has adversely impacted the access to basic services.

- UNICEF’s overall humanitarian strategy is to continue to support the remaining populations in humanitarian need while adopting longer-term durable solutions to meet the needs of children and families as they re-establish their lives in Iraq.

- UNICEF is requesting US$52.2 million in 2022 (21 per cent less than in 2021) to meet the critical and acute humanitarian needs of vulnerable children and families affected by a combination of humanitarian situations, including protracted crisis due to conflict, political instability and the COVID-19 situation.

KEY PLANNED TARGETS

- **738,000** children and women accessing health care

- **449,300** people accessing a sufficient quantity of safe water

- **447,786** children accessing educational services

- **350,000** people reached through messaging on prevention and access to services

Figures are provisional and subject to change upon finalization of the inter-agency planning documents.
The humanitarian situation in Iraq is largely a legacy of the 2014-2017 conflict with ISIS. As the conflict took hold in Iraq and ISIS gained control over territory, particularly in the west and southwest of Iraq, millions of Iraqis were displaced. As of 31 July 2021, there are 1.2 million internally displaced people (IDPs), while 4.9 million are returnees to 2,156 locations in eight governorates.\(^{11}\)

With the abrupt closure of the camps that started in October 2020, the number of in-camp individuals dropped from 256,861 in August 2020 to 182,000 in October 2021, while the out-of-camp IDPs reached over 1 million,\(^{12}\) including 370,000 living in self-settled and informal sites, often widely dispersed and with little access to services.\(^{13}\) Overall, 2.5 million people,\(^{14}\) including 1.1 million children\(^{15}\) and 5.6 per cent people with disabilities,\(^{10}\) continue to need humanitarian assistance. Approximately 960,000 people\(^{16}\) (422,400 children) are considered to be in acute humanitarian need.

In line with the 2022 Humanitarian Needs Overview, the overall number of people and children in need has decreased compared to 2021. This is due to the reduced humanitarian impact of COVID-19, as well as a rebalancing between humanitarian and development needs, taking into account the recent finalization and signing of the United Nations sustainable development cooperation framework.

An estimated 680,000 IDP and returnee children face obstacles accessing education, such as absence of civil documentation, lack of access to internet or connectivity devices; 660,000 children are in need of child protection services, while 920,000 women and children have needs related to gender-based violence.\(^{17}\) At present, more than 1.6 million people need support for WASH services. In addition, Iraq is anticipated to face severe water scarcity in 2022, including lower groundwater levels and reduced flows in the main rivers of Tigris and Euphrates, which could reach 50 per cent below crisis thresholds. An estimated 15 percent of the children in need (119,000) could be affected by water scarcity.

The COVID-19 pandemic, coupled with protracted and multiple displacements, has adversely impacted access to basic services\(^{16}\) and continues to affect the physical and mental well-being and capacity for resilience and recovery of women and children in Iraq, while also exposing them to significant protection concerns. The current situation, added to the existing social and gender norms, has exacerbated conditions for communities and young people, disrupting learning and skills development and participation in society, and fracturing social networks. COVID-19 containment measures have impacted the livelihoods of families, exposing children to increased risks of child labour and child marriage.

### STORY FROM THE FIELD

Nisreen Qasim, 24, is a young mother living in Sharya, a UNICEF-supported camp in Dohuk, a city in the north of Iraq which experienced dramatic displacement due the conflict with ISIS. Nisreen and others were displaced due to the hostilities experienced in the north of the country. Around 200,000 internally displaced persons live in formal camps and over 100,000 others live in informal sites throughout the country. Nisreen benefited from UNICEF’s response in the camps with mental health and psychosocial support, maternal and neonatal child health services, WASH, and positive behavior change messages.

Read more about this story here

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**SECTOR NEEDS**

- **1.7 million** people in need of health interventions\(^{19}\)
- **1.6 million** people require support for WASH services\(^{20}\)
- **920,000** children in need of protection services\(^{21}\)
- **680,000** children in need of education support\(^{22}\)
- **6.1 million** people are returning or displaced\(^{23}\)
UNICEF will continue reaching vulnerable IDP populations in humanitarian need, while working with the Government and partners to implement longer-term, durable solutions to support returnee families. Interventions will be balanced across the country, taking into account the geographic locations of IDPs and returnees across Iraq, including Kurdistan Region.

Access to relevant health and nutrition services, including antenatal and postnatal care, immunization, nutrition screening and counselling and management of malnutrition, will particularly target newborns, infants and young children, pregnant and lactating women and their partners. COVID-19 infection prevention and control, including vaccination, will continue.

Back-to-Learning campaigns will include delivery of blended learning, education supplies, safe school operation and life skills. Young boys and girls (aged 10 to 24 years) will have opportunities to develop a range of life skills, including digital, innovation, employability and entrepreneurial skills, and implement civic engagement initiatives.

UNICEF will strengthen child protection and gender-based violence (GBV) mechanisms, including case management referral systems and engagement with communities to ensure context-specific solutions. Access for children to relevant mental health and psychosocial support services and legal assistance will be enhanced. Intervention strategies will consciously engage boys and men to address social norms that underlie violence against children and women. UNICEF will develop the capacity of government counterparts on child protection and GBV competencies.

UNICEF will work with government and NGO partners to ensure continuation of WASH services to IDP populations while developing more cost-effective and sustainable solutions in community settings. This will include preparedness and response to water scarcity in affected locations.

UNICEF will scale up risk communication and community engagement to promote positive behavior change. Mechanisms to enhance accountability to affected populations (AAP) will be strengthened. Across all sectors, gender- and disability-inclusive programming will ensure that the special needs of girls and boys and people with disabilities are addressed.

UNICEF will improve efforts on prevention of sexual exploitation and abuse (PSEA), including referral of complaints, establishment and review of policies/guidance, and implementation of the PSEA action plan priorities for Iraq.

Emergency preparedness activities will focus particularly on addressing the impacts of water scarcity, disease outbreaks including cholera, as well as working with Government to enhance capacity for responding to other potential emergency events.

In line with the humanitarian-development-peace nexus approach, UNICEF will work with all relevant partners in ensuring that the humanitarian strategy is compatible and synergistic with the durable solutions components that have been included in the United Nations sustainable development cooperation framework, recently signed by the United Nations agencies and the Government of Iraq.

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2022 PROGRAMME TARGETS

**Nutrition**
- 369,000 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- 24,300 children aged 6 to 59 months receiving multiple micronutrient powders
- 243 children aged 0 to 59 months with severe acute malnutrition admitted for treatment

**Health**
- 332,100 children aged 6 to 59 months vaccinated against polio
- 738,000 children and women accessing primary health care in UNICEF-supported facilities
- 5,000 health care facility staff and community health workers trained in infection prevention and control

**Water, sanitation and hygiene**
- 449,300 people accessing a sufficient quantity of safe water for drinking and domestic needs
- 206,000 people use safe and appropriate sanitation facilities
- 160,000 people reached with critical WASH supplies

**Child protection, GBVIE and PSEA**
- 59,540 children and parents/caregivers accessing mental health and psychosocial support
- 81,334 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 81,334 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers

**Education**
- 447,786 children accessing formal or non-formal education, including early learning
- 160,000 children receiving individual learning materials
- 30,000 children/adolescents accessing skills development programmes

**Cross-sectoral (HCT, C4D, RCCE and AAP)**
- 350,000 people reached through messaging on prevention and access to services
- 50,000 people with access to established accountability mechanisms

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This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
FUNDING REQUIREMENTS IN 2022

UNICEF is requesting US$52.2 million in 2022 to meet the critical and acute humanitarian needs of vulnerable children and families affected by a combination of humanitarian situations, including protracted crisis due to conflict, political instability and the COVID-19 pandemic. As protection is central to UNICEF’s humanitarian action, the child protection response is the largest component of the country’s appeal at 41 per cent, followed by education and WASH.

The funding requirement for 2022 is 21 per cent lower than 2021, due to the reduction of the people and children in need. Further underfunding in 2022 will have a huge impact on programme delivery, especially in WASH and health, for which it would be difficult to find alternative funding sources. Without sufficient funding, UNICEF will be unable to construct water systems and services, consequently resulting in costly and risky service provision through water trucking. Without proper vaccination, over 350,000 children in Iraq will be at risk of easily preventable diseases, including measles and polio. Given the criticality of the situation, especially with vaccine hesitancy, health and mental health impacts of COVID-19, the opening of schools and economic hardship, continuing this support is crucial to ensure the well-being of the IDP and returnee communities.

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1. UNICEF’s public health and socioeconomic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional HAC appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fell under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.

2. Preliminary estimates, from the ongoing 2022 Humanitarian Needs Overview (HNO) process. HNO draft is expected in November 2021.

3. Preliminary estimates, from the ongoing 2022 Humanitarian Needs Overview (HNO) process. HNO draft is expected in November 2021.

4. Based on draft HNO estimates, as of 29 September 2021.

5. Including health, water, sanitation and education.

6. Preliminary estimates, as of 7 October 2021, from the ongoing 2022 Humanitarian Needs Overview (HNO) process. HNO draft is expected in November 2021.

7. Preliminary estimates, as of 7 October 2021, from the ongoing 2022 Humanitarian Needs Overview (HNO) process. HNO draft is expected in November 2021.

8. Calculated using the highest coverage programme target of 332,100 displaced and returnee children under 5 years to be reached with polio vaccination; 251,608 adults accessing sufficient quantity of safe water for drinking and domestic needs (56 per cent of 449,300 people); and 447,786 primary school-aged children to be reached with formal and non-formal education. An estimated 51 per cent of all people to be reached will be women and girls; 5.6 per cent of people to be reached are with disabilities (based on National Disability Survey in Iraq (2016)). UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

9. Calculated using the highest coverage programme target of 332,100 children under 5 years to be reached with polio vaccination and 447,786 primary school-aged children to be reached with formal and non-formal education. An estimated 51 per cent of all people to be reached will be women and girls.


11. IOM Displacement Tracking Matrix.

12. Ibid.

13. The number of IDPs in secondary displacement has increased, especially in the Sinjar and Ba‘aj area of Nineveh, Anbar and center of Kirkuk.


15. Ibid.

16. Based on draft HNO estimates, as of 29 September 2021.

17. Draft HNO estimates, as of 29 September 2021.

18. Including health, water, sanitation and education.


21. Including 660,000 IDP and returnee children in need of child protection services. Based on draft HNO estimates, as of 29 September 2021.

22. Draft HNO estimates, as of 29 September 2021.

23. Overall, 81 per cent of the 6 million people displaced during the ISIS crisis have returned. (Preliminary HNO results as of 6 October 2021). The PIN dropped from 4.1 million in 2021 to 2.5 million as of October 2021.

24. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.

25. Calculated as 15 per cent of total population in need (mothers of each annual cohort of 3 per cent) in camps, outside camps and returnees (2.5 million).

26. The in-camp population of 180,000 (based on HNO estimates as of 6 October 2021) is assumed to include 24,300 children aged 6 to 59 months (at 3 per cent per annual cohort). 1 per cent are assumed to suffer from SAM in a year = 243.

27. The in-camp population of 180,000 (based on HNO estimates as of 6 October 2021) is assumed to include 24,300 children aged 6 to 59 months (3 per cent per annual cohort). 1 per cent are assumed to suffer from SAM in a year = 243.

28. The high figure in 2021 included proposed national campaigns that will not be conducted in 2022. There will instead be multi-antigen campaigns in 106 districts (out of 150) against measles and polio that will include around 30 districts in the humanitarian context. The budget for these campaigns is around US$3.2 million. Estimated budget for 30 districts is therefore around US$1,000,000.

29. The target includes 54,000 in-camps children under 5 IDPs and their mothers, 165,000 non-camp children under 5 and their mothers in addition to 519,000 returnee children under 5 and their mothers.

30. Including 2,000 females.

31. Provide access to safe water for affected IDPs in camps, returnees and high-risk communities for waterborne diseases. The assistance would secure good access to sustainable, equitable, affordable safe drinking water and free from e-coil/coliciform contamination. Areas of IDPs suffered from protracted crisis due to conflict in Iraq, instability in their areas of origin, political and economic instability and the COVID-19 pandemic.

32. Provide access to safe sanitation for affected IDPs in camps, returnees and high-risk communities for waterborne diseases.

33. Health facilities in Kirkuk (Hawija, and Kirkuk) and Anbar have a direct discharge of untreated wastewater to the rivers; solid waste in Dibis and Makhmur is being dumped without treatment due to the absence of treating utilities, affecting the environment.

34. Target established based on estimates of children who may need services with high levels of contact, assumed to be children in acute need. The sub-cluster does not have an intervention target on this. UNICEF target assumes that the establishment of mechanism should involve awareness and therefore, all target for awareness intervention is considered.

35. 40 per cent girls.

36. Despite the decrease of the number of People in Need (PIN) and Children in Need (CIN), CAD is foreseeing an increased funding requirement to deliver a quality programme to support IDPs and returnees. This is to support transition from emergency messaging and information sharing- for both COVID-19 and emergency response- towards community engagement, mobilization and social behavior change initiatives. As a response to the new situation, and to adjust interventions to ensure durable solutions, CAD is aiming at co-designing of more community-based interventions to enhance efficacy, trust and ownership; this would require more technical capacity building, engagement with specialized partners and community members, and also application of new approaches. Additionally, CAD is planning to establish/improve mechanisms and system to enhance AAP, which would also entail new tools, guidelines and capacity building initiatives.