



EUROPEAN COMMISSION

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COMMISSION DECISION

of

**on the approval and financing of a Global Plan for humanitarian Actions in Iraq and
neighbouring countries from the general budget of the European Union**

(ECHO/-ME/BUD/2010/02000)

COMMISSION DECISION

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(ECHO/-ME/BUD/2010/02000)

THE EUROPEAN COMMISSION,

Having regard to the Treaty on the Functioning of the European Union,

Having regard to Council Regulation (EC) No.1257/96 of 20 June 1996 concerning humanitarian aid ¹, and in particular Article 2, and Article 15(3) thereof;

Whereas:

- (1) The level of violence in Iraq is on a decreasing trend since 2007 and the political, economic and social stabilization of the country has started. However this level of violence remains still too high for the majority of hundreds of thousands of Internally Displaced People (IDPs) and refugees to return in great numbers to their areas of origin;
- (2) In addition, the basic needs of the IDPs and the most vulnerable population in Iraq remain high in terms of protection and access to basic services;
- (3) For Iraqi refugees living in the neighbouring countries mainly Syria and Jordan, the possibility of large scale resettlement to third countries is unlikely to happen, and the perspective for their integration in the neighbouring countries appears remote for the time being;
- (4) Therefore the resources of the poorest segments of these refugees are being depleted and this population is more than ever in needs of basic support to survive and cope with the trauma of displacement;
- (5) As the scale and complexity of the humanitarian crisis is such that it is likely to continue, it is necessary to adopt a Global Plan to provide a coherent framework for the implementation of humanitarian Actions;
- (6) To reach populations in need, humanitarian aid should be channelled through Non-Governmental Organisations (NGOs) and International Organisations including

¹ OJ L 163, 2.7.1996, p. 1.

United Nations (UN) agencies. Therefore the European Commission should implement the budget by direct centralized management or by joint management;

- (7) An assessment of the humanitarian situation leads to the conclusion that humanitarian aid Actions should be financed by the European Union for a period of 18 months;
- (8) For the purposes of this Global Plan the neighbouring countries involved are Syria, Jordan, Lebanon, Turkey, Egypt and Iran;
- (9) It is estimated that an amount of EUR 18,000,000, of which EUR 16,000,000 from budget article 23 02 01 and EUR 2,000,000 from article 23 02 02 of the general budget of the European Union, is necessary to provide humanitarian assistance to the most vulnerable victims of the Iraqi crisis, including Internally Displaced People (IDPs) and refugees, taking into account the available budget, other donors' contributions and other factors. Although as a general rule Actions funded by this Global Plan should be co-financed, the Authorising Officer, in accordance with Article 253 of the Implementing Rules of the Financial Regulation, may agree to the full financing of Actions;
- (10) Due to the rapidly evolving situation in the field and the nature of the Actions to be funded under this Global Plan, it is necessary to establish a contingency reserve in order to meet unforeseen events;
- (11) The present Decision constitutes a financing Decision within the meaning of Article 75 of the Financial Regulation (EC, Euratom) No 1605/2002², Article 90 of the detailed rules for the implementation of the Financial Regulation determined by Regulation (EC, Euratom) No 2342/2002³, and Article 15 of the internal rules on the implementation of the general budget of the European Union⁴;
- (12) In accordance with Article 17(2) of Council Regulation (EC) No.1257/96 of 20 June 1996, the Humanitarian Aid Committee gave a favourable opinion on 24/03/2010.

HAS DECIDED AS FOLLOWS:

Article 1

1. In accordance with the objectives and general principles of humanitarian aid, the Commission hereby approves a 2010 Global Plan for the financing of humanitarian Actions in the Iraqi crisis for an amount of EUR 18,000,000, of which EUR 16,000,000 from budget article 23 02 01 and EUR 2,000,000 from budget article 23 02 02 of the 2010 general budget of the European Union.
2. In accordance with Article 2 of Council Regulation No.1257/96, the principal objective of this Decision is to provide the necessary assistance and relief to vulnerable populations affected by the Iraqi crisis. The humanitarian Actions shall be implemented in the pursuance of the following specific objectives:

² OJ L 248, 16.9.2002, p.1.

³ OJ L 357, 31.12.2002, , p.1.

⁴ Commission Decision of 5.3.2008, C/2008/773

- To provide protection and relief to vulnerable populations, including IDPs and returnees, affected by the crisis in Iraq.

A total of EUR 7,000,000 from budget article 23 02 01 is allocated to this specific objective.

- To provide protection and relief to Iraqi refugees in neighbouring countries.

A total of EUR 8,000,000 from budget article 23 02 01 is allocated to this specific objective.

- To ensure adequate food availability through the provision of food assistance to the Iraqi refugees in Syria.

A total of EUR 2,000,000 from budget article 23 02 02 is allocated to this specific objective.

A total of EUR 1,000,000 from budget article 23 02 01 is allocated to the contingency reserve.

3. The Authorising Officer may decide on non-substantial changes in accordance with Article 90.4 of the Implementing Rules of the Financial Regulation. Accordingly, without prejudice to the use of the contingency reserve, when required by the changing circumstances, resources may be reallocated between specific objectives 1 and 2, where 1 and 2 are funded from the same budget article up to a maximum of 20% of the total amount of the Financing Decision or up to a total of EUR 3,000,000, whichever is reached first.

Article 2

1. The period for the implementation of the Actions financed under this Global Plan shall start on 1 March 2010 and shall run for 18 months. Eligible expenditure shall be committed during the implementing period of the Decision.
2. If the implementation of individual Actions is suspended owing to force majeure or other exceptional circumstances, the period of suspension shall not be taken into account in the implementing period of the Global Plan in respect of the Action suspended.
3. In accordance with the contractual provisions ruling the Agreements financed under this Global Plan, the Commission may consider eligible those costs arising and incurred after the end of the implementing period of the Action which are necessary for its winding-up.

Article 3

1. As a general rule, Actions funded by this Global Plan should be co-financed.

The Authorising Officer, in accordance with Article 253 of the Implementing Rules, may agree to the full financing of Actions when this will be necessary to achieve the

objectives of this Global Plan and with due consideration to the nature of the activities to be undertaken, the availability of other donors and other relevant operational circumstances.

2. Actions supported by this Global Plan will be implemented either by non-profit-making organisations which fulfil the eligibility and suitability criteria established in Article 7 of Council Regulation (EC) No. 1257/96, or International organisations.
3. The Commission shall implement the budget:
 - * either by direct centralised management, with Non-governmental Organisations;
 - * or by joint management with international organisations that are signatories to the Framework Partnership Agreements (FPA) or the EU/UN Financial Administrative Framework Agreement (FAFA) and which were subject to the four pillar assessment in line with Article 53d of the Financial Regulation.

Article 4

This Decision will take effect on the date of its adoption.

Done at Brussels,

For the Commission
Member of the Commission



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HUMANITARIAN AID - ECHO

**Supporting document to the Commission Decision
on the approval and financing of a Global Plan for
humanitarian Actions in Iraq and neighbouring countries
from the general budget of the European Union**

ECHO/-ME/BUD/2010/02000

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1. EXECUTIVE SUMMARY

Although Iraq remains a very dangerous country where civilians are killed on a daily basis, no massive displacement of population took place these last two years and the country has now entered a phase of early recovery. While pockets of vulnerability exist, and there remains the potential for flashpoints to create humanitarian crises, the life-threatening emergencies and massive population movements seen in 2006 and 2007 are reducing in scale and severity. However, the security and humanitarian environment remains particularly challenging in some regions of the country, notably in the so-called "disputed areas", and basic services such as water, sewage and electrical power remain insufficient due to destroyed or badly-maintained infrastructure.

In neighbouring countries, mainly Syria and Jordan, hundreds of thousands of Iraqi refugees, settled mainly in urban centres, notably Damascus and Amman are still living in difficult conditions. A relatively slow pace of resettlement to third countries, despite progress last year, and limited return prospects for the time being, entail that the refugee situation in Syria and Jordan, is likely to become protracted. Despite the hospitality of the host countries which provide Iraqi refugees with access to public health and education services, more than three years of exile and the formal prohibition to work depleted the resources that many of the refugees managed to bring with them.

Therefore DG ECHO¹ will continue its substantial effort towards the most vulnerable population affected by the Iraqi crisis, both inside Iraq and in the neighbouring countries hosting the majority of the Iraqi refugees.

The presence of massive rehabilitation programmes in a potentially rich state will allow ECHO to gradually phase down its presence in Iraq should the security situation does not deteriorate again. Protection of civilians, rehabilitation of basic water and sanitation facilities as prevention to water related epidemics, targeted emergency interventions on specific pockets of humanitarian needs, will constitute the bulk of DG ECHO's intervention in favour of the most vulnerable populations in Iraq.

The decreasing number of UNHCR-registered refugees allows DG ECHO to envisage the phasing down of its assistance in the neighbouring countries hosting a relatively limited number of refugees (Lebanon, Turkey). However the current instability in Iraq does not leave much hope for massive returns in the short term from refugees living in Syria and Jordan. Therefore exit strategy perspectives for DG ECHO remain limited for the time being, especially in Syria which hosts the bulk of the Iraqi refugees. In these countries, protection, including refugee registration, food and non-food assistance, access to health and psychosocial care will define the core of DG ECHO's action for the Iraqi refugees, mainly in Syria and Jordan..

Within Iraq, the major obvious constraint relates to the security conditions. In the neighbouring countries, the complex regional dynamics between Iraq and its neighbours, as well as the world economic crisis, may lead to push factors for refugees to return to Iraq.

¹ Directorate-General for humanitarian aid - ECHO

2. CONTEXT AND SITUATION

2.1. General Context

Since the 2003 war, the Republic of Iraq has been faced with a dire security situation characterized by sectarian violence and an ongoing asymmetric warfare, particularly after the attack on the Holy Shrine at Samara in February 2006. Iraq remains a very dangerous country where civilians are killed on a daily basis. According to the International Non-Governmental Organisation (INGO) Iraq Body Count, between 95,000 and 104,000 civilians have been killed since 2003².

However since the middle of 2007 with the military surge of the Multi-National Force in Iraq (MNF-I)³ against insurgents and militias (Sadr city in April-May 2008, Dyala governorate in July-August of the same year), violent incidents in Iraq have fallen. Last year, the annual civilian death toll from violence was the lowest since the 2003 invasion, at 4,644 (2008: 9,217), and had the lowest recorded monthly toll (205 in November). However, for the first time since 2006 there has been no significant within-year decline, and the second half of 2009 saw about as many civilian deaths as the first. This may indicate that the situation is no longer improving. The most notable reduction in violence took place in Baghdad. Most of these reductions have been attributed to declining inter communal violence⁴. However, armed opposition groups still have the capacity to launch attacks and, in particular, continue to target the Iraqi security forces and prominent individuals. The security environment remains particularly challenging in Mosul (Ninewa governorate) and Dyala governorate, and other areas among the disputed southern boundary of the Kurdistan region. Mosul (756 recorded deaths in an estimated population of 1.8 million) has in 2009 become significantly more deadly than Baghdad (est. pop. 6.5 million, 1,545 deaths), despite none of the year's largest-scale bombings occurring in Mosul. Additionally, Mosul's absolute number of violent incidents deadly to civilians in 2009 (556) far exceeded Baghdad's (301)⁵.

The relative improvement of the security situation is leading to the progressive transfer of the security powers from the USF-I to the Iraqi forces. Since last year, the Iraqi forces have now taken over security responsibility from the USF-I in most of the governorates. In addition, the agreement between the United States (US) and the Government of Iraq (GoI) on the withdrawal of US forces from Iraq by the end of 2011 at the latest (Status of Forces Agreement – SOFA) entered into force in 2009. Iraq formally took over responsibility for the International Zone in Baghdad in January 2009 as the MNF-I mandate expired.

Despite these positive developments, basic services such as water, sewage, electrical power and access to quality health care remain insufficient due to destroyed or badly-maintained infrastructure. Unemployment and poverty levels are still high, and much of the population remains reliant on government food rations to cover immediate needs, although many families entitled to benefit from the public food distribution system are unable to do so for various administrative reasons.

² Iraq Body Count, 27 January 2010 (www.iraqbodycount.org).

³ Which, since the departure of the remaining troops of the other countries part of the Coalition, has been renamed USF-I (United States Forces in Iraq).

⁴ Iraq Body Count.

⁵ Iraq Body Count.

2.2. Current Situation

Thanks to the decrease of violence, there were no massive displacements of population within Iraq these last two years. The occurrence of new internal displacements has decreased from the level of 50,000 families newly displaced during 2006 to limited and usually short-term displacement⁶. On the contrary, while an estimated 1.55 million individuals remain displaced in Iraq since 2006, returns continue, notably in Baghdad despite the fact that many houses have been destroyed and infrastructure is damaged⁷. The authorities encourage this return, offering financial compensation, in the range of IQD 500,000 (or EUR 310)⁸ to IDP families returning in another directorate, and IQD 250,000 (EUR 155) for families returning within the same directorate. According to United Nations High Commission for Refugees (UNHCR) statistics, 167,740 IDPs (28,990 families) returned home in 2009, a slightly lower number than in 2008: 195,240 IDPs (32,930 families)⁹. Since 2003, nearly 580,000 IDPs returned home. In 2010, IDP returns are expected to continue should the security context continue improving.

Given the fragile but positive stabilisation of the situation in Iraq these last two years, United Nations' agencies have not launched a Consolidated Appeal for Iraq but established nevertheless an Iraq Humanitarian Action Plan (IHAP) worth USD 457.9 million, including USD 264.3 million for UNHCR operations in Iraq alone. Acknowledging that the situation has improved, the IHAP considers that Iraq has moved from an emergency context into one that can be characterised as a crisis of human capacity. Therefore the first ever Common Country assessment/United Nations Development Assistance Framework (CCA/UNDAF) for Iraq is currently under preparation, with the aim of having development assistance implemented from 2011 onwards. The IHAP scenario for 2010 is based on potential political, security and humanitarian development, with persisting problems with infrastructure.

In neighbouring countries, hundreds of thousands of Iraqi refugees, most of them living in urban centres, are still living in difficult conditions. Although the authorities in Syria and Jordan, the two countries hosting the majority of refugees, estimate the number of 1.1 to 1.5 million refugees and 500,000 respectively, the number of refugees registered by UNHCR are much lower: As of the end of September 2009, the total number of registered refugees in the region was 294,148, to compare with 305,681 persons as of the end of 2008, with the following breakdown concerning the main hosting countries: Syria 215,429 persons (224,343 at the end of 2009); Jordan 46,745 (52,65); Lebanon 10,442 (10,208); Egypt 9,126 (10,182); Turkey 7,207 (8,292); Iran 4,172 (4,943). It should be reminded that in the 2008 appeal, UNHCR was planning for approximately 384,000 registered refugees by the end of the year. It is expected that this decreasing trend in registration will continue in 2010 and that, even if there is still an unknown number of unregistered refugees, the caseload reached its peak at the end of 2008¹⁰.

In parallel, resettlement to third countries continued to increase since 2008. 18,000 people have been resettled in 2008, mainly in the United States, and an equal number has been resettled for the first nine months of 2009.

⁶ 2010 Iraq Humanitarian Action Plan, 28 December 2009.

⁷ IOM emergency needs assessments, monthly report, 1 January 2009.

⁸ 1 EUR = 1615 IQD in January 2009.

⁹ UNHCR Iraq operation, Monthly statistical update on return-December 2009.

¹⁰ UN Regional Response Plan for Iraqi Refugees, 13 January 2009.

Also returns back to Iraq occur from neighbouring countries on a fairly limited scale so far, although the exact figure is not known. Proxy indicators¹¹ suggest that a significant number of refugees left the host countries, mainly from Syria. UNHCR continued policy, supported by donors, is not to encourage returns to Iraq given the security situation but to facilitate spontaneous individual requests. UNHCR assisted 2,400 persons to return in 2009 (3,751 in 2008) including 1,000 from Iran with cash assistance (up to USD 500) and travel allowance. In 2009, the official number of refugee returns was 37,090 according to UNHCR statistics (25,370 in 2008).

Although needs assessments are still limited and incomplete as in depth assessments are not authorised by the main hosting countries, Syria and Jordan, feedback from DG ECHO partners shows that, despite the hospitality of these host countries which provide Iraqi refugees with access to public health and education services, more than three years of exile and the formal prohibition to work depleted the resources that many of the refugees managed to bring with them. In addition, refugees faced sharply rising prices for basic commodities, fuel and rent costs in 2008 and have since then more and more difficulties to cope with this protracted situation.

3. IDENTIFICATION AND ASSESSMENT OF HUMANITARIAN NEEDS

This Global Plan targets the most vulnerable population affected by the conflict and potential natural disasters such as drought, which is recurrent in Iraq these last years, and the Iraqi refugees living in neighbouring countries, notably Syria and Jordan, Lebanon and Turkey.

3.1 Vulnerable population inside Iraq

Tens of thousands of people held in custody by the Iraqi authorities and the USF-I are in need of **protection**, and many families are still without news of relatives who went missing during past conflicts or since the start of the current hostilities¹². Iraqi and USF-I authorities held 43,600 detainees as of June 2009 (50,595 as of June 2008)¹³. According to the United Nations' Mission in Iraq (UNAMI), many detainees have been deprived of their liberty for months or even years, often under precarious physical conditions, without access to defence counsel, or without being formally charged with a crime or produced before a judge. Continuous allegations of widespread torture and ill-treatment of inmates are of particular concern. Slow bureaucratic procedures, insufficient resources, degraded infrastructure and lack of effective accountability measures result in inordinate delays in processing detainees' cases. The International Committee of the Red Cross (ICRC) staff is visiting detainees held by the MNF-I and visit some of the places of detention under the responsibility of the Iraqi and Kurdish authorities. They are in continuous dialogue to gain access to all places of detention, with some success since 2008.

There are other communities in needs of protection inside Iraq, either because they are trapped in conflict affected areas, because they have been displaced due to the conflict, or

¹¹ Number of school children enrolled in Syria dropped from 49,000 for the 2007/2008 school year to 33,700 in 2008/2009 and 26,000 in 2009/2010 (source: Ministry of Education); also in Syria, no-show rates in food distributions and cash assistance are a constant feature.

¹² Source: Iraq, ICRC Emergency Appeal 2009.

¹³ UNAMI Human Rights Report (January – June 2009).

because they belong to religious minorities such as Christians (in Baghdad, in Mosul in October 2008). Some lack access to basic services such as health, water and sanitation, and education. The level of vulnerability varies among the population, and the humanitarian actors need to identify the most vulnerable communities in order to address protection problems. In this context, special attention will have to be paid to the caseload of Palestinian refugees (around 10,000), especially those in the three remote camps in Syria and Iraq.

Water and sanitation issues are huge in Iraq. According to ICRC, 40% of the Iraqi households, mainly in the countryside and suburbs, are not connected to a water network. They must either buy water (USD 0.5 for 10 litres) or collect it from rivers and wells which are often polluted. People who do have piped water regularly experience problems owing to a chronic lack of maintenance and innumerable illegal connections to the network. Furthermore many Iraqis have to live with the health hazards of uncollected household waste and untreated sewage¹⁴. As a result, many people contract water-borne diseases, such as cholera. Cholera outbreaks erupted in 2007 and 2008, but there was none in 2009. However, since cholera is endemic in Iraq, cases are reported sporadically. The prevention and response mechanisms of the GoI and its partners are believed to have improved since the outbreak of 2008 but the authorities and the specialised international organisations need to remain vigilant given the poor state of the water facilities.

Levels of violence in Iraq vary greatly across the country. The capacity of the local authorities to cover basic services is hindered by the violence, notably in the "disputed areas" south of Kurdish Regional Government (KRG), which do not allow always the authorities to function in a normal way. As a result, the lack of access to basic services such as water, sanitation, vaccination and primary health care can create **emergencies** that need a rapid intervention. The authorities are not yet fully capable of responding in a satisfactory way all over the country, therefore emergency response from humanitarian actors is still necessary. The example of the measles epidemic last year, where United Nations Children's Fund (UNICEF) rapid and well targeted intervention had a significant impact, serves as a reminder for the fragility of the situation. This situation could easily be reversed this year, therefore emergency reactions will remain relevant.

3.2 Iraqi refugees in neighbouring countries

In the absence of a census on the exact numbers of Iraqi refugees in neighbouring countries, the only reliable data are the ones available on the refugees registered by UNHCR. Also, in the absence of extensive needs assessments, the UNHCR database of registered refugees provides the only available information on the needs of the refugees. These persons have regular access to basic services by UNHCR and its implementing partners, including the possibility for resettlement for the most complicated cases.

Detention and refoulement cases are relatively rare, with the exception of Lebanon where several hundred Iraqis can be in detention at any given time, facing deportation due to lack of residence permits. UNHCR follow-up by **protection** officers is essential in order to prevent deportation and imprisonment. Sexual violence and human trafficking/prostitution are other elements of the protection crisis that the refugees from

¹⁴Source: ICRC.

Iraq are faced with. In Syria alone, UNHCR has identified 700 survivors of sexual gender based violence in 2008 during the registration process, and is following women and adolescent girls in prison charged because of their involvement in prostitution acts and is supporting "safe houses" to accommodate women, mainly victims of sexual violence and prostitution.

Iraqi refugees are using the **health** services available to the local population. In the case of the public health sector, they add an additional burden on the already strained services. According to UNHCR, there is a relatively high percentage of refugees that have medical problems and disabilities¹⁵.

The access to health care varies from country to country. In Syria, the main choice for affordable primary health care is through the Syrian Arab Red Crescent clinics, with over 520,000 consultations in 2008. In Jordan, the Ministry of Health provides free preventive health care to Iraqis and primary health care at a cost equal to the rate for non-insured Jordanians. In Lebanon, refugees must pay the full price of health care, at the same rates as the local population. Access to secondary and tertiary health care is problematic due to the high cost and limited available services. UNHCR, UNICEF and the World health Organization (WHO) are supporting institutional capacity for subsidised health care and referrals for vulnerable persons in areas with high concentrations of Iraqi refugees, thereby reducing the strain on institutional capacity.

As a result of residence restrictions, the dire economic situation and the effects of traumatic events experienced in Iraq, **psychological instability** has not abated. The mental health needs of Iraqi refugees frequently comes to the attention of aid workers working in registration, medical service provision, children's programmes and parent support groups. Most Iraqi refugees have received no support or specialized interventions to assist them with their psychological well being due to the stigma associated with seeking support and counselling, and because they live in areas with few specialist psychosocial services and their mental health problems remain untreated. Such neglect may lead to negative long-term consequences such as irreversible individual and social pathologies.

In Jordan, a study¹⁶ indicated that the majority of the 125 families interviewed still struggled to cope psychosocially with their situation. The most prevalent symptoms among the 137 adults and children cared for by the NGO Terre Des Hommes through April 2009 are fear (69%), nervousness (64%) and anxiety (68%) for adults and children. Finally, there is an institutional shortage of mental health and psychosocial services in Jordan¹⁷.

In Syria, of the 506 Iraqis cared for by psychologists in a DG ECHO funded project, approximately 36% are direct victims of kidnapping, torture and/or direct violence, 35% have lost an immediate family member during the war, 18% reported abuse by a member of their own family and 64% of reported social integration problems..

For Iraqi refugees in neighbouring countries, **food** is one of the main expenses for the households, following the rent of a residence. According to the Joint Assessment Mission (JAM) of June 2009 on the current WFP Emergency Operation (EMOP) targeting the

¹⁵ In Syria, 19.2% have a medical problem and 2.4% disabilities (CAP 2009).

¹⁶ IOM "Assessment of Psychosocial Needs of Iraqis Displaced in Jordan and Lebanon", February 2008.

¹⁷ Ibid.

Iraqi refugees in Syria where the bulk of refugees leave, food security of these refugees is mostly related to inadequate economic access, as most of them live in urban areas, where markets are well supplied over the entire year. Although the JAM was not accompanied by a full-fledged food security assessment, the assessment has revealed the deteriorating economic situation of refugee families due to the continuous depletion of resources and savings and to reduced remittances. About 23% of the families can still rely on savings; pensions and official allowances from Iraq represent the main source of income for only 10% of the surveyed population. Households with borderline or poor food consumption are often one-person households, households with a handicapped member or households composed of males only. In this category, the share of households that have been in Syria for longer time is greater, these families are now often in debt for rent payment. More than 60% of these households reduce the number of meals per day, decrease expenditures on health care, borrow food or rely on money lenders.

4. PROPOSED DG ECHO STRATEGY

4.1. Coherence with DG ECHO's overall strategic priorities

In 2010, DG will continue to intervene in the areas of greatest humanitarian needs. Iraq is in the middle category for the vulnerability index and in the highest rank for the crisis index of the global needs assessment (GNA), which justifies the substantial amount earmarked by DG ECHO for the victims of this Iraqi crisis.

In line with DG ECHO 2010 strategy priorities and in line with the European Consensus on Humanitarian aid adopted end of 2007¹⁸, the issue of respect of international humanitarian law will continue to be an important component of DG ECHO presence in Iraq, as the conflict had repercussions on the humanitarian space, access to beneficiaries and on the safety of humanitarian workers.

Having a gender sensitive approach also remains particularly important in the Iraqi context, notably for refugees. Women will continue to be key beneficiaries of the assistance provided, notably in terms of protection.

Also, Iraqi children appear as particularly vulnerable in Iraq and among the Iraqi refugees. DG ECHO funded projects will ensure they fully benefit from the assistance provided in line with DG ECHO policy, particularly in the field of protection and psychological support.

4.2. Impact of previous humanitarian response

In Iraq, given the presence of large development programmes since 2004 and the significant government budget offered by oil revenues¹⁹, DG ECHO focused its support since 2007 to respond to immediate emergency needs of the most vulnerable population, such as the measles outbreak of last year which allowed the immunization of more than 650,000 children, immediate support to hospital emergency rooms treating victims of mass casualty explosions and on protection activities such as visits to detainees.

¹⁸ OJ 2008/C25/01 of 30.01.2008

¹⁹ The 2010 budget is based on an estimated revenue of EUR 38.2 billion.

During the third quarter of 2009, DG ECHO's interventions in Iraq have been subject to an external evaluation²⁰. This evaluation concluded that in Iraq, the assistance has been globally appropriate, that protection activities are still needed, and water rehabilitation is effective if well targeted. In that context, ICRC, the main partner of DG ECHO in Iraq, appears as a major aid actor through its long-standing presence and capacity of dialogue with all parties, as well as its working method (direct control of the operations, no armed escort). The report concludes also that the changing framework in Iraq is decreasing the humanitarian role of other partners.

For the Iraqi refugees in neighbouring countries, DG ECHO assistance started after the massive population displacements which followed the bombing of the Samara mosque in 2006. All components of this support, which focuses on protection and registration, distribution of non-food items, health care, psychosocial support and food aid, were found to be appropriate, although sometimes at varying levels, which was mostly due to local constraints. Legal protection and registration efforts were seen as the most crucial aspect of the overall protection framework for the refugees while facing an overall lack of legal framework and, in Syria, operating constraints. Support to psycho-social assistance was seen by the evaluators as particularly important as professional care by psychologists has effectively reduced stress and improved social functioning in almost 2/3 of the cases. Needs in Syria are however much larger than in Jordan, with less resources – e.g. no outreach was allowed as yet in the psychological sector.

4.3. Coordination with activities of other donors and institutions

Coordination is very good and essential with the United States as they are the main donor by far to the humanitarian response to the Iraqi crisis. They contributed to 59% of the 2009 CAP (Consolidated Appeal Process), with nearly USD 333 million as of 19 January 2010. The external evaluation's report on DG ECHO's action in response to the Iraqi crisis highlights that with many projects being part-funded, the assistance to refugees was integrated in the wider strategy developed in consultation between UN agencies, international organisations and donors. The co-financing of projects and implementing organizations with other major donors, especially with the US, assures a high level of coordination. Coordination with Member States takes place regularly in Damascus and Amman, while it is more erratic in Baghdad given the difficulty for DG ECHO experts to attend meeting there. However the EU Delegation in Baghdad plays a very useful role of information gathering and sharing with DG ECHO.

In Syria and Jordan, there is a good complementary between DG ECHO's operations providing direct support to the refugees and DG RELEX/AIDCO support programmes to the hosting countries' authorities aiming at helping them to cope with this influx. This support is mainly channelled through the existing public state systems in an effort to strengthen existing structures in the host countries. The focus of this support has been the provision of basic services. In Syria the education sector is the main target (EUR 14 million), but the public health service (EUR 9 million) and the waste management and disposal sector (EUR 10 million) are also currently supported. In Jordan, a EUR 26.68 million programme was launched in 2007 in support of the education sector and a EUR 12 million programme focusing on managing scarce water resources with implementation led by the country's Water Authority to get underway shortly.

²⁰ Evaluation of DG ECHO's action in response to the Iraqi crisis, final report, February 2010.

For Iraq, most EU reconstruction assistance between 2003 and 2007 was channelled through the International Reconstruction Fund Facility for Iraq (IRFFI) managed by the UN and the World Bank. Since then, reflecting the increasing capacity for dialogue and leadership of the GoI in the reconstruction efforts, DG RELEX/AIDCO moved from yearly planning to medium-term programming and bilateral implementation. The 2009-2010 integrated assistance package will be followed by the first Strategy Paper for Iraq for 2011-2013 (now under preparation). The main focus since 2008 has been on reinforcing the capacity of the Iraqi institutions. The 2009 part of the 2009-2010 Assistance Programme for Iraq financed under the Development Cooperation Instrument (DCI) for an amount of EUR 42.038 million was approved last December. Two components of the programme centre on the education sector (EUR 27 million). Additional support will be provided for strengthening the electoral process (EUR 8.038 million) and Human Rights (EUR 7 million).

4.4. Risk assessment and assumptions

Within Iraq, the major obvious constraint relates to the security conditions. In 2008 and 2009, the decreased level of violence allowed a certain widening of the access to the population in need. The number of UN missions to Iraq is gradually increasing and the percentage of the International Committee of the Red Cross (ICRC) remote-control operation is gradually reducing from a third in 2007 to 15-20% in 2008, with a further reduction to 0-5% in 2009. Remote management in ICRC modus operandi is now becoming used only as a plan B in case of sudden outburst of localised violence.

However the still high level of violence and the volatility of the situation lead to a fragile situation although the security conditions vary from a region to another: It is generally rare for United Nations expatriates to visit the centre of the country outside the Green Zone and other protected areas of Baghdad. Visits to the South of the country can only be made by foreigners on a rapid in-and-out basis but some International Organisations have been working with foreigners on a longer-term basis. In the Iraqi Kurdistan Region, on the other hand, security conditions are much better and humanitarian projects can be carried out, but this is the area of the country where development operations need to take over from humanitarian projects. However, the unresolved constitutional matters on the final status of Kirkuk and the rest of the disputed areas, the passing of a revenue-sharing oil law, and the attacks from Turkey and Iran on Kurdish armed opposition, present a high risk of also destabilising the Iraqi Kurdistan Region.

Due to these severe access and security constraints, Iraq has still to be considered a high-risk area of intervention for DG ECHO. In order to minimize the risk involved in providing a response to the most urgent humanitarian needs, the Commission's humanitarian aid in Iraq these last three years was mainly channelled through the ICRC, considered to be the most reliable partner for such a difficult context.

In the region, although neighbouring countries, which at the exception of Turkey, have not signed the 1951 Refugee Convention²¹, have been generally tolerant towards the Iraqis, during the last three years, they have tightened their immigration regimes and have made an effort to reduce the influx of Iraqis seeking asylum. The Iraqis are residing

²¹ Turkey has acceded to the 1951 Convention, relating to the Status of Refugees and its 1967 Protocol but maintains geographic limitation. Non-European refugees are eligible only for 'temporary asylum seeker status'. Those who register for temporary status are protected from *refoulement*.

in neighbouring countries under specific and time-specific "residence regimes", and many among them are currently without a regularised residence status. Although the neighbouring countries have reassured the international community to tolerate Iraqis as long as they need to stay in exile, the complex regional dynamics between Iraq and its neighbours, notably Syria, as well as the world economic crisis and a possible new food crisis like in 2008, may lead to push factors for refugees to return to Iraq. Furthermore, the respective host governments may not necessarily approve proposed humanitarian aid projects and strategies, and/or suspend projects.

4.5. DG ECHO Strategy

Principal objective: To provide the necessary assistance and relief to vulnerable populations affected by the Iraqi crisis.

Specific objective 1: To provide protection and relief to vulnerable populations, including IDPs and returnees, affected by the crisis in Iraq.

Protection

Support to protection assistance in accordance with its mandate for vulnerable civilians affected by the crisis: visits and monitoring missions; access to the Red Cross messaging services; promotion of International Humanitarian Law and other relative international standards

Water and Sanitation:

Assistance to communities with a high risk of water-related epidemics, through rehabilitation and/or construction of basic infrastructure in areas with high concentration of Iraqis affected by the conflict.

Health:

Within Iraq, the Ministry of Health has the main role in improving the basic services within the framework of the reform of the health care system. Humanitarian interventions will be focused on ad-hoc and targeted material support in the cases when the system will be overwhelmed due to a rapid onset emergency such as massive explosions, population movement or epidemic.

Response to sudden population movements and returns:

Although the number of returns remains relatively low given the still high level of violence and subsequent insecurity, a massive return of refugees to Iraq cannot be totally excluded. In the other hand, important displacements of population could happen, notably in and around the disputed territories. In this context, emergency multisectoral support would be envisaged.

Specific objective 2: To provide protection and relief to Iraqi refugees in neighbouring countries.

Protection

Support to protection activities in favour of refugees, notably refugee registration, issuance of documentation, legal advice and counselling, intervention on individual cases, and preventive and responsive activities addressing issues such as sexual and

gender-based violence, child protection and exploitation, prevention of deportations and refoulement.

Non food items and cash assistance:

Distributions of basic NFI adapted to specific needs of the targeted beneficiaries (items to improve living conditions such as mattresses, blankets and household items; protection from elements especially during winter; hygiene items) and cash assistance in order for the beneficiaries to purchase NFIs or pay their rent.

Health and psychosocial:

Targeted technical and material support to health structures in order to absorb the influx of refugees. In the psychosocial sector, the humanitarian interventions will focus on support reaching the most vulnerable victims of the crisis.

Specific objective 3: To ensure adequate food availability through the provision of food assistance to the Iraqi refugees in Syria.

Food assistance:

Provision of basic food assistance to eligible refugees registered with UNHCR. This will consist in a general food distribution made to respond to the average needs of an adult per day (2,100 kcal). It is expected that this basic in-kind food assistance (rice, pulse, cereals and vegetable oil) will be completed with vouchers, mainly for items such as canned food, eggs, butter, etc available in government shops. The vouchers will not cover the totality of the beneficiaries at once, but will begin with a low coverage and gradually build up to the whole of the caseload. The planned cycle of distributions is bi monthly.

4.6. Duration

The duration for the implementation of this Decision will be 18 months. This duration is requested because some of the activities to be funded under this global plan represent continuations of activities funded under previous 2009 decisions, thus while some projects will start on 1 March 2010, others will start this summer. Also, possible changes in the situation in Iraq and delays or the halting of the activities are taken into consideration.

Humanitarian Actions funded by this Decision must be implemented within this period.

If the implementation of the Actions envisaged in this Decision is suspended due to *force majeure*, or any comparable circumstance, the period of suspension will not be taken into account for the calculation of the duration of the humanitarian aid Actions.

Depending on the evolution of the situation in the field, the Commission reserves the right to terminate the Agreements signed with the implementing humanitarian organisations where the suspension of activities is for a period of more than one third of the total planned duration of the Action. In this respect, the procedure established in the general conditions of the specific agreement will be applied.

4.7. Amount of Decision and strategic programming matrix

4.7.1 Total amount of the Decision: EUR 18,000,000

4.7.2. Strategic Programming Matrix for the 2010 Global Plan for the Iraqi crisis

| | | | | | |
|---|--|---|---|--|---|
| Principal objective | <i>To provide the necessary assistance and relief to vulnerable populations affected by the Iraqi crisis.</i> | | | | |
| Specific objectives | Allocated amount (EUR) | Geographical area of operation | Activities proposed | Expected outputs / indicators | Potential partners |
| Specific objective 1: To provide protection and relief to vulnerable populations, including IDPs and returnees, affected by the in Iraq. | 7,000,000 | Iraq | <ul style="list-style-type: none"> - Protection activities. - Rehabilitation of basic water and sanitation schemes. - Support to medical structures in cases of major outbreak of violence or epidemic- Response to sudden population movements and returns. | <ul style="list-style-type: none"> - Approximately 30,000 detainees visited and monitored. - Approximately 2.7 million people have improved access to safe water and sanitation. - Timely and adequate support to victims of major outbreak of violence or epidemic.- Timely and adequate support to IDPs and returnees in case of major displacements. | <u>Joint management</u> - ICRC-CICR - UNHCR |
| Specific objective 2: To provide protection and relief to Iraqi refugees in neighbouring countries. | 8,000,000 | Syria, Jordan, Lebanon, Turkey, Egypt, Iran | <ul style="list-style-type: none"> - Protection activities including refugee registration - Assistance to refugees, including NFIs and cash. - Support medical structures with personnel, drugs and material. - Psychological support. | <ul style="list-style-type: none"> - Around 280,000 UNHCR-registered Iraqi refugees receive adequate protection and material assistance. - UNHCR-registered refugees have access to affordable primary and secondary health care. - Around half of the refugees treated for psychosocial disorders are experiencing reduced stress. | <u>Direct centralised management</u> - CARE - AUT - CARITAS - FRA - TERRE DES HOMMES - CHE <u>Joint management</u> - UNHCR |
| Specific objective 3: To ensure adequate food availability through the provision of food assistance to the Iraqi refugees in Syria. | 2,000,000 | Syria | <ul style="list-style-type: none"> - Provision of food and /or food vouchers. | <ul style="list-style-type: none"> - Around 115,000 UNHCR-registered eligible refugees received adequate monthly food assistance allocation. | <u>Joint management</u> - WFP-PAM |
| Risk assessment | <ul style="list-style-type: none"> - The security situation in Iraq may deteriorate in 2010 as this is an important election year and there may be a long period of instability after the March general elections. - Possible tighter conditions for residence of Iraqi refugees in neighbouring countries. - Difficulties for assessing needs continue in Syria and Jordan | | | | |
| Assumptions | <ul style="list-style-type: none"> - Violence in Iraq continues its decreasing trend and the security situation does not deteriorate. - Access to beneficiaries by humanitarian actors in Iraq is possible. | | | | |
| Contingency reserve | 1,000,000 | | | | |
| Total cost | 18,000,000 | | | | |

5. EVALUATION

Under article 18 of Council Regulation (EC) No.1257/96 of 20 June 1996 concerning humanitarian aid the Commission is required to "regularly assess humanitarian aid Actions financed by the Union in order to establish whether they have achieved their objectives and to produce guidelines for improving the effectiveness of subsequent Actions." These evaluations are structured and organised in overarching and cross cutting issues forming part of DG ECHO's Annual Strategy such as child-related issues, the security of relief workers, respect for human rights, gender. Each year, an indicative Evaluation Programme is established after a consultative process. This programme is flexible and can be adapted to include evaluations not foreseen in the initial programme, in response to particular events or changing circumstances. More information can be obtained at:

http://ec.europa.eu/echo/policies/evaluation/introduction_en.htm.

6. MANAGEMENT ISSUES

Humanitarian aid Actions funded by the Commission are implemented by NGOs and the Red Cross National Societies on the basis of Framework Partnership Agreements (FPA), by Specialised Agencies of the Member States and by United Nations agencies based on the EC/UN Financial and Administrative Framework Agreement (FAFA) in conformity with Article 163 of the Implementing Rules of the Financial Regulation. These Framework agreements define the criteria for attributing grant agreements and financing agreements in accordance with Article 90 of the Implementing Rules and may be found at http://ec.europa.eu/echo/about/actors/partners_en.htm.

For NGOs, Specialised Agencies of the Member States, Red Cross National Societies and International Organisations not complying with the requirements set up in the Financial Regulation applicable to the general budget of the European Union for joint management, actions will be managed by direct centralised management.

For International Organisations identified as potential partners for implementing the Decision, actions will be managed under joint management.

Individual grants are awarded on the basis of the criteria enumerated in Article 7.2 of the Humanitarian Aid Regulation, such as the technical and financial capacity, readiness and experience, and results of previous interventions.

7. ANNEXES

Annex 1: Statistics on the humanitarian situation

Annex 2: Map of country and location of DG ECHO Actions

Annex 3: List of previous DG ECHO Actions

Annex 4: Overview of donors' contributions

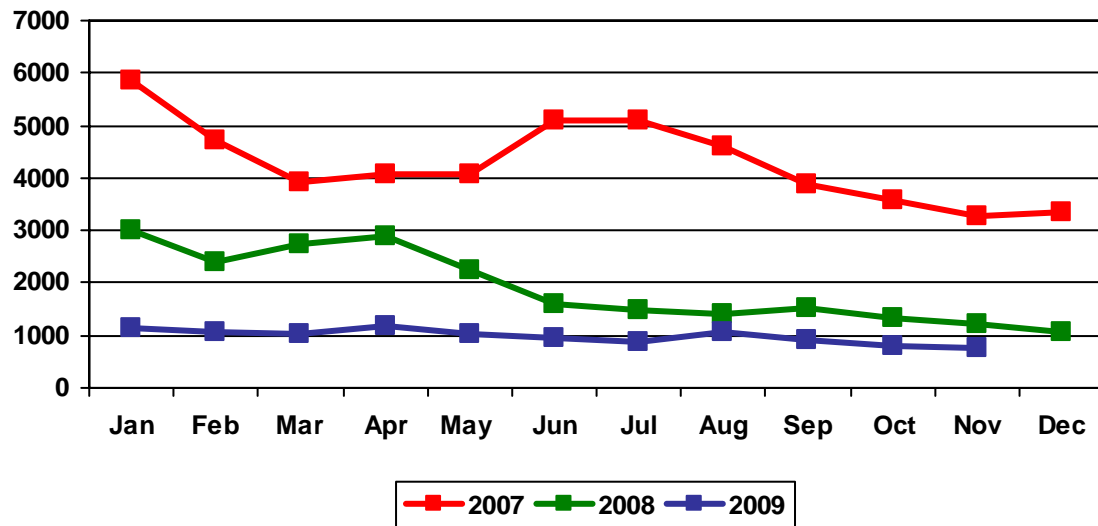
Annex 5: List of abbreviations

Annex 1: Statistics on the humanitarian situation

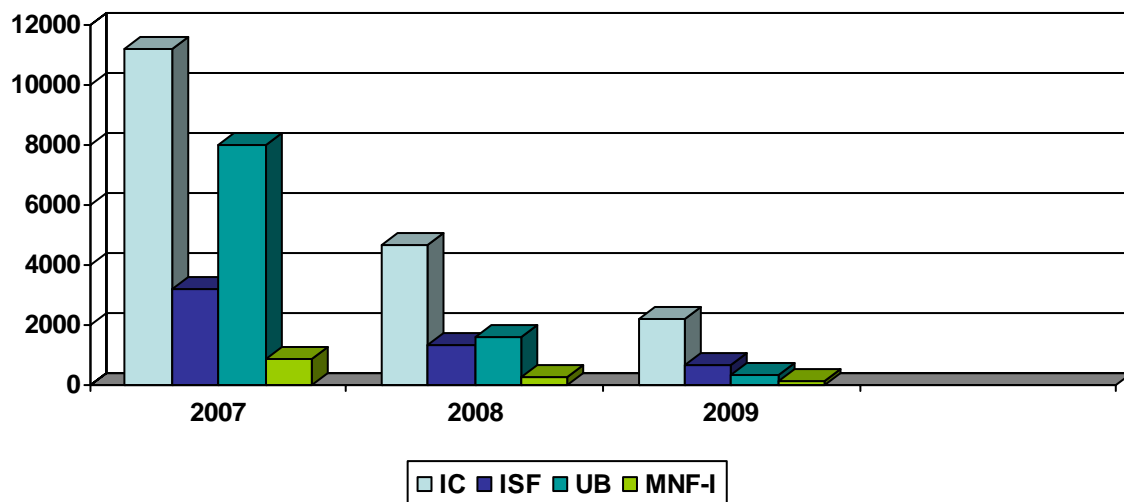
Iraq statistics

Security (source: Control Risk Company)

IRAQ: Security Incidents By Month

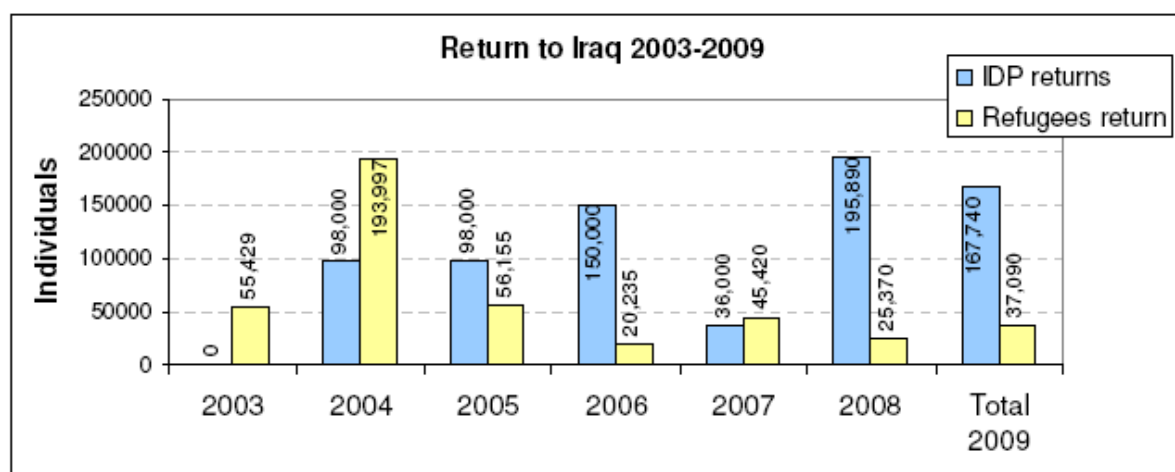


IRAQ: Total Casualties By Group



Iraq Displacement data (source: UNHCR)

- 1,55 million IDPs (450,000 in squatter camps)
- 294,148 registered Iraqi refugees in neighbouring countries (October 2009)
- 426,000 returnees (2008/9)
- 35,000 refugees (Turkish/Iranian Kurds, Palestinians, Syrians, Ahwazis, ex-PMOI)



Iraq General population

Some 15% of households are not connected to a public water network, a further 37% suffer water shortages as a result of poor network quality, and 16% of households are not using an improved sanitation facility²².

However, maternal mortality is more than double the level in neighbouring countries (300 per 100,000 in Iraq versus 140 per 100,000 in Iran as the next-highest level in the region). Child health indicators show equally poor outcomes. For under-five mortality, neonatal mortality, and low-birth weight deliveries, Iraq ranks among the last in the Middle East region.

Unemployment stands at 15% and a further 28% of the workforce is underemployed, which may increase in the coming years, particularly amongst youth²³. Youth are increasingly vulnerable to poverty and food insecurity as 450,000 young people enter the labour market facing limited job prospects²⁴. Overall, 23% of the population lives below the poverty line (\$2.2 per person per day).

Measles epidemic

30190 suspected measles cases were reported in Iraq during the first 42 weeks of 2009.

The outbreak was mainly concentrated in the central part of Iraq and from where it has spread to South and North. The epidemic was controlled with mop-up vaccination campaigns, except in the areas with high insecurity²⁵.

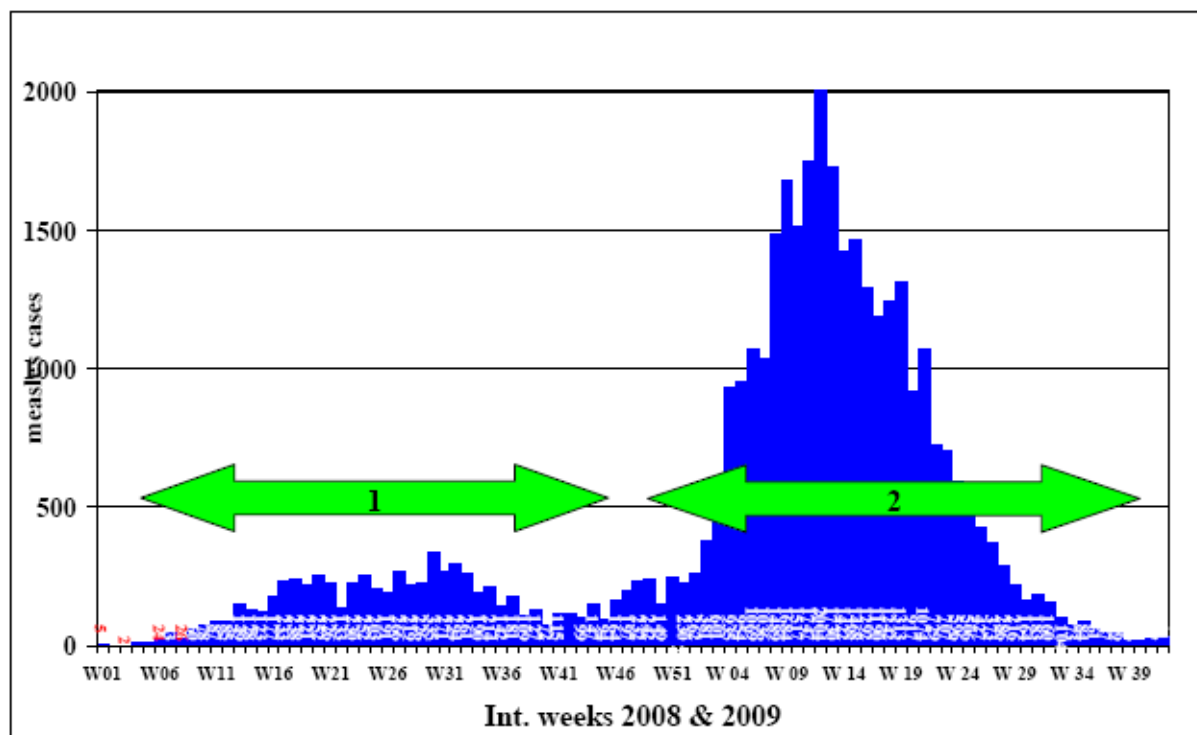
Fig: Reported measles cases by international week, Iraq, first 42 weeks of 2009

²² Source: COSIT Labor Force Survey 2008.

²³ Ibid.

²⁴ Source: IAU Iraq, Labour Force Analysis 2003 to 2008, March 2009.

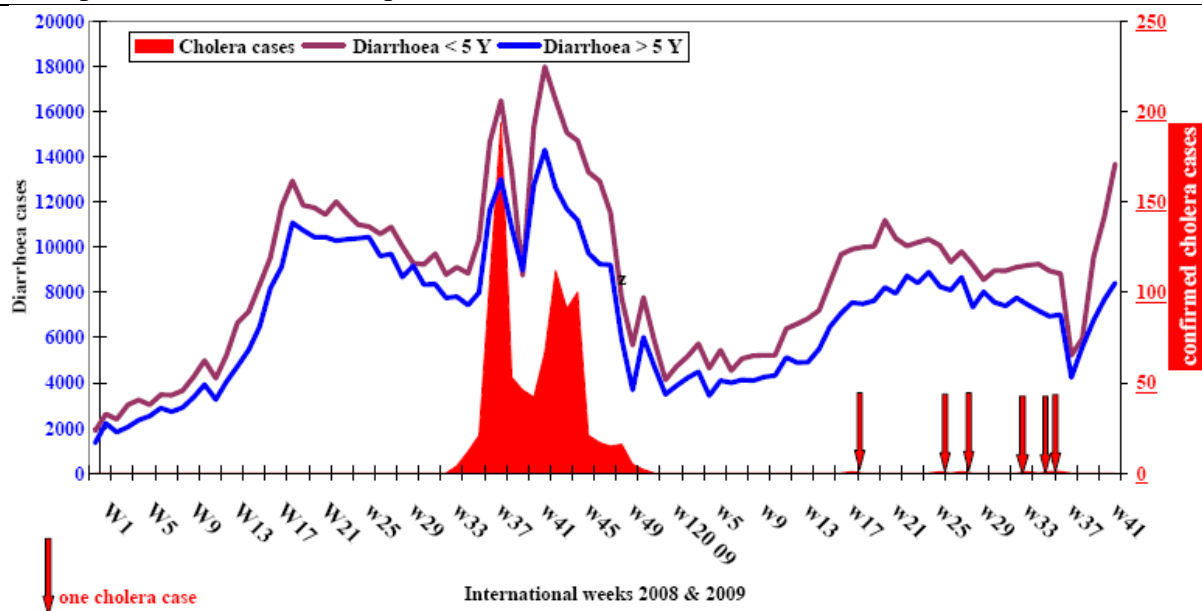
²⁵ Source: WHO; Weekly feedback on measles - Report no. 68, for international week 42 ending 19 Oct 2009; <http://www.reliefweb.int/rw/rwb.nsf/db900sid/EGUA-7XEMM3?OpenDocument&emid=ACOS-635P5D>



Diarrhoea and cholera in Iraq

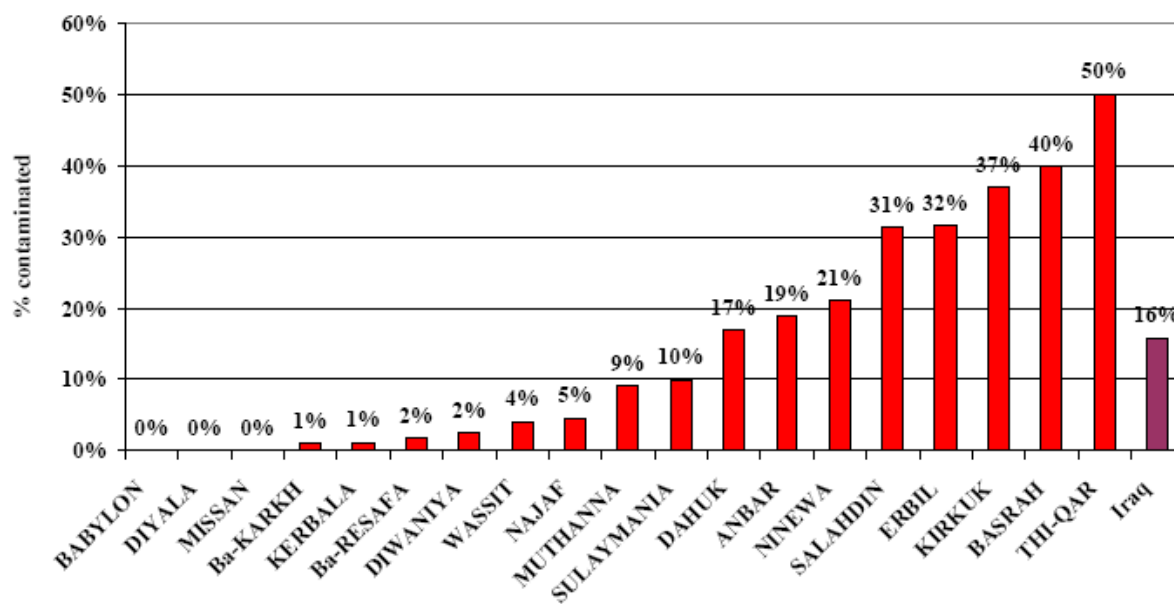
Only 6 cholera cases were reported from Iraq since the beginning of 2009. 3 out of the 6 were reported from Babel, 2 from Muthana and one from Basra²⁶.

Fig: Diarrhoea and laboratory confirmed cholera by international week, 2008, and up to week 42, 2009, Iraq

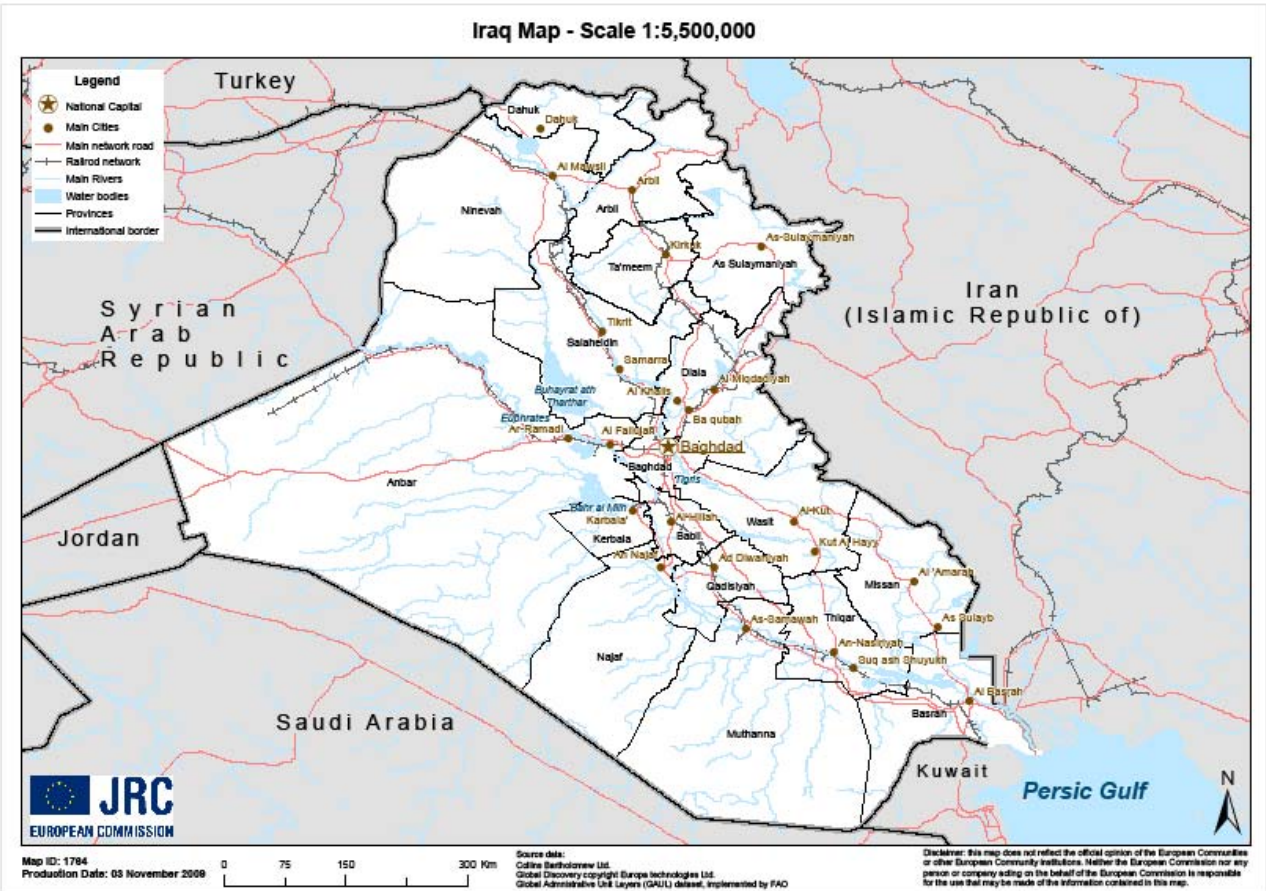


²⁶ Source: WHO; Weekly situation report on diarrhoea and cholera in Iraq - week 41 ending 12 Oct 2009; <http://www.reliefweb.int/rw/rwb.nsf/db900sid/EGUA-7XEMPQ?OpenDocument&emid=ACOS-635P5D>

Fig : % water samples contaminated by coliform bacteria, Iraq, by province, first 42 weeks of 2009



Annex 2: Map of country



Annex 3: List of previous DG ECHO Actions

| List of previous DG ECHO operations in response to the Iraqi crisis | | | | |
|---|---------------|-------------|-------------|-------------|
| Decision Number | Decision Type | 2007 EUR | 2008 EUR | 2009 EUR |
| ECHO/-ME/BUD/2007/02000 (*) | Non Emergency | 10,000,000 | | |
| ECHO/IRQ/BUD/2007/01000 | Non Emergency | 7,800,000 | | |
| ECHO/-FA/BUD/2008/01000 (*) | Non Emergency | | 5,000,000 | |
| ECHO/-FA/BUD/2008/05000 (*) | Non Emergency | | 5,000,000 | |
| ECHO/-ME/BUD/2008/02000 (*) | Non Emergency | | 20,000,000 | |
| ECHO/-ME/BUD/2009/02000 (*) | Non Emergency | | | 20,000,000 |
| | | | | |
| | | | | |
| | | | | |
| | Subtotal | 17,800,000 | 30,000,000 | 20,000,000 |
| | Grand Total | 67,800,000 | | |

Dated : 18 January 2010

Source : HOPE

(*) decisions with more than one country

Annex 4: Other donors' contributions

| Donors in IRAQ/JORDAN/LEBANON/SYRIAN ARAB REPUBLIC the last 12 months | | | | | |
|---|------------|------------------------|------------|-----------|-----|
| 1. EU Members States (*) | | 2. European Commission | | 3. Others | |
| | EUR | | EUR | | EUR |
| Austria | | DG ECHO | 28,100,000 | | |
| Belgium | 2,000,000 | Other services | | | |
| Bulgaria | | | | | |
| Cyprus | | | | | |
| Czech republic | | | | | |
| Denmark | 11,367,964 | | | | |
| Estonia | | | | | |
| Finland | 3,300,000 | | | | |
| France | 549,982 | | | | |
| Germany | 6,292,233 | | | | |
| Greece | | | | | |
| Hungary | | | | | |
| Ireland | 1,004,950 | | | | |
| Italy | 4,054,000 | | | | |
| Latvia | | | | | |
| Lithuania | | | | | |
| Luxemburg | 150,000 | | | | |
| Malta | | | | | |
| Netherlands | 4,250,000 | | | | |
| Poland | | | | | |
| Portugal | | | | | |
| Romania | | | | | |
| Slovakia | | | | | |
| Slovenia | | | | | |
| Spain | | | | | |
| Sweden | 1,071,682 | | | | |
| United kingdom | | | | | |
| Subtotal | 34,040,811 | Subtotal | 28,100,000 | Subtotal | 0 |
| | | Grand total | 62,140,811 | | |

Dated : 18 January 2010

(*) Source : DG ECHO 14 Points reporting for Members States. <https://webgate.ec.europa.eu/hac>

Empty cells means either no information is available or no contribution.

Annex 5: List of Abbreviations

| | |
|-----------|---|
| CAP | Consolidated Appeal Process |
| CCA/UNDAF | Common Country Assessment/UN Development Assistance Framework |
| DG AIDCO | Directorate-General for Aid Cooperation |
| DG ECHO | Directorate-General for External Relations |
| DG RELEX | Directorate-General for External Relations |
| GNA | Global Needs Assessment |
| GoI | Government of Iraq |
| ICRC | Improvised Explosive Device |
| MNF-I | Multi-National Force in Iraq |
| WHO | World Health Organization |
| SOFA | Status of Forces Agreement |
| KRG | Kurdish Regional Government |
| UNAMI | United Nations' Mission in Iraq |
| IHAP | Iraq Humanitarian Action Plan |
| IHL | International Humanitarian Law |
| GNA | Global Needs Assessment |
| NGO | Non-Governmental Organisation |
| UN | United Nations |
| UNHCR | United Nations High Commissioner for Refugees |
| JAM | Joint Assessment Mission |
| EMOP | Emergency Operation |
| IRFFI | International Reconstruction Fund Facility for Iraq |
| CSP | Country Strategy Paper |
| DCI | Development Cooperation Instrument |