HUMANITARIAN IMPLEMENTATION PLAN (HIP)

IRAQ CRISIS¹

AMOUNT: EUR 76 550 000

The full implementation of this version of the HIP is subject to the adoption of the decision amending Decision $\frac{C(2014)10012}{C(2014)10012}$ final and the availability of the relevant appropriations.

0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

Modification 2 – October 2015

The humanitarian situation in Iraq continues to worsen, due to the escalation of the fighting and the intensification of the military campaign against ISIL. The Iraq crisis, a L3 emergency, remains one of the most serious humanitarian crises in the world: 10 million people, nearly a third of the total country's population (34 million) are expected to need life-saving assistance by the end of the year. 8.6 million need help right now. 3.2 million are internally displaced (additional 1.5 million displaced are expected before end 2015). Needs continue to grow. Full blown ground attacks have been ongoing in Eastern Al-Anbar, central Salah al-Din and western Kirkuk governorates. Over 500 000 people have been displaced since April 2015. Between end of August and first weeks of September only, close to 15 000 IDPs fled ongoing fighting in the Daquq and Hawija sub districts of Kirkuk governorate. In the event of an attack on Mosul up to 1.5 million IDPs in addition are expected. The escalation of the fighting in Anbar, the new displacements and the serious impact that the conflict is having on civilians in terms of humanitarian needs and protection are putting under further strain the already limited humanitarian resources.

The Iraq Humanitarian Response Plan (HRP) has a total funding gap of 60% and operations are already closing. Several humanitarian partners have announced cuts across all sectors of humanitarian assistance. ICRC Iraq appeal for 2015 is also severely underfunded (€20 million gap). If additional, substantial financial support is not allocated to the humanitarian response, the consequences of such a resource break could be enormous, not only in terms of aid distribution, but also protection and social stability in communities.

Continuing to support humanitarian partners (UN agencies, International Organizations and International NGOs) is needed more than ever to help them in their difficult task of protecting and providing a coordinated emergency response to all the victims of the Iraq crisis. This

¹ This HIP integrates the needs of all populations of concern within the borders of Iraq, and includes Syrian refugees residing in the country. Support for Iraqi refugees are included in the country plans under the Syria Crisis HIP, particularly Jordan and Lebanon.

additional funding of EUR 40 million will help covering some of the most urgent, basic needs of the most vulnerable people: provision of emergency assistance (water and sanitation for the coming winter period, health, food, shelter/NFIs), coupled with persistent principled engagement to improve access (to assistance and to safer ground). Unconditional cash assistance will be expanded wherever possible as a dignifying and cost efficient modality aimed to covering emergency basic needs of those most vulnerable.

Modification 1 – May 2015

The humanitarian situation in Iraq is currently further deteriorating, due to the escalation of the conflict. Iraq remains one of the most serious humanitarian crises in the world with the number of people requiring life-saving assistance increasing by 400% in less than a year. Nearly 2.8 million people have been displaced and needs continue to grow. Full blown ground attacks are ongoing in Eastern Al-Anbar, central Salah al-Din and western Kirkuk governorates. Fighting has already burst or is expected in main urban areas (Ramadi, Tikrit, Hawidja, Fallujah, Telafar, Mosul). The humanitarian caseload is at risk of exploding in the event of an attack on Mosul. The escalation of the fighting in Anbar, in the last weeks, and the recent displacement of over 120 000 persons from Ramadi is putting under further strain the already limited humanitarian resources.

Iraq Strategic Response Plan (SRP) for 2015 appealed to USD 1.12 billion in total and it is only 13% funded, rendering Iraq one of the top 5 underfunded response plans in the year, as of 19 May. The UNOCHA USD 150 million Fast Track for Iraq (18 February 2015) represents a first prioritization attempt, covering a period of five months prior to the launch of the revised Humanitarian Response Plan (former SRP); it is only 46% funded. The HRP ongoing revision, to be released in Brussels on 4 June, is expected to appeal to USD 500 million for the period June-December 2015. Iraq could be the first L3 emergency which will have operations curtailed if additional, substantial financial support is not allocated to the humanitarian response. The consequences of such a resource break, not only in terms of aid distribution, but also protection and social stability in communities would be enormous.

It is therefore essential to continue to support humanitarian partners (UN agencies, International Organizations and International NGOs) in their difficult task of protecting, providing a coordinated emergency response to all the victims of the Iraq crisis. This additional funding of EUR 25 million will help covering some of the most urgent basic, emergency needs of newly displaced persons: provision of lifesaving assistance (water and sanitation for the coming summer period, health, food, shelter/NFIs,), coupled with persistent principled engagement to improve access (to assistance and to safer ground). Unconditional cash assistance will be expanded wherever possible as a dignifying and cost efficient modality aimed to covering emergency basic needs of those most vulnerable.

1. CONTEXT

The current situation in Iraq is characterized by a large-scale political and security crisis with momentous local, national and regional implications. Iraq belongs to category 3 (most severe) of ECHO²'s Crisis Index and to category 2 of ECHO's vulnerability Index for 2011-2012. The ECHO Integrated Analysis Framework for 2013-14 identified moderate humanitarian needs in Iraq. However, persistently high levels of violence and political instability throughout 2013 escalated to an open armed conflict in the first half of 2014 leading to widespread humanitarian consequences in virtually every Iraqi governorate.

Political and sectarian tensions have significantly contributed to the deterioration of security, claiming more than 8 000 lives in 2013, the highest level since 2008. Following months of repeated violent attacks and growing political tensions, heavy fighting between the Iraqi Security Forces (ISF) and armed associated opposition groups (AGs) started in Al-Anbar governorate in December 2013. The unilateral ceasefire announced by the Government in late February was short-lived. Fighting and shelling continued in Fallujah, Ramadi, and the most populated centers of Al-Anbar. Large parts of the governorate, with an estimated total population of 1.5 million, became inaccessible to humanitarian organizations and the number of internally displaced persons (IDPs), mostly dispersed within the governorate, rose steadily from about 55-60 000 IDPs in January 2014 to close to 480 000.

With no clear end to the crisis in Al-Anbar and continuous political tensions after the April elections, violence and military offensives spilled into other governorates, most notably Salah al-Din, Diyala and Baghdad, while security conditions in Ninewa — especially in the areas bordering Syria grew increasingly fragile. After a series of rapid, coordinated raids by AGs in Salah al-Din and Diyala, the security crisis reached a peak when the Islamic State of Iraq and the Levant/Islamic State (ISIL/IS) and associated AGs launched large-scale attacks against Iraqi security forces in Ninewa governorate, taking control of Mosul city in June 2014. The conflict rapidly expanded into Salah al-Din, Diyala, the Kirkuk area and parts of the Disputed Internal Boundaries (DIB) south of the KR-I.

As a result, massive population displacement within and from Ninewa, DIB, and the other affected governorates took place in early June. Estimates by UN and NGOs indicate that the first days of the Ninewa crisis initially triggered a sudden population displacement which ranged from a low of 250 000 to a high of 450 000 persons; some of whom had already been displaced from Al-Anbar. And since the first weeks of June, population displacement within and across Iraqi governorates has continued without interruption.

In addition to large-scale, continuous displacement, the actions of AGs, including ISIL/IS, in areas under their control have created a serious protection crisis for Iraqi civilians. The situation of Iraqis trapped in zones where the armed conflict is taking place, including Iraqi Shi'a, Yazidis,

² Eruopean Commission's Directorate General for Humanitarian Aid and Civil Protection - ECHO

Christians and other religious and ethnic minorities in the Ninewa plains, Mosul, and other areas in conflict-affected governorates is of paramount concern.

Heavy clashes between AGs, including ISIL/IS, and ISF/Peshmerga in northern Iraq further deteriorated the security situation, with an estimated 850 000 women, men and children being forcefully displaced from their homes in the month of August alone. Nearly 200 000 people were forcefully displaced from Sinjar (north-western Ninewa) into Iraq's Kurdistan region (most of them to Dohuk Governorate) or to disputed border areas inside Ninewa. It is estimated by UN that since the beginning of 2014 1.8 million Iraqis have been displaced.

Iraq is affected not just by an internal sectarian conflict, but also by the ongoing conflict in neighboring Syria, which has a significant impact on the country. The most visible effect has been the influx of Syrian refugees, mainly in the North. There are 217 800 Syrian refugees³ registered in Iraq more than 95% hosted in the KR-I.

The Peshkabour border crossing remains firmly closed since April 2014 for new arrivals from Syria after short-lived and intermittent openings following the massive influx of asylum seekers in August 2013. The Al Qa'im border remains under the control of armed groups, with the free movements of persons in either direction, but an extremely worrying security environment. Returns to Syria are still possible: as of August and as a result of growing concerns over the security situation, UNHCR reports an average of 300 Syrian asylum-seekers returning back to Syria from KR-I a day. Some 20 445 individuals are known to have returned since January 2014.

2. HUMANITARIAN NEEDS

2.1. Affected people / potential beneficiaries

Latest UN figures refer to 1.8 million IDPs across the country since the beginning of 2014 in 1634 locations. Most have moved more than once seeking refuge in safer areas throughout Iraq. According to most recent assessments, during the month of August about 728 700 persons were displaced, accounting for 42% of the estimated total of IDPs since January. The governorate of Dohuk alone is estimated to host more than 465 000 IDPs.

As fighting continues in central and northern regions, Iraqi populations are suffering a heavy toll, directly affected by fighting and violent acts. According to the latest figures released by the United Nations Mission in Iraq (UNAMI), in the month of August more than 1 260 civilians were killed and 1 198 civilians were injured. These numbers do not include Al-Anbar governorate where local health authorities estimate that 268 civilians were killed and 796 were injured during the same period.

Armed conflict continues to cause massive internal displacement in Iraq, further straining the resources and absorption capacities of host communities. The poorest and most underserved

³ Syrian Persons of Concern – Registration Trends, UNHCR/Iraq, 31 July 2014.

areas before the crisis are bearing the brunt of the conflict. Of the conflict-affected population, IDPs and local communities in the DIB and areas of ongoing conflict are highly vulnerable given already poor living conditions, poorly functioning and/or damaged basic infrastructure, loss of household income and assets, and insecurity. ECHO will focus its support on assistance to the most vulnerable to meet their basic needs through flexible, reactive and timely assistance methods. The most relevant and cost-efficient delivery method, including cash will be considered.

The protection of refugees and IDPs located in camps within the DIB and elsewhere in the country (including Al-Anbar, and other high-risk areas in Baghdad) is a major concern. Isolated camp locations, limited security measures existing in IDP camps and cramped living conditions of IDPs in informal/collective shelters hinder the protection of civilians fleeing the conflict and deserve more attention.

Approximately 60% of the 217 800 Syrian refugees in the KR-I live in host communities, mostly located in Erbil and Dohuk. The rest reside in refugee camps in the three Kurdish governorates, with the camp of Domiz in Dohuk accommodating the majority of all Syrian refugees in camps. A small number of refugees are dispersed in other Iraqi governorates, including the conflict-affected governorate of Al-Anbar where 4 529 registered Syrian refugees are residing close to the border with Syria at the Al-Obeid camp and with host communities in Al-Qa'im town. Refugee families in Al-Anbar have been practically inaccessible since May 2014 due to conflict and insecurity in the area. The remainder Syrian refugees are residing with host families in Baghdad and other Iraq governorates.

UNHCR estimates that 58% of registered refugees were living outside of camps and mostly in urban settings. This group is particularly vulnerable to exploitation in the labour and housing market and has limited access to public services. While a multi-sectoral vulnerability assessment was completed in April 2014 in an effort to better understand the needs of vulnerable refugee families, at the time of writing, the final results have not been made public. The additional stress on public services and housing stock with the arrival of hundreds of thousands of IDPs in the KRI is expected to have a negative impact on non-camp refugee households already struggling to make ends meet.

Permanent camp locations are in their final stages of completion, although problems with water and sanitation in certain camps are persistent and yet unresolved. Targeted assistance provision should be considered given high levels of refugee mobility in certain camp locations, access to employment and protracted nature of displacement. Where possible, transition from in-kind, to voucher and cash assistance is encouraged as well as the use of a "one-card" system for support to refugees.

2.2. Description of most acute humanitarian needs

Protection

The situation in northern and central Iraq is characterized by widespread and severe IHL and IHRL violations committed by all parties to the conflict. Violations reported4 include execution-style killings (including of children), kidnapping for ransom, torture, arbitrary detention, rape, threatening and extortion. Religious and ethnic minorities are discriminated and deliberately targeted; they are denied access to jobs/livelihoods, their properties are being marked and religious sites are destroyed. The entire civilian population in the conflict-affected areas is affected by the violence with ensuing limitations in freedom of movement (whether real or perceived) and subsequent restrictions in access to basic services and income opportunities.

Greater efforts should be undertaken to promote a universal comprehensive IDPs registration system. Increasing efforts in the area of registration and protection are essential for effective planning and action of humanitarian agencies in the country.

Syrian refugees have been caught in the unfolding conflict and some have had to flee again, either to other locations in Iraq or back to Syria, and even if the formal asylum space is satisfactory, the real protective environment is not. The encampment preference of the KR-I government means that out-of-camp refugees do not have the same access to assistance as those in camps, and their resources (as well as those of their hosts) are gradually being depleted leading to an increased risk that they will resort to dangerous coping mechanisms to make ends meet. Furthermore, both camp refugees and IDPs face protection issues deriving from living conditions, limitations in their freedom of movement and limited security conditions of certain camp locations. Protection-monitoring mechanisms need to be reinforced to ensure the provision of legal assistance, including issuance of documentation and assistance for people with specific needs.

WASH and shelter

The lack of a strategy for IDP/refugee assistance outside camps remains problematic across sectors. Nonetheless, there is an urgent need to develop minimum standards and common approaches for shelter interventions which build on recent experiences. Current modalities of assistance may need adjustments to ensure that essential shelter repairs are properly done and that issues related to rental and tenure agreements are systematically addressed. Also, needs of host communities - often living in poverty in under-served, semi-urban or rural areas - should be taken into consideration.

Continued support is required to strengthen capacities for emergency response and preparedness in the WASH and shelter sectors in order to respond to immediate basic needs of both IDPs and refugees in the current volatile context. Alternative shelter options able to cover the needs of IDPs and refugees not able or unwilling to relocate to camps need to be provided. This is particularly pressing given that planned IDP camps will not be able to fully absorb all identified needs in this sector. An array of solutions are required. The location of camps in secure areas to

⁴ Human Rights Watch, Inter-agency Protection Cluster/Protection Working Group (IDPs) KR-I, and Foreign Policy.

ensure the protection of displaced populations has to be ensured respecting international standards and the humanitarian character of all IDPs camps.

Ongoing emergency needs assessments carried out in communal centers and informal settlements hosting IDPs reveal a lack of safe water in addition to inadequate access to sanitation services, hygiene promotion and materials. A balanced and appropriate mix of emergency and mid-term solutions for affected populations, IDPs and most vulnerable host communities is required. Ensuring the availability and quality of water and sanitation services in camps erected to host recurrent waves requires further attention.

Likewise, several refugee camps still struggle with inequitable access to community services and suffer from water shortages during summer time. Waste water management remains problematic across all camps in KR-I, and requires concerted and long-term efforts for overall system improvement. While sector relief interventions are being implemented, efforts to integrate more sustainable solutions for water and sanitation systems should be supported and maintained.

By August 2014, shelter is a primary concern and associated considerations related to water, sanitation, winterization and health. In 2014, the biggest proportion of displaced sought refuge with host families (32%) or have rented accommodation (20%). After June, as options for housing became more constrained, a marked increase of communal/informal shelters and camps, particularly in the KRI is noted. In KRI, 73% of the families displaced after June were hosted, in August 2014, in mosques, abandoned buildings, school buildings, camps and informal settlements. The sudden increase in the number of people in cities and rural areas adds an additional burden to already poor and underserviced neighbourhoods. If not addressed in a comprehensive manner, these conditions risk further raising tensions between host communities and IDPs.

Health

Mass displacement of IDPs to safer areas in Iraq has led to the over-burden of existing Primary Health Care (PHC) and Secondary/Tertiary Health structures. Security constraints are severely hampering the availability of medicines and supplies, as well as emergency care. Increased risks for the transmission of communicable diseases and compromised care of chronic conditions are a reality affecting many vulnerable groups in Iraq. Access to secondary and tertiary health care is a matter of concern as the referral system is weak and requires reinforcement.

KR-I governorate Directorates of Health, NGOs and UN agencies provide primary healthcare services for Syrian refugees living in camps. These services include curative and preventive care for children and adults, mother and child healthcare, reproductive health, and treatment of chronic diseases including mental health services. There is little knowledge on access to healthcare for refugees and IDPs living in host communities. In principle, health facilities provide services to refugees and IDPs but to what extent is still not clear. There is a need to build a better understanding on access to specialized care and hospitals among refugees and IDPs

living in host communities, particularly given imperfect information on available services and growing protection concerns.

Given the rapidly changing situation today, there is still conflicting information on the number of health facilities that are actually functioning in conflict-affected governorates, particularly in districts and areas under the control of AOGs where access is limited. However, the general information available suggests that support to restoration of access to health services is an urgent priority. In conflict-affected areas, hospitals and clinics are struggling to operate at full capacity due to insecurity, electricity outages, fuel shortages, staff being displaced, and structural damages in some cases.

Food

Among IDPs, food was consistently reported as their main need in 2014. Moreover, many host families and people remaining in conflict-affected areas are either already food insecure or at risk of becoming food insecure. Support is urgently needed to provide immediate food assistance, while developing food assistance modalities able to better respond to the mid-term needs of IDPs and conflict-affected communities. Furthermore, it is crucial to upscale food security monitoring to ensure timely, effective and evidence-based responses to people's most pressing needs.

Plans to settle hundreds of thousands of IDP families in camp settings in the KR-I requires a rapid scale up of capacity to meet current and projected food security needs through the most relevant and cost efficient modality (in-kind, voucher, cash). Transition from blanket assistance to targeted support will need to take place overtime and once the acute phase of the emergency is concluded. Alternative modalities for food assistance to IDPs outside of camps where markets are otherwise functioning will also need to be explored.

Refugees in camps receive in-kind food assistance with the exception of families at Domiz camp where the distribution of food vouchers started in May-June 2014. WFP and partners are working on the transition to the voucher system for remaining camps. Transition from blanket assistance to targeted support in Syrian refugee camps is timely, particularly in camps where the registered population is known to also maintain a full hold in the host community (i.e. Domiz, etc.). The reluctance of the KRG to develop comprehensive packages of assistance to out-of-camp refugees hinders the provision of food assistance in host communities. A better understanding of the food security of out-of-camp refugees is needed.

3. HUMANITARIAN RESPONSE

3.1. National / local response and involvement

The Government of Iraq and its ministries in charge of basic services, such as health, agriculture, and water, have officially received substantive allocations from the 2012-2013 national public budget. However, these budgets are systematically under-spent, subject to unexpected cuts or to

delayed transfers. Such deficiencies have a particularly negative impact at the governorate and district levels, which have regularly faced shortages of resources in the past years.

In particular, the Ministry of Displacement and Migration (MoDM), responsible for the promotion and facilitation of assistance to IDPs does not have the appropriate capacity to timely manage the sizeable budget allocations it has received to accelerate long-term IDP reintegration programmes. At the end of 2013, the Ministry had managed to respond to only a portion of the requests for reintegration assistance. In 2014, and in the face of a growing displacement crisis, the organization of emergency cash distribution with funds from the central Government was considerably delayed. On 1 April, the Iraqi Government approved the increase of MoDM budget allocations for the provision of cash, shelter and food aid to the IDP families from Al-Anbar. However, UN agencies and NGO reports highlighted the long delays in cash distribution and important gaps in IDP registration in the governorates which left large numbers of displaced families without assistance. By mid-2014, it was unclear whether or how the emergency cash programme was being implemented at the governorate level with important concerns over the targeting and identification of end beneficiaries.

Since June, the freeze of transfers from the central Government to governorates that are under the control of armed groups has also had a direct impact on the local capacities to assure the provision and functioning of basic services.

The recently established inter-ministerial High Commission (chaired by the Minister of Planning) and forthcoming Joint Crisis Centre, are the first high-level centralized policy making body to be formed by the KRG to manage the humanitarian crisis. While too soon to tell, it is hoped that this will provide a boost to planning and coordination between the KRG and the humanitarian community. The KRG is however facing a budgetary crisis of its own (transfers from the central Government have not taken place for 7 months) that unless resolved quickly will have a direct and immediate impact on the availability of services to local and IDP populations alike.

3.2 International Humanitarian Response

Regional governments and host communities have led the emergency response in all affected areas, but their capacity to adequately and rapidly respond to the increased needs of affected people is currently overwhelmed. The newly appointed national Government is due to deliver on its duty of care for all Iraqis, facilitating the registration and assistance to IDPs and most vulnerable communities in Iraq. Following Iraqi authorities' requests for assistance, the international humanitarian assistance to Iraq significantly increased in an attempt to respond to unfolding events and sequential crises. By September 2014, more than USD 750 M were available to respond to the humanitarian needs of Iraqis in Iraq. However, the absence of medium or longer term planning, coupled with extremely limited visibility on the needs countrywide has hampered the international response.

3.3 Constraints and ECHO response capacity

In response to the rising needs of affected populations in Iraq, ECHO increased its contribution to humanitarian programmes from EUR 4 M to EUR 7 M in March and strengthened its presence in country with the opening of a field office in Erbil. In June, a second funding increase of EUR 5 M was decided followed by other EUR 5 M in July thus making the total ECHO contribution to EUR 17 M by August 2014.

The new country office has facilitated support to ECHO partners and monitoring of a rapidly evolving situation in Iraq, and enhanced coordination and strategic dialogue with ECHO and EEAS/EUDEL in Iraq in order to ensure coherent EU operational and advocacy approaches.

However, the scale of the on-going crisis in Iraq will require sustained focus for the coming months as well as reinforced humanitarian monitoring of the situation countrywide, better assessing the situation of affected populations in central and southern Iraqi governorates. It is very important that we maintain an all-of-Iraq response as there is a main focus of the response in the KR-I.

Timely needs assessments to identify and address critical gaps of assistance, the scale-up of adapted rapid response mechanisms applying most relevant and cost efficient assistance modalities (i.e. cash, etc.) will be one of the main focus of ECHO strategy in Iraq. ECHO will continue to proactive search for humanitarian access opportunities by implementing partners, able to build and develop local networks and to expand their reach into the DIB and central belts of Iraq while strengthening of inter-agency humanitarian coordination. Advocacy for the protection of all populations affected by the crisis without distinction, for an all or Iraq response and expanded humanitarian access in accordance with humanitarian principles and international humanitarian law are also priorities for ECHO. Finally ECHO will also support partners to continue working in close collaboration with local Iraqi partners and communities who have been and remain the first responders assisting those in need.

3.4 Envisaged ECHO response and expected results of humanitarian aid interventions

ECHO's response will not be sufficient to cover all of the most urgent needs in Iraq. Therefore, life-saving activities will be prioritized and partners will be required to clearly define targeting criteria and set priorities so as to ensure that the most vulnerable are assisted first.

Access to and delivery of relief aid to those still in areas in conflict and at-risk in several parts of Iraq remains a critical priority. In order to capture full humanitarian needs, gaps and available response, it is important to support an "All-of-Iraq" strategy and response promoting this with all partners and inter-agency coordination mechanisms.

Furthermore, ECHO will integrate greater flexibility in existing agreements with partners to enable a rapid respond. Contingency planning and preparedness (stocks) will be considered to enable partners to react rapidly to new displacements in 2015.

Protection

ECHO will support protection initiatives designed to address protection risks and violations either directly or in an integrated manner through other programme activities and protection sensitive targeting. Decisions on specific activities to support will be based on a clear analysis of protection threats and vulnerabilities by age, gender and diversity (religion/ethnicity). Addressing IHL and IHRL violations must have top priority. Possible areas to support include – but are not necessarily limited to: information management services, registration/verification, access to documentation and freedom of movement, family separations, as well as assistance to victims of all kinds of violence (including SGBV). Integrated programming of protection and assistance is strongly encouraged in order to mitigate the effects of discrimination and to encourage community cohesion. ECHO expects that protection principles are mainstreamed in all operations.

WASH and shelter

ECHO might consider supporting WASH services for refugee camps in locations where conditions are most severe and where needs are the highest, and will consider punctual support aimed at meeting WASH standards in IDP camps. However, emphasis will be given to interventions focusing on the emergency needs of refugees, IDPs and most vulnerable hosting communities. Also, ECHO will support the development of different modalities of assistance, including cash/rental assistance. Priority should be given to highly vulnerable groups, as per coordinated and harmonized needs assessments.

ECHO will support emergency water/sanitation interventions and distribution of hygiene kits for IDPs and highly vulnerable communities in conflict areas. Water and hygiene assistance will need to be coordinated with existing rapid response mechanisms, allowing for multi-sectorial humanitarian response in Iraq. Partners in the sector will be encouraged to develop integrated WASH packages of direct assistance to meet critical needs, as well as rapid systemic interventions providing mid-term solutions.

Health

ECHO will pay special attention to all actions aimed at ensuring effective access to healthcare for refugees and IDPs both inside and outside camps. In a context where health services have limited capacities and are already over-stretched by the additional demand from refugees and IDPs, health operations addressing the needs of out-of-camp populations will be considered a priority. These should contribute to gaining a better understanding on health needs of the

refugee/IDP population as well as the critical gaps of local health infrastructures to ensure essential service provision.

In view of the insufficient health support provided to IDPs and local communities in conflict zones ECHO might encourage partners to include a basic health component in existing rapid response mechanisms in the geographical areas under their responsibility. Operations able to maximize humanitarian access to communities directly exposed to conflict will be encouraged to consider integrating basic support to existing health structures and partners.

In view of the high risk of epidemics countrywide, ECHO will also encourage and support partners to collect and report basic epidemiological data to the health cluster paying special attention to measles, polio and cholera.

Food assistance

ECHO favours a comprehensive assessment of food aid needs and sector response of Iraqi conflict-affected populations, IDPs and refugees. Similarly, improved coordination among partners providing food assistance in Iraq is required to ensure adequate information sharing, coordination of assistance operations, and regular assessment of food aid needs on the basis of commonly-agreed approaches. Food assistance will be coordinated and, as much as possible, integrated through existing mechanisms to provide an integrated package of assistance able to meet the most urgent needs of affected populations.

Effective coordination is essential. ECHO supports the **Inter-Agency Standing Committee's Transformative Agenda (ITA)** and encourages partners to demonstrate their engagement in implementing its objectives, to take part in coordination mechanisms (e.g. Humanitarian Country Team/Clusters) and to allocate resources to foster the ITA roll-out.

Partners will be expected to ensure full compliance with **visibility** requirements and to acknowledge the funding role of the EU/ECHO, as set out in the applicable contractual arrangements.

4. LRRD, COORDINATION AND TRANSITION

4.1. Other ECHO interventions

The European Emergency Response Coordination Centre (ERCC) was tasked with coordinating the European response following a request from Iraqi President. More than 45 cargo flights had arrived in Erbil carrying 6 700 metric tons of relief aid. In kind assistance included mainly family tents, kitchen sets, medical supplies, blankets, food items, jerry cans, power generators, vehicles and ICT equipment. Humanitarian cargo flights have been sent by Austria, Belgium, Denmark, France, Italy, Germany, Netherlands, Sweden and the United Kingdom under the EU Civil Protection Mechanism. So far the Commission received 14 requests for transport co-

financing. In the case that all requests will be approved, the total Commission co-financing amount would be close to EUR 1.3 M.

ECHO is working in close cooperation with EEAS and DEVCO⁵ teams to ensure that development programmes integrate the needs of crisis-affected population, including the internally displaced, most vulnerable groups in conflict areas, and the refugees. This is taken into consideration in most of the DCI programmes.

Given the protracted nature of the situation of Syrian refugees, it is important to enhance cooperation with development actors and develop a medium- to long-term refugee response strategy for refugees living both in and outside camps. Income generating and self-sufficiency programmes developed by development donors are needed to support durable solutions for Syrian refugees.

4.2 Other concomitant EU interventions

Following the deterioration of the political and security situation in Iraq, some development cooperation programmes have been re-directed to respond to the unfolding crisis in the country. This has been the case of the Iraq-EU-IOM Jointly Run Advanced Assisted Migration INitiAtive" (HIJRA AMINA), a large-scale capacity building programme which seeks to improve the operational capabilities and performance of ministries within the central government and KRG in the field of migration management. Going forward, HIJRA AMINA will focus on crisis management primarily in the KR-I expanding activities to other governorates and at the central level as soon as the context allows.

The EU is also supporting the UNOPS programme "Building Partnership between Iraqi Civil Society and Public Authorities" that will also be recalibrated given the prevailing circumstances. The programme will further pursue the development of a functional, transparent, constructive, and mutually beneficial relationship between civil society and public authorities, much needed and most pertinent in light of the crisis.

4.3 Exit scenarios

Given the present humanitarian crisis in Iraq, which the United Nations has declared as a Level 3 emergency, exit scenarios are not under consideration. However, it is important that development donors support medium-and long-term needs of populations affected by the conflict. It is important to maintain an active approach to re-engage with relevant government bodies as soon as the new Iraqi government is formed. Ensuring sustained coordination with EU funding and exploring the wide range of instruments that could be made available for Iraq in the coming period will be supported.

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⁵ European Commission's Directorate-General for Development and cooperation - DEVCO