

## IRAQ | UNHCR COVID-19 UPDATE V

**COUNTRY SITUATION** *confirmed cases in Iraq: 1,574 | confirmed cases affecting UNHCR persons of concern: 0*

Over the course of the last week, the number of new confirmed COVID-19 cases in Iraq has steadily fallen. As of 21 April, 1,574 COVID-19 cases have been confirmed across the country, with 82 fatalities, most of which in Baghdad, Basrah and Kerbala. For the time being, no cases have been identified affecting UNHCR persons of concern.

Iraqi authorities have announced that the comprehensive curfew set in place since 17 March will be partially lifted during Ramadan. From 21 April to 22 May the curfew will apply only from 7 PM to 6 AM during weekdays, while complete curfew will remain in place during weekends. In addition, the following measures will continue to apply country-wide: suspension of internal and external flights until 24 April; closure of schools, universities, places of worship, cafes, playgrounds, and other locations with big affluence of people; ban of gatherings of more than three people; and compulsory use of facemask in public spaces. Categories previously excluded from the curfew and movement restrictions will be able to continue operating as before. It is worth to note that with the new instructions, government institutions will be able to resume their activities with a reduced number of staff (maximum twenty-five per cent of the regular workforce). This will have a direct positive impact on some of UNHCR's activities such as the provision of civil documentation. Furthermore, from 6 AM to 7 PM, work will also be allowed in shops and factories (with a reduced number of employees as well), which will potentially bring back livelihood opportunities for some individuals.

### UNHCR ASSISTANCE REACHES DISPLACED FAMILIES IN IRAQ



*Syrian Refugee families receive cash assistance in Erbil*

As part of our efforts to limit the spread of the virus and preserve the well-being of refugees, IDPs, and returnees across Iraq, UNHCR is supporting families access basic hygiene items through the distribution of cash assistance. The disbursement of cash has already begun in several refugee camps, and will continue to cover all refugees and IDPs in camps throughout the country as well as vulnerable refugee, IDP and returnee families living in urban, peri-urban, and rural areas. The distribution is being conducted door-to-door by UNHCR, partners, and financial service providers, to ensure respect of social distancing and avoid mass gatherings. Only in Erbil, during the past days, over 1,600 families have received cash assistance. Through this intervention, provided funding is available, UNHCR aims to assist over 125,000 vulnerable displaced families.

During the reporting period, UNHCR further distributed over 12,200 dignity kits for women and girls of reproductive age living in IDP and refugee camps. Dignity kits contain hygiene and sanitary items such as soap, sanitary materials, and toothbrushes, along with other items explicitly tailored towards the local needs of women and girls, such as shawls, whistles, headscarves, underwear, and small containers to wash personal items. The kits are designed in partnership with affected communities to ensure the most appropriate items are included. The distributions have been also carried out door-to-door in line with COVID-19 safety measures, and will continue during the coming weeks to cover all governorates in Iraq.



*IDP women receive dignity kits in Baharka camp in Erbil*

## COVID-19 PROTECTION RISKS AND CHALLENGES

The main concerns raised by PoCs continue to include the lack of livelihood opportunities, food insecurity, and increased prices of hygiene and basic items. The majority of requests and complaints received through feedback mechanisms relate to cash assistance and food support. Further to the protection risks mentioned in previous updates (**closure of borders preventing movement of refugees, challenges to access camps and reach persons of concern in certain locations, lack of livelihood opportunities, and increased priced of basic food items**) during the reporting period the following additional risks have been identified:

- **Increased risk of eviction due to socioeconomic impact of movement restrictions:** recent surveys conducted by protection partners across eight governorates in Iraq to measure the impact of the COVID-19 outbreak on displacement-affected populations have revealed that the risk of eviction from public buildings and rented private accommodation is one of the most critical and widespread protection concerns amongst IDPs and returnees. The right to safe, secure and adequate housing is increasingly compromised, which could further lead to negative coping strategies and an exacerbation of the health crisis. A temporary nationwide suspension of evictions and utility cut-offs could address these immediate protection concerns.
- **Rise of domestic violence:** during the past weeks a notable increase of domestic violence has been reported across the country during COVID-19 lockdowns and curfews. UN agencies have released a statement urging Parliament to adopt an anti-domestic violence law and ensure the safety of women and children during this particular period.
- **Movement of IDPs in and out of camps in certain locations:** in the past weeks, protection and camp management partners have raised concerns about the movement of IDPs in and out of camps in certain governorates, particularly camp residents working in other governorates and returning to camps without respecting the 14-day mandatory quarantine. These movements increase the exposure of IDPs and humanitarian actors to COVID-19 transmission. UNHCR, together with the Health Cluster and other partners, has been working to set up areas for quarantining such persons returning to camps.
- **Halt of education activities:** all education activities, including non-formal and vocational training remain suspended. Iraqi authorities are conducting efforts to roll out e-learning courses across Iraq, and UNHCR is working with the Education Cluster and other UN agencies to spread awareness of this effort and identify ways to support displaced families in accessing e-learning opportunities.

## UNHCR RESPONSE

UNHCR is in regular contact with federal and local health authorities and has ensured the inclusion of all persons of concern in national COVID-19 preparedness and response plans. At the moment, public health facilities throughout the country continue offering services to all affected cases. Should pressure increase for public health facilities, UNHCR has developed a contingency plan to ensure that all critical life-saving services and assistance continue to be delivered to all vulnerable displaced individuals across the country, particularly in refugee and IDP camps. UNHCR has well established procedures to continue providing services and maintain presence in the field in challenging situations. Under the current context, most basic services continue to function (albeit at limited capacity) in camps and in areas with a high density of displaced populations. UNHCR has adopted new distribution modalities to ensure assistance continues to be delivered, including door-to-door and telephone modalities for cash support, legal counselling, protection monitoring, and other activities.

**In these challenging times, aid must not become a victim of COVID-19.** Humanitarian action to save lives and alleviate the suffering of vulnerable populations remains imperative. Additional resources are needed to prevent the spread of the virus in Iraq and ensure that existing humanitarian programmes, on which the lives and welfare of millions of people depend, continue.

**UNHCR in Iraq is urgently appealing for \$26 million** to scale-up its activities in response of the COVID-19 outbreak, including: ensuring access to basic hygiene items through the distribution of cash assistance; health promotion and awareness raising; provision of medical equipment; training of health workers; strengthening health care services in camps; improving referral systems; ensuring access to Mental Health and Psychosocial Support services; support early detection of positive cases; and enhancing disinfection activities in camps.