

IOM IRAQ

COVID-19 RESPONSE OVERVIEW #4

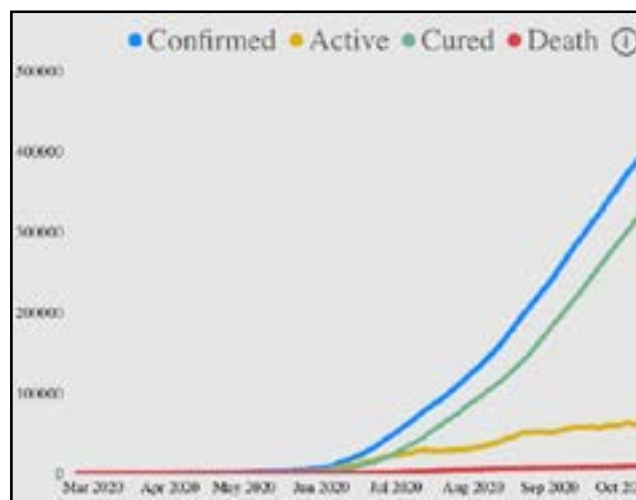
15 September - 12 October 2020



IOM IRAQ COVID-19 Strategic Response Plan¹, February-December 2020, USD 20.45 million
 405,437 Confirmed Cases | 55,475 Active Cases | 340,050 Cured Cases | 9,912 Death Cases²

Government lockdown measures including restrictions on commercial activity as well as civilian movements remain in place across the country. The approach of local authorities to the enforcement of these restrictions varies across governorates.

All curfews from 23.00 - 5:00 that were in place across the country were lifted. Citizens across Iraq and within Kurdistan Region of Iraq (KRI) remain permitted to travel between governorates as well as between KRI and Federal Iraq, following the lifting of those restrictions in August. International airports in Baghdad, Basra and Erbil remain open for commercial flights but are still running at lower capacity and not all airlines have resumed flight schedules. Flights for emergencies, medical evacuations, carrying cargo, and chartering also remained operational between 22 September and 5 October.³



Cumulative Distribution of Cases in Iraq by Health Status



As part of efforts to support the Government’s response to the COVID-19 pandemic, IOM Iraq supplied 180 Oxygen cylinders to Kirkuk Governorate’s health directorate.

1 For IOM Iraq COVID-19 Strategic Response Plan, please visit www.iomiraq.int

2 WHO Iraq COVID-19 Dynamic Infographic Dashboard for Iraq. The dashboard is uploaded daily based on data from the Ministry of Health (MoH) of Iraq: <https://bit.ly/2Oy1eC8>

3 COVID-19 Mobility Restrictions and Public Health Measures Report – 22 September – 5 October 2020: <http://iraqdtm.iom.int/COVID19/MovementRestrictions>

Ensure a well-coordinated, informed and timely response through mobility tracking systems and strengthening partnership and coordination structures established at the community, national and regional levels

Coordination and Partnerships



Several coordination meetings conducted.

- IOM Iraq is working with World Health Organization (WHO) to align COVID-19 activities, including through the UN Country Team (UNCT). IOM is co-leading the Health Cluster Taskforce for health partners, WHO, Ministry of Health (MoH), and Camp Coordination and Camp Management (CCCM) partners including for the preparedness and response plans.
- IOM coordinated closely with MoH and Directorates of Health (DoH) to provide technical guidance at Zanko testing center in Erbil, and with WHO, United Nations High Commissioner for Refugees (UNHCR), and other key CCCM partners in Erbil and Kirkuk for activities at the field level.



Tracking Mobility Impacts



2 Iraq mobility restriction reports published.

The following main activities were implemented:

- IOM Iraq's [Displacement Tracking Matrix \(DTM\)](#) assessed 30 locations including airports and Points of Entry (PoEs) along land borders and maritime boundaries. Seven were reported as closed, 12 partially open, and 11 open only for commercial traffic, as well as domestic movement restrictions. DTM produced two Iraq mobility restriction reports during the reporting period, presenting an overview of mobility restrictions for the monitored PoEs which are partially open for commercial traffic, as well as for Iraq in general.



IOM Iraq teams in Salah Al-Din distributed NFI replacement kits and COVID-19 kits (containing soap, laundry detergent powder and sanitary pads) to returnee families in Baiji District.

Contribute to global, regional, national and community preparedness and response efforts for COVID-19 to reduce associated morbidity and mortality

Risk Communication and Community Engagement (RCCE)

The following main activities were implemented:

- Design and circulating Information, Education and Communication (IEC) on COVID-19 precautions at construction sites; printing and distributing COVID-19 card games, board games, coloring books, flyers and posters; and conducting an assessment of COVID-19 bulk messages.
- Printing floor stickers to promote physical distancing and signs to direct patient flow for IOM supported clinics/hospitals, Erbil and Baghdad airports, and Zanko testing center in Erbil. Improved flow of patients



Over **90** awareness/sensitization sessions, reaching more than **1,850** individuals in camp and non-camp settings in **8** governorates.

More than **20,000** COVID-19 card games, board games, coloring books, flyers and posters distributed.

COVID-19 Bulk messages assessment conducted.

will reduce the risk of exposure to COVID-19 at supported health clinics/hospitals.

- Awareness/sensitization sessions on COVID-19 held, for individuals in camp and non-camp settings in Najaf, Anbar, Diyala, Basra, Dohuk, Ninewa, Kirkuk, and Salah Al-Din.

Disease Surveillance

The following main activities were implemented:

- At the request of MoH, IOM has developed draft guidelines on disease surveillance.



Draft guidelines on disease surveillance developed.

Points of Entry (PoE)

The following main activities were implemented:

- Coordinating closely with and providing ongoing technical support for officials from the Erbil Interna-



Technical support for PoE activities continued.

tional Airport, MoH, WHO, and other key partners for PoE activities.

Infection Prevention and Control (IPC)

The following main activities were implemented:

- Conducting IPC trainings for DoH clinical and non-clinical staff at IOM supported clinics in Kirkuk, Ninewa, Anbar, and Dahuk on IPC, screening and triage of COVID-19, rationale use of personal protective equipment (PPE), and more.
- Screening and Triage processes continued at IDP



83 DoH clinical and non-clinical staff trained. More than **15,000** individuals screened or triaged for COVID-19 at supported health clinics.

health clinics prior to patient consultations (Ninawa – Jadaa camp; Shekhan camp; Erbil – Debaga camp; Kirkuk – Yahyawa camp; Anbar – Al Mateen camp). These processes were established in two selected community clinics in Erbil and have been established at 20+ selected clinics in communities within Anbar, Baghdad, Erbil, Dahuk, Kirkuk, and Ninewa.

Case Management and Continuity of Essential Services

The following main activities were implemented:

- Supporting six DoH COVID-19 response teams responsible for monitoring contacts in self-quarantine and suspected/confirmed cases in home isolation. The teams are attached to the health facilities that are supported in Kirkuk.



6 DoH COVID-19 response teams supported.

Ensure access of affected people to basic services and commodities, including health care, and protection and social services

Camp Coordination and Camp Management (CCCM)

The following main activities were implemented:

- Ongoing remote CCCM management mechanisms for displaced community leaders in 24 camps and 63 informal sites in Anbar, Baghdad, Ninewa, and Salah Al-Din.
- Continuing to follow up with the committees (Women Empowerment Group (WEG), Youth Empowerment Group (YEG) and managements committees) for any COVID-19 cases registered in the sites.
- Coordinating with DoH to conduct a sterilization campaign at Zayona camp in Baghdad after registering new four confirmed COVID-19 cases.
- Supporting construction works, including construction of the Quarantine/Isolation area in Jad'ah camp, Ninewa, Al-Ahal camp in Baghdad, and AAF and BZBZ camps in Anbar.



24 Camps and **63** informal sites supported with CCCM to prevent, contain, or manage cases.

380 Hygiene kits distributed.

108 Promotion and health awareness campaigns conducted, reaching **1,136** beneficiaries.

- Providing hygiene promotion sessions in the informal sites and Ba'aj, Mosul, Tal Abta, and Sinjar in Ninewa, and AAF camp in Anbar.
- Distributing hygiene kits to households in Ba'aj, Mosul and Tal Abta in Ninewa.
- Coordinating with the WASH partner Mercy Corps to cover AAF and BZBZ sites with COVID-19 prevention hygiene kits (detergent, soap, and sanitary pads); and installing handwashing stations in IOM supported informal sites and camps in Ninewa, Anbar, and Salah Al-Din.

Protection

The following main activities were implemented:

- IOM Iraq provided case management to victims of trafficking (VoT), and individual services for critical and urgent cases, including people with known suicide risk, those experiencing psychological consequences of domestic violence, and people with severe or chronic pre-existing mental health disorders. Assistance was delivered through field visits when possible, and otherwise by phone.
- IOM Iraq completed a Mental Health and Psychosocial Support (MHPSS) survey among target areas and an assessment on livelihoods and MHPSS integration in IDP locations like Dahuk, Hassan Sham in Ninewa, and Wahed Huzeiran in Kirkuk, to be released in October; and developing a leaflet to support bereaving families who lost a loved one to suicide.
- Remote protection monitoring activities in Sardashti informal settlement in Ninewa and Sharya camp in Dahuk for the fourth round of the National Protection Cluster (NPC)-led Protection Monitoring; and



More than **140** key informant interviews conducted for protection monitoring.

provided protection information services on rights and services through protection help desks located in IOM safe spaces and through referrals.

- IOM Iraq carried out community outreach through door to door information sessions in Sharya and Khan-ke camps in Dahuk, and Hassan Sham camps, Mosul, and Sardashti informal settlement in Ninewa.



IOM Call Center staff provide MHPSS services to beneficiaries through phone calls.

Support international, national, and local partners to respond to the socio-economic impacts of COVID-19

Addressing Socio-Economic Impacts of The Crisis

The following main activities were implemented:

- IOM Iraq supported Small and Medium Enterprises (SMEs) through the Enterprise Development Fund (EDF) including businesses supporting COVID-19 responses by producing PPE and other supplies, on-line delivery and other essential activities during lockdown. Milestone verification and monitoring were conducted, and SMEs received financial instalments.
- To measure the losses and investigate how SMEs are coping with movement restrictions, IOM, the Food and Agriculture Organization (FAO), and the International Trade Center (ITC) launched a panel study of 893 enterprises in 15 governorates and published the first round of products on 16 September including a flash report, and factsheets on sectors. IOM and partners have drafted a joint brief comparing findings from the exercise with findings from a survey conducted by ILO, The Fafo Institute for Labour and Social Research (Fafo), and the Cash Consortium in Iraq (CCI) in partnership with ILO and CCI.
- IOM Iraq developed the zero-movement outreach strategy for Individual Livelihood Activities (ILA) and Cash-for-Work (CfW). This focused on coordination with local authorities through phone calls, sending out bulk SMS with details on eligibility criteria and links to the registration form, electronic flyers, and sensitization through radio announcements. Individu-



16 Businesses were approved; to receive EDF support during the reporting period
98 Beneficiaries received ILA support; and **343** new beneficiaries profiled and shortlisted for ILA support during the reporting period.
10 COVID-19 related CFW projects targeted
231 beneficiaries implemented

als can submit registration forms online or call the IOM Call Center for assistance. Profiling and selection of beneficiaries is done through phone calls and door to door modalities, according to the COVID-19 related restrictions imposed in each locality.

- As providing a Business Development Training (BDS) in a training venue is a limited possibility due to COVID-19, IOM currently recognizes Competency-based Economies through Formation of Enterprises (CEFE) as a standard training curriculum to deliver training to the ILA beneficiaries. They are delivered online.
- Vocational Training (VT) and Business Support Packages (BSP) can only be delivered in person. IOM has been engaging with authorities and businesses, so venues are compliant with COVID-19 prevention measures.
- IOM Iraq implemented several COVID-19 related CfW activities, including supporting 30 CfW volunteers for 40 days to clean Al Salam Hospital in Mosul, Ninewa in co-ordination with the DoH; and engaged a group of women in sewing face masks to be provided to patients and surrounding communities in Tikrit, Salah Al-Din.

IOM is mainstreaming gender and disability inclusion. This includes encouraging female participation, tracking disability prevalence, and supporting that programming is responsive and inclusive to the needs of females and persons with disabilities.

IOM takes a number of approaches to ensure appropriate and respectful participation of persons with disabilities (PwD) in all activities, including those related to the COVID-19 response, including: 1) avoiding conducting separate activities for persons with disabilities; 2) ensuring that persons with disabilities are consulted about the planned activities and how they would like to participate; 3) using accessibility checklist to assess venues used to implemented the listed activities; 4) allocating budgets for reasonable accommodations; 5) encouraging the hiring of PwD as focal points and sharing focal point information with PwD; 6) ensuring PwD are informed about all activities.

IOM Iraq COVID-19 Response Supported By:



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