



Iraq - Complex Emergency

SEPTEMBER 30, 2022

SITUATION AT A GLANCE

2.5

People in Need of Humanitarian Assistance

UN - March 2022

961,000

Number of People in Acute Need

UN - March 2022

1.2

Estimated Number of People Internally Displaced in Iraq

IOM - June 2022

179,325

Number of Internally Displaced People Residing in Camps

CCCM - August 2022

265,384

Number of Syrian Refugees in Iraq

UNHCR - August 2022

- International relief actors work to implement a humanitarian response transition and deactivate the cluster coordination system in Iraq by the end of 2022.
- In June, Iraq's health authorities announced the highest number of cholera cases since 2015, prompting USG partner WHO to dispatch urgent deliveries of medicines and medical supplies.
- Climatic shocks, including extreme heat and recurrent sandstorms, exacerbate the needs of displaced populations, particularly for IDPs in camp settings.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING

For the Iraq Response in FY 2022

USAID/BHA¹

\$82,804,279

State/PRM²

\$169,054,159

For complete funding breakdown with partners, see detailed chart on page 6

Total

\$251,858,438

¹ USAID's Bureau for Humanitarian Assistance (USAID/BHA)

²U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

KEY DEVELOPMENTS

Humanitarian Response Transition Underway With Cluster System Deactivating by the End of 2022

The number of Iraqis in need of humanitarian assistance has declined from a high of 11 million people in 2017 to 2.5 million people in 2022, the UN reports. In recognition of decreased acute humanitarian needs in Iraq, the UN Humanitarian Country Team will transition the humanitarian response coordination infrastructure by the end of the year. As part of this effort, the UN plans to deactivate the cluster coordination system by the end of 2022 and will not develop a Humanitarian Response Plan for 2023. Relief actors will continue to provide assistance to Iraq's most vulnerable populations and will work with development and stabilization partners, the Government of Iraq (GoI), and the Kurdistan Regional Government to advocate that adequate resources be allocated to support ongoing humanitarian response activities.

National Authorities Report Highest Number of Cholera Cases Since 2015

On June 19, national health authorities announced that the number of cases of cholera—a food- and waterborne acute diarrheal illness caused by bacterial infection in the intestine that is endemic to Iraq—peaked for the first time in Iraq since 2015. The outbreak began with a confirmed case in a resident of the Ashti IDP camp near the Iraqi Kurdistan Region's Sulaymaniyah city. In response, USG partner the UN World Health Organization (WHO) coordinated with the water, sanitation, and hygiene (WASH) Cluster—the coordinating body for humanitarian WASH activities comprising UN agencies, NGOs, and other stakeholders—to meet the needs of IDPs, returnees, and refugees who are particularly vulnerable to contracting cholera due to poor WASH conditions. WHO dispatched an urgent delivery of medicines and medical supplies—including antibiotics, infusion equipment, and intravenous fluids sufficient to treat approximately 5,000 people—to Sulaymaniyah Governorate to support the regional Ministry of Health response in containing the spread of the disease. As of August 7, Iraq had reported more than 780 confirmed cases and four deaths attributed to the disease, primarily concentrated in Baghdad, Dhi Qar, and Kirkuk governorates, according to WHO.

Climatic Shocks Drive Displacement, Exacerbate Basic Needs Among IDPs

Iraq's vulnerability to severe climate impacts—high temperatures, insufficient and diminishing rainfall, intensified droughts and water scarcity, frequent sand and dust storms, and flooding—combined with rapid population growth, urbanization, and inefficient water use by the agricultural and industrial sectors is likely to drive accelerated displacement in Iraq in the coming decades, according to a June statement by the UN. As of September 2022, nearly 63,000 individuals in central and southern Iraq remained displaced as a result of drought conditions that began in June 2018 across ten governorates, the International Organization for Migration (IOM) reports. Households displaced by drought are dispersed across 259 locations—mostly in southern and southeastern Iraq—with approximately 76 percent residing in urban locations.

Desertification and water scarcity disproportionately affect the most vulnerable populations in Iraq, including those previously impacted by conflict and displacement, placing them at an increased risk of livelihood losses and cyclical poverty, the UN reports. Climate-related displacement also exacerbates protection needs among vulnerable populations, particularly for children in rural areas who face higher risk of early marriage, missed educational opportunities, and child labor. Moreover, displaced households often resort to negative coping mechanisms to meet basic food and water needs, including eating less expensive foods and going several days without eating.

In July and August, extreme heat reaching up to 120 degrees Fahrenheit and recurrent sandstorms affected the estimated 1.2 million displaced people in Iraq and exacerbated poor humanitarian conditions for the nearly 180,000 individuals living in camps, according to international media and relief actors. Camps for internally displaced persons (IDPs) and refugees often lack adequate infrastructure to protect residents against high temperatures, including backup sources of power amid electricity cuts of up to 17 hours per day in the summer, causing a surge in incidents of fatigue and asthma complications, according to an international non-governmental organization (NGO). Increased cases of heat-related illnesses and injuries have placed additional stress on the limited health care services available in camps and have created significant financial burdens for displaced persons with limited access to livelihood opportunities.

Lasting Psychological Trauma Affects One-Third of Repeatedly Displaced Children in Iraq

Between October 2020 and November 2021, Iraq's Ministry of Displacement and Migration closed or reclassified 17 IDP camps, abruptly decreasing the country's formal camp population by nearly 30 percent and secondarily displacing tens of thousands of IDP households, according to the Camp Coordination and Camp Management (CCCM) Cluster. As a result, an estimated 103,000 repeatedly displaced individuals resided in informal settlements—sites with sub-standard shelter conditions and not designed to accommodate people—as of September 2021. Secondarily displaced children in informal settlements in Iraq often lack access to critical civil documentation, education, and psychosocial support, significantly affecting their mental health, wellbeing, and motivation to learn, according to a September report by the Norwegian Refugee Council (NRC). Based on more than 600 household-level surveys and interviews with nearly 40 key sources, one-third of children who have experienced repeated displacement in Iraq have developed psychological trauma and a fear for their safety that often prevents them from leaving home or going to school, NRC reports. Furthermore, inadequate shelter and an absence of public services available to many displaced households present significant obstacles to physically accessing educational facilities and resources.

IDP Returns Remain Slowed as Livelihood Challenges Continue

As of June 30, nearly 5 million Iraqis—the majority of the 6.1 million individuals displaced since 2014—had returned to eight governorates across the country, according to IOM. This figure includes approximately 10,100 new returnees between April 1 and June 30. This period represents one of the lowest three-month rates of return IOM has recorded since it began tracking population movement in Iraq in April 2015. The majority of Iraq's remaining IDP population is experiencing protracted displacement, with more than 90 percent having been displaced for three or more years. Nearly 1.2 million IDPs remained displaced across 18 governorates as of June 30, IOM reports. Among returnees, nearly 190,000 individuals—approximately 4 percent—have returned to areas of origin and reside in non-residential structures, including tents and makeshift houses.

Returnees in Iraq continue to face significant economic challenges after arriving in their places of origin. Approximately 65 percent of all returnee households are in areas with scarce employment opportunities, and nearly 80 percent of returnee households report that employment and livelihood opportunities are their greatest need, according to IOM. Economic and livelihood concerns are reported as a primary need at much higher levels than other persistent issues such as the rehabilitation of infrastructure and services—reported at 49 percent—and health services and access to relief commodities—both reported at 39 percent.

KEY FIGURES

U.S. GOVERNMENT RESPONSE



Number of USG implementing partners providing WASH assistance

WASH

With USAID/BHA and State/PRM support, IOM, UNHCR, WHO, and NGO implementing partners are providing essential WASH services for vulnerable populations in conflict-affected areas of Iraq. USAID/BHA partners are providing safe drinking water, including water trucking where necessary; supporting operations and maintenance for WASH infrastructure in IDP camps; rehabilitating WASH infrastructure outside of camps; and promoting sanitary living conditions that protect communities, enhance dignity, and limit the spread of communicable diseases. In addition, USG partners are responding to the coronavirus disease (COVID-19) pandemic and ongoing outbreaks of communicable diseases by conducting hygiene awareness campaigns, community-level surveillance, and distributing hygiene kits to vulnerable populations. Partners have also installed handwashing stations in informal settlements, camps, and public areas in out-of-camp locations and rehabilitated WASH facilities in primary health care centers across eight Iraqi governorates.



Number of health consultations provided at IOM-supported facilities from October 2021 to March 2022

HEALTH

With USG support, NGOs and UN partners—including IOM, UNHCR, and WHO—continue to provide primary health care services for IDPs across conflict-affected areas of Iraq. USG implementing partners are improving the quality and accessibility of primary health care services, including mental health care services, through the provision of staff capacity-building exercises, staff salaries, and medical supplies and equipment. In addition, USG partners are responding to COVID-19 and other communicable diseases by training medical professionals on screening, identification, triage, and treatment of suspected cases; strengthening disease surveillance systems; implementing risk communication and community engagement activities; and providing critical medicines, medical equipment, and other supplies. State/PRM NGO partners are also providing quality integrated health, mental health and psychosocial support services (MHPSS), and gender-based violence (GBV) prevention services to underserved Iraqi IDPs, returnees, and vulnerable members of host communities in Dohuk and Erbil governorates.



critical civil documents issued with support from State/PRM partner UNHCR in 2022

PROTECTION

Addressing protection concerns remains a top priority for the humanitarian response in Iraq, with USG partners supporting a range of critical protection initiatives for IDPs, returnees, Syrian refugees, and host communities. With funding to IOM, UNHCR, and NGO partners, State/PRM promotes durable solutions for displaced populations in Iraq by facilitating sustainable integration and helping provide accurate information on security conditions and livelihood opportunities in host communities and areas of origin in addition to legal assistance, civil documentation, and awareness-raising support to remove legal barriers to durable solutions for displaced

individuals. State/PRM NGO partners also support GBV prevention and response programs, including through group psychosocial support sessions and support for women and girl safe spaces. In addition, USAID/BHA supports IOM, the UN Children's Fund (UNICEF), WHO, and five NGO partners to provide protection services, including case management support, GBV prevention and response services, increased access to MHPSS services, legal assistance for civil documentation, mine risk education, and activities that aim to prevent and respond to protection risks among children.



Number of USG implementing partners providing shelter and settlements services



USG funding supports IOM, UNHCR, and one NGO partner to provide critical shelter services for displaced Iraqis. USG partners are distributing shelter kits and other relief commodities, as well as providing coordination and management services at camps and informal settlements. Partner organizations are also supporting the rehabilitation of conflict-damaged houses, upgrading unfinished or abandoned buildings, and improving camp and informal settlement infrastructure to provide safe and dignified living conditions that align with humanitarian standards. Additionally, State/PRM NGO partners support displaced households through shelter upgrades and improvement projects that help to increase accessibility in displacement camps in northern Iraq.



In dedicated USAID/BHA funding for food assistance activities in FY 2022

FOOD SECURITY

With USAID/BHA support, WFP continues to deliver emergency food assistance in the form of cash transfers to populations in need in Iraq, reaching the most vulnerable IDPs and Syrian refugees living in camp settings while also supporting local markets. In addition, WFP continues to assist the Gol's efforts to modernize its social safety net programs and capacity building to improve the planning and delivery of food assistance to IDPs and facilitate the transition of international emergency food assistance programming to Gol-managed safety net activities.

CONTEXT IN BRIEF

- The USG has been responding to the current humanitarian crisis in Iraq since January 2014, when a surge by ISIS caused mass displacement as civilians fled to areas of relative safety, including the Iraqi Kurdistan Region, to escape violence. Approximately 5 million former IDPs, the majority of people displaced since 2014, had returned to their areas of origin or resettled in other locations as of June 30, 2022.
- Approximately 2.5 million people require humanitarian assistance in Iraq in 2022, according to the UN.
 Climatic shocks, the COVID-19 outbreak, economic challenges, ongoing insecurity, and protracted
 displacement continue to adversely affect Iraq's IDP, host community, and returnee populations at a
 time when the capacity of both the Gol and the Kurdistan Regional Government to respond to
 humanitarian needs remains challenged by budgetary constraints.
- On December 6, 2021, U.S. Ambassador to Iraq Matthew H. Tueller redeclared a disaster in Iraq for FY 2022 due to the ongoing complex emergency and humanitarian crisis.

USG HUMANITARIAN FUNDING FOR THE IRAQ RESPONSE IN FY 20221

\$42,925,000
\$3,400,000
\$1,000,000
\$300,000
\$22,000,000
\$12,900,000
\$279,279
\$82,804,279
\$65,136,319
\$14,500,000
\$30,500,000
\$270,000
\$41,300,000

	CCCM, Protection, Shelter and Settlements	Jordan, Lebanon, Syria	\$14,800,000
UNICEF	Education	Countrywide	\$2,000,000
WHO	Health	Countrywide	\$547,840
TOTAL STATE/PRM FUNDING	i		\$169,054,159
TOTAL USG HUMANITARIAN FUNDING FOR THE IRAQ RESPONSE IN FY 2022			\$251,858,438

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 30, 2022.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: cidi.org
 - o Information on relief activities of the humanitarian community can be found at reliefweb.int.

USAID/BHA bulletins appear on the USAID website at usaid.gov/humanitarian-assistance/where-we-work