# COVID-19 RESPONSE OVERVIEW #7

7 - 28 December 2020



#### SITUATION OVERVIEW

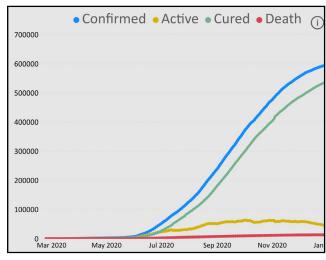


IOM IRAQ COVID-19 Strategic Response Plan<sup>1</sup>, February-December 2020, USD 20.45 million 592,528 Confirmed Cases | 46,423 Active Cases | 533,341 Cured Cases | 12,791 Death Cases<sup>2</sup>

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. People can travel freely across governorates, including between federal lraq and the Kurdistan Region.

International airports in Baghdad, Basra, Erbil, Najaf, and Sulaymaniyah are open for commercial flights but are running at lower capacity.<sup>3</sup>



Cumulative Distribution of Cases in Iraq by Health Status



<sup>1</sup> For IOM Iraq COVID-19 Strategic Response Plan, please visit <u>iraq.iom.int</u>

<sup>2</sup> 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

<sup>3</sup> COVID-19 Mobility Restrictions and Public Health Measures Report – 1 – 31 December 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**

The following main activities were implemented:

• IOM Iraq is working with the 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 Iraq has continued to coordinate with Health Cluster partners, camp management agencies,



Several coordination meetings conducted.

and other stakeholders in governorates where supported health clinics are affected by IDP camp closures.

IOM Iraq has continued to coordinate closely with officials from Erbil and Baghdad International airports, Ibrahim-Khalil ground crossing in Dohuk, and Haj Omran ground crossing in Erbil, MoH, WHO, and other key partners to plan additional support and discuss technical guidance.



# Tracking Mobility Impacts

The following main activities were implemented:

IOM Iraq's <u>Displacement Tracking Matrix (DTM)</u> collected information on mobility restrictions within Iraq as well as at Points of Entry (PoEs), these restrictions include limitations on mobility across governorates as well as on commercial and trade activity, curfews, government and residency office operating hours, and legal regulations, and assessed 30 locations in-



f Iraq mobility restriction reports published.

cluding PoEs along land borders and maritime boundaries. Six were reported as closed, 10 partially open, three open, and 11 open only for commercial traffic, as well as domestic movement restrictions. DTM produced one lraq mobility restriction reports<sup>4</sup> during the reporting period, presenting an overview of mobility restrictions for the monitored PoEs as well as for Iraq in general.

<sup>4</sup> Ibid http://iraqdtm.iom.int/COVID19/MovementRestrictions



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:

- Awareness/sensitization sessions on COVID-19 held, for individuals in camp and non-camp settings in Najaf, Dohuk, Ninewa, Kirkuk, and Diyala; and with children aged 6-15 in Anbar, Kirkuk, and Baghdad. 24 small group sessions were held to cover a total of 248 youth. As part of the activities, children's' information, education and communication (IEC) materials (board games, coloring books, card games) were distributed to the participants.
- Recruited and trained 19 community mobilizers (9 males, 10 females) across Ninewa, Erbil, Dohuk, Anbar, Baghdad, and Kirkuk governorates to support RCCE activities.
- Distributed and installed 34 screens and 64 USBs in 32 locations across Ninewa, Erbil, Dohuk, Anbar,



Over 56 awareness/sensitization sessions, reaching more than 1,200 individuals in camp and non-camp settings in 7 governorates.

More than 49,000 COVID-19 card games, board games, coloring books, flyers and posters distributed.

Baghdad, and Kirkuk governorates, including supported PoEs and health facilities. They are currently screening COVID-19 messages in Arabic, Kurdish, and English to patients and visitors.

- Hygiene promotion/health sessions health for community mobilizers, community members, and children in Khanke camp in Dohuk to raise awareness on COVID-19 hygiene precautions.
- Six trainings held for civil society organization (CSO), and volunteers on Communication with Communities (CwC), Accountability to Affected Populations (AAP), and COVID-19 in Ninewa and Dohuk attended by 31 participants.





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

# Points of Entry (PoE)

The following main activities were implemented:

Conducted two-day training sessions at three PoEs (Erbil airport, Haj Omran ground crossing in Erbil, Ibrahim Khalil ground crossing in Dohuk). Training modules included an overview of COVID-19, introduction to public health response and International Health Regulations (IHR), management and referral of sick travelers, risk communication, and more. PoE health officials gave positive feedback on the training content in all sessions.



Technical support for PoE activities continued.

8 training sessions conducted, reaching 75 PoE health officials.

 Distributed supplies and equipment to Baghdad airport, Erbil Airport, and Ibrahim Khalil ground crossing in Dohuk to support PoE implementation (Infection Prevention and Control [IPC] supplies, Personal Protective Equipment [PPE], data management equipment).

# Infection Prevention and Control (IPC)

The following main activities were implemented:

- Conducted refresher IPC trainings for DoH clinical and non-clinical staff at supported clinics in Ninewa. This ongoing capacity building for DoH counterparts incorporating aspects of IPC measures, rationale use of PPE, data management and reporting, and risk communication components.
- Screening and Triage processes continued at IDP health clinics prior to patient consultations (Ninawa Jadaa camp; Shekhan camp; Erbil Debaga camp; Anbar Al Mateen camp). These processes are underway in 20+ community clinics throughout Anbar, Baghdad, Erbil, Dohuk, Kirkuk, and Ninewa, ensuring patients were screened for COVID-19 prior to health consultation.



20 DoH clinical and non-clinical staff trained. More than 58,700 individuals screened or triaged for COVID-19 at supported health clinics.



# Case Management and Continuity of Essential Services

The following main activities were implemented:

Continued support to 23 outpatient health facilities and six inpatient facilities in Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates. Support included human resources support, capacity building, supplies and equipment, and technical support.



23 outpatient health facilities and 6 inpatient facilities supported in Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates.

6 DoH COVID-19 response teams supported.

Supported 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.



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 2 camps and 65 informal sites in Anbar, Baghdad, Ninewa, and Salah Al-Din.
- Followed up with committees (Women Empowerment Group [WEG], Youth Empowerment Group [YEG] and managements committees) for any COVID-19 cases registered in the sites.
- Ongoing coordination with partners to establish quarantine area in AAF camp in Anbar; and installing handwashing stations in the IOM supported sites in Ninewa, Anbar, and Salah Al-Din.
- Conducted awareness sessions about COVID-19 in the targeted informal sites in Latifiya in Baghdad



- 2 Camps and 65 informal sites supported with CCCM to prevent, contain, or manage cases.<sup>5</sup>
- **13** hygiene promotion sessions conducted, reaching around **255** beneficiaries.

and hygiene promotion sessions and games for CCCM empowerment group members in 20 informal sites in Salah Al-Din to roll out to other households (approx. 600 households) and their children living in the same locations.

- Distributed and installed water tanks and garbage containers as well as conducting trash collection and site cleaning activities in the targeted informal sites in Tal Abta and Ba'aj in Ninewa.
- Supported Mercy Corps, a WASH partner, to liaise and coordinate with the community on their endeavor to distribute COVID-19 preventive kits to the targeted households in Tal Abta in Ninewa.

#### **Protection**

The following main activities were implemented:

- 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. During December, IOM continued and concluded MHPSS and COVID-19-related support through supporting the Iraqi High Commission for Human Rights (IHCHR) Sahtak Aham hotline in Baghdad, run by a group of civil society organizations, doctors, and other medical personnel.
- To further understand Mental Health and Psychosocial Support (MHPSS) needs, in the previous reporting period, completed an MHPSS survey in target



More than **600** beneficiaries received protection services.

More than **380** beneficiaries reach through the Protection help desk and **250** beneficiaries reached through referrals.

areas and an assessment on livelihoods and MHPSS integration in IDP locations like Dohuk, Hassan Sham in Ninewa, and Wahed Huzeiran in Kirkuk.

 Provided protection information services on rights and services through protection help desks located in IOM safe spaces and helped people to access services through referrals where appropriate. IOM teams are providing information sessions in Sharya and Khanke camps in Dohuk and Hassan Sham camp, Mosul, and Sardashti informal settlement in Ninewa. Programming monitoring and case management will increase in 2021.

<sup>5</sup> The number of supported camps decreased as some camps were closed at the end of November, AAF camp in Anbar was considered as 16 sub camps, and it is now considered as one camp. IOM has started managing Jeddah camp in Ninewa.



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:

- Supported Small and Medium Enterprises (SMEs) through the Enterprise Development Fund (EDF) including businesses supporting COVID-19 responses by producing PPE and other supplies, online delivery and other essential activities. This included verifying EDF applications received for EDF-Women and EDF- Renewable Energy after calls for Expression of Interests (EoI) closed on 22 November, and a pitching event with EDF-Innovation applicants presenting business ideas and plans.
- Delivered individual livelihoods services to 76 beneficiaries. These 76 beneficiaries have received a
  Business Support Package (BSP) which is an in-kind
  or cash grant to support individuals start or expand
  their micro-enterprise.



Milestones verification and monitoring were conducted to the SMEs received an EDF grant.

76 beneficiaries received BSP support.

8 COVID-19 related CfW activities targeted130 beneficiaries implemented.

• Implemented 24 CfW activities to support individual livelihood in Diyala, Ninewa, Baghdad, Erbil, Anbar, and Salah Al Din reaching 838 beneficiaries. Among these eight are related to COVID-19, and 130 beneficiaries took part including cleaning campaigns in health facilities, supporting a quarantine facility, and sewing face masks and other protective equipment. Another 214 beneficiaries are currently participating in CfW activities in Kirkuk, Diyala, Anbar, and Ninewa but they are only planned to be completed in January 2021.



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. Specifically, in this reporting period, IOM has been shifting CfW activities in order to implement activities more suitable to female participants. These activities are in safe and socially acceptable spaces for women to work at.

IOM takes a number of approaches to ensure appropriate and respectful participation of persons with disabilities in all activities, including those related to the COVID19- 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 people with disabilities as focal points and sharing focal point information; 6) ensuring people with disabilities are informed about all activities.

# IOM Iraq COVID-19 Response Supported By:





















