

FINAL REPORT



International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

IRAQ: HUMANITARIAN EMERGENCY

Appeal No. 05EA026
2 April 2007

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in 185 countries.

In Brief

Interim Final Report; Period covered: 10 November 2005 to 31 January, 2007; Appeal coverage: 50%.
[<click here to link directly to the attached Interim Financial Report>.](#)

Appeal history:

- **Launched on 10 November 2005 for CHF 16,750,000 (USD 12 million or EUR 10 million) for 12 months to assist 60,000 families or 350,000 beneficiaries.**
- **With operations update no.3, the budget was decreased to CHF 7,925,770, (USD 6,333,866 or EUR 4,995,340) and the operation was extended by one month to 31 December 2006.**
- **With operations update no.5, the budget was increased to 7,953,524 (USD 6,528,647 or EUR 4,947,637) and the operation timeframe was extended to 31 January 2007 due to delays in implementing ongoing activities as a consequence of grave security situation in the last quarter of 2006; Final Report was therefore due on 30 April 2007. The left-over balance is proposed to be rolled into the ongoing emergency appeal (no.MDRIQ002), which was launched on 12 February 2007.**
- **Disaster Relief Emergency Funds (DREF) allocated: N/A**

Operational Summary

The International Federation has supported the Iraqi Red Crescent Society (IRCS) to deliver relief assistance to those most in need or victims of the consequences of the socio-economic crisis, natural and human-made disasters that has harshly hit the country during the reporting period.

The joint operation has delivered humanitarian assistance to meet the immediate needs of over 37,500 families (225,000 people) with non-food items and monitored three out of the four national polio immunisation campaigns for an average of 85,000 beneficiaries; namely children under the age of five (in each round). In addition, it promoted health activities through its Community Based First Aid programs that included public awareness related to the spread and the prevention of HIV/AIDS - integrated community based activities carried out by its dedicated volunteers in the branches. Providing psychological support to its staff and volunteers, children between 12 and 18, affected families; rehabilitating/constructing and equipping 2 hospitals and one warehouse; and conducting numerous training workshops for staff and volunteers (at headquarters and branches) in order to sustain the quality of activities of the society were the other significant outcomes of this operation.

This operation is aligned with the International Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- **Reduce the numbers of deaths, injuries and impact from disasters.**

- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

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All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation's website at <http://www.ifrc.org>

1. Background and Situational Analysis



The deterioration of the security and socio-economic situation in Iraq in 2006 resulted in an increase of the number of displaced people

This interim final report covers the activities between 10 November 2005 and 31 January 2007 related to the Iraq Humanitarian Emergency Appeal (no.05EA026). In the period of programme implementation, a number of operation updates have been posted on the International Federation's website (<http://www.ifrc.org>) highlighting the progress of activities, the achievements, as well as challenges faced at each phase of the process.

In 2006, the security and socio-economic situation in the country had further deteriorated to its lowest level compared to the previous years of the immediate aftermath of the 2003 war. In 2006, some 2 million people have left the country to neighbouring countries¹; over 650,000 people have been displaced in the course of the year and as a result the total figure of the internally displaced has increased from 1.2 million to 1.8 million. In addition, the number of civilians killed during the

year has ranged between 16,500² and over 34,000³, reaching the highest death toll ever recorded in a single year. Such statistical data, especially killed civilians, have remained scarce as well as controversial and are often viewed with critics and scepticism. However, it shows the scale as well as the complexity of the disaster in the country.

1.1 Internally displaced persons (IDPs): The most recent figures from the UN (Cluster F - UN Assistance classification) on the "Newly Displaced Populations in Iraq" (*consolidated reports from different sources* issued on 31 December 2006) shows that 106,660 families (639,960 individuals) have been displaced since the incidence of

¹ United Nations High Commissioner for Refugees (UNHCR) report, January 2007

² Iraqi government report, January 2007

³ United Nations (UN) report, January 2007

bombing of the holy shrine in Samara - late February 2006. This is on top of the 1.2 million people already displaced before 2006; bringing the total IDPs in Iraq to 1.8 million.

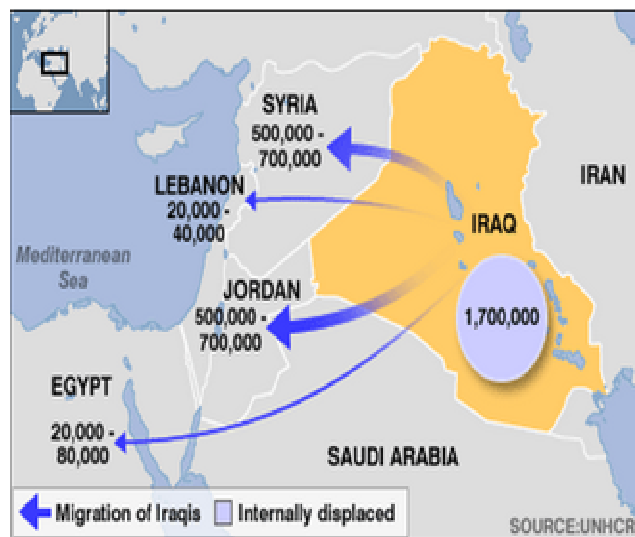


In Baghdad alone, more than 50 families (300 people) were leaving their homes on daily basis

The breakdown of population displacement by geographic area⁴, in 2006 alone, is as follows:

- **Northern governorates:** 14,012 families (84,072 individuals) have been displaced from Dahuck, Erbil and Sulaymaniyah;
- **Central governorates:** 42,278 families (253,668 individuals) from Ninewa, Kirkuk, Anbar, Baghdad, Diyala and Salah al-Din;
- **Southern governorates:** 50,370 families (302,220) from Babylon, Basrah, Diwaniya, Kerbala, Missan, Muthanna, Najaf, Thi-Qar and Wassit.

1.2 Refugees in Iraq: Despite the high number of internally displaced in the country, Iraq is at the same time hosting a total of 51,389 refugees who have been there since the previous regime. These include 13,066 Iranians; 681 Syrians; 22,500 Palestinians; 142 Sudanese and 15,000 Turks. These refugees seek particular protection as well as assistance as Iraq is currently in a situation of serious political turmoil.



Exodus of Iraqi refugee: According to early January 2007 estimates of the United Nations High Commissioner for Refugees (UNHCR), over 1.8 million Iraqis have fled to neighbouring countries; amongst the countries of main destinations included Syria (700,000 to 1 million) and Jordan (700,000 to 1 million). However, it is difficult to determine what percentage of the 2 million asylum seekers have left their place of origin because of security risks/threats vis-à-vis economic or other reasons – unemployment rate in Iraq has reached some 70%. According to observations of both nationals and foreigners alike, it appears that a good percentage of the refugees include the middle class or people with skills and also families who seek schooling to their children - continue education without disruption or security risk, etc.

1.3 Deteriorating socio-economic and life conditions: Besides the war and armed conflict situation, the post-war situation in Iraq has been aggravated by factors that caused increased *social and health problems*. In effect, many and as well serious humanitarian needs have continued to develop particularly in the water, sanitation and health sectors. The increasing levels of insecurity across the country are the main sources of concern and frustration experienced by the Iraqi population; their access to even the existing basic social infrastructures and services have been seriously constrained due to intense armed conflicts and security situations ensued by the sporadic fighting between the rival armed groups.

⁴ UNAMI – Cluster “F” report, December 2006

Note: Cluster F – UNHCR coordinated (with IOM deputy) sectoral cluster responsible for all issues related to IDPs

The household survey data of World Food Programme (WFP)/Government published in 2004 (base line) and 2006 respectively clearly portray the deteriorating socio-economic and living conditions in Iraq and confirm the massive need for humanitarian assistance to avert human catastrophe. According to the report, *some 50% or 12.4 million people are at a high risk of food insecurity. Extreme poverty (less than 30 US dollar/month) increased from 11% (2.6 million) to 15.4% (4.1 million) and the highly vulnerable (between 30 and 54 US dollar/month) increased from 15% (3.6 million people) to 31.8% (8.3million people).*

In addition to the above findings, the household survey report (middle of 2005) contains facts as the following: an average unemployment rate of 58.6% (please note that according to Ministry of Labour & Social Affairs report, this rate has increased to 70 % for the period between August 2005 and August 2006), 20% of under weight children, 4.1 % or 1,066,000 widowed women, 4.1 % of orphaned children, etc. that clearly reflects the low level of health and general living conditions in the country. The disadvantaged or at risk communities with such low level of living conditions have reduced resilience to withstand any events of natural disasters such as seasonal flash floods (in the spring seasons) and even the annual winter weather conditions. The survival of these socially vulnerable is totally dependent on external assistance or relief handouts.

1.4 Health & nutrition:

Health services are pressing needs in the country, in both urban and rural areas. Shortage of potable water along with insufficient sanitation structures in most areas especially in cities are factors that contribute to serious health hazards. While the Government undertakes all efforts to keep hospitals working and pursue for vaccination campaigns, Primary Health Care centres (PHCs) are lacking proper equipment, medicines and qualified staff. In areas where IDPs are concentrated, the additional burden results in the inability of PHCs to serve them. Lack of access to health services particularly affects pregnant women and infants or children. Access to services is often affected because of distance, unsafe passage or the location of source being controlled by an opposing group or militant groups. Lack of access to fuel due to non-availability/shortages or high costs are common in most Governorates.

The two scenarios – lack of access to food/nutrition, potable water and lack of sanitation – had a direct impact or have negatively contributed to the poor health conditions of the population.

WFP household survey report (May 2006) is an additional evidence for the deteriorating conditions and the impact on the well being of individual citizens and particularly on the vulnerable communities:

- Fifth of children are underweight and a third of children are chronically malnourished,
- Average unemployment rate of 58.6 per cent (please note that the figure has increased to 70 per cent in August as per the Ministry of Labour and Social Affairs (MoLSA) report of September 2006).

Furthermore, the high percentage of fleeing health professionals has contributed to the drastic decline of the national health services. The World Health Organisation (WHO) sources stated that health facilities and staff have been targeted on a regular basis and that there has been an increase in the number of medical personnel killed and injured in the past three years; the recent data, at the end of 2006, showed that about 12,000 have fled, 2,000 have been killed, and some 250 kidnapped since 2003.

1.5 Food & non-food distribution:

Even according to data of mid-2005, there are over 12.4 million people who needed relief assistance and the Government Public Distribution (PDS) remains the main source of food distribution in the country. The truth is that there has been much more deterioration in the health and nutrition level of the population between mid-2005 and 2006. Whatever the data states, unfortunately, securing access to food rations to the socially vulnerable and the internally displaced is all the time faced with enormous obstacles like:

- a) Frequent delays on arrival of imported supplies to the main port;
- b) Logistical problems like inadequate transportation and warehousing contribute to inconsistency of regular distribution;
- c) Security situation hinder the planned distribution process to organize inland transportation to meet distribution schedules to the public, and

d) Delivery of food and non-food assistance has remained more difficult when it comes to meeting the needs of the internally displaced as they keep on moving to new destinations (most have moved to over 2 destinations); and because of difficulties to register as well as transfer names and new destination of the displaced families to the authorities of the public distribution system (PDS).

Still, the need for food and non-food distribution is on the increase because of the increase in the number of internally displaced in the country - socio-economic and security deterioration contributes to the complexity of the existing problem. In 2006, the main players in the food and non-food distribution included the following governmental, international agencies and non-governmental organisations (NGOs):

- Government Public Distribution system (PDS) (covered the bulk of the food distribution);
- WFP (distributed food parcels through the Ministry of Health - Primary Health Care Centres - and Ministry of Education - schools program). WFP supplementary food assistance covers 3.5 million (vulnerable) beneficiaries;
- International Committee of the Red Cross (ICRC) (distributed food parcels through IRCS or social welfare government agencies);
- UNHCR and its affiliated agencies;
- Iraqi Red Crescent (using the in-kind food assistance from ICRC or neighbouring national societies).

Non-food distribution is also carried out by the Iraqi government and the international organisations. The non-food assistance distribution has remained crucial to both the socially vulnerable and internally displaced. The main reason is that the vulnerable populations lack constant cash income on monthly basis to support their survival. This gap is being met by:

- Government agencies;
- WFP;
- Iraqi Red Crescent with support from components of the Movement (mainly IFRC, ICRC & neighbouring national societies); United Nations Children's Fund (UNICEF); UNHCR and its affiliated NGOs.

1.6 Water and Sanitation:



Water and sanitation structures have been badly affected by various crises in Iraq

Water and sanitation structures have been badly affected by various crises which have affected Iraq, notably because of insufficient maintenance and lack of access to drinking water supply systems. Water and sanitation services are seriously deficient. Consequently, many either have difficulties in accessing water due to distance or some only have access to non-potable water. Insufficient sanitation structures and the shortage of potable water have caused serious health hazards.

Collapse of and insufficient piped water supply, non-functional sewerage system and restricted electricity supply (4 hours a day) have contributed to the increased health hazards. The collapse of the sewerage system has further exposed the population to gastroenteritis, typhoid fever, diarrhoea and hepatitis. More children are getting sick due to lack of medical assistance and unbalanced diet.



Collapse of piped water supply has contributed to the deterioration of water and sanitation structures

1.7 Education system:

Educational system in Iraq is also critically endangered more than ever; the insecurity/instability in the country has seriously affected the school education system; disruptions are frequent because of curfews; professors, lecturers and university students are being threatened. The schools reopened after two months of delay; and the school drop outs are also on the increase (12.3% or 1,270,996)⁵ partly because of:

- a) Fear of security risks faced every day while going to or coming from schools
- b) Most vulnerable families not being able to afford to buy clothing and school materials for their children
- c) Some children that felt obliged to contribute to the family income leaving schools to find self employment or go to streets of the main cities for begging, and of course, without excluding the temptations of those that resorted to prostitution (12.3 per cent of the school age children left school).

Generally speaking, education is not deemed a priority under such circumstances for both parents and children and especially for the girls that could risk more violence because of their gender.

1.8 The Iraqi Red Crescent Society

In the midst of such hostile working environment, the Iraqi Red Crescent Society (IRCS), with support from the Red Cross and Red Crescent Movement and through its strong country wide structure, has continued to deliver timely humanitarian assistance to those most in need owing to its dedicated staff and volunteers.

The society has also carried out joint operations with the ICRC to 27,688 families (166,128 individuals) - mainly to the IDPs and victims of violence. Details of joint ICRC and IRCS operations can be found in the ICRC reports. Furthermore, the Iraqi Red Crescent had to scale up its operational alliance with government Ministries (Ministry of Health, Ministry of Displacement and Migration, etc.) and UN agencies to address the immediate needs of the hundreds of thousands of most vulnerable families.

However, this was not without sacrifice; about 13 killed and 31 wounded in cross fire, and 44 abducted of whom 40 of its staff/volunteers were abducted very recently (17 December 2006) and were taken from its Baghdad branch office by an armed group in uniform while on duty. Of these, 12 are still in the hands of their abductors despite the very strong protest made by the Movement Components for their immediate and unconditional release. In addition, The National Society has also been exposed to armed attacks that inflicted property loss and damage of its 17 trucks/vehicles, physical attacks to 25 of its relief convoys, 10 warehouses and to its 14 sub-offices.

2. Coordination

The Iraqi response operation of the Movement components is closely coordinated between the operational partners and in accordance with the memorandum of understanding (MoU) signed amongst ICRC, IRCS and the International Federation in early 2006. The support to the IRCS has been as follows:

2.1 Providing emergency relief assistance:

- The Federation mobilised support to IRCS programs/activities related to the socially vulnerable and victims of natural disasters;
- The ICRC in its part mobilised resources to assist IRCS program activities related to populations exposed to and/or affected by armed conflict and violence in Iraq;
- The Federation delegation has remained as one of the members of the different coordination and an information sharing forum established by the UN agencies. In these meetings, it has voiced the concerns, activities, and challenges of the joint IRCS/Federation operations and has continuously explored opportunities for areas of collaboration with the aim of harmonising program activities with government and international organisations in Iraq. The forums include Emergency Working Group (EWG); Internally Displaced People (IDP) working group; etc.

⁵ World Food Programme/Ministry of Planning and Development Cooperation (WFP/MOPDC) household survey report, May 2006

2.2 Partnership meetings: Geneva/Istanbul

Two important meetings were organised in Geneva and Istanbul to update members of the stakeholders – participating national societies (PNSs), national societies of the neighbouring countries, and the responsible people from the Secretariat. The primary aim was to discuss challenges that the Iraqi response operation is faced with, and explore possibilities to generate more funds to cope with the rapidly increasing humanitarian needs in Iraq. The Istanbul meeting recommendation included a stronger coordinated approach between the components – IRCS, ICRC, IFRC, PNSs and neighbouring NSs.

3. The operation - objectives, achievements, impact

In general, it was a very difficult operation carried out by the Federation and the Iraqi Red Crescent – suffered from inadequate and delayed appeal response, the prices of food and other commodities skyrocketed because of government price increase on fuel and gas in January 2006, flash floods disasters in early February and November, upsurge of sectarian violence as of late February that prompted cyclic and spiral sectarian violence resulting in thousands of deaths, hundreds of thousands of internal displacement and/or asylum seekers to neighboring countries.

3.1 Disaster Management

War and armed conflict have been the dominant disaster factors in Iraq in the past three decades - it has waged more than three wars. The country has not managed to sort out the crisis that followed the 2003 war, and is still staggering to establish law and order, socio-economic recovery, etc. so as to stand firmly on its legs and fulfil the aspirations of its 26 million populations.

Flash floods are the major natural disasters in the country, claims lives and heavy property damages every year. It occurs along the tributaries of the two major rivers (in winter/spring seasons) as a consequence of heavy rains, melting of the snow in the high lands and also the release of water from the dams. Besides floods, sand storms, severe cold winter conditions, though localised and less damaging, are common disasters in the country.

Overall goal: To address vulnerability of the deprived groups of the population severely affected by political instability, economic decline, and collapse of the social security structures.

Objective 1: To ensure that 50,000 most vulnerable families across the country are identified according to clearly established criteria and are assisted with the non-food relief kits containing the most essential relief goods.

The plan for 2006 was focused on distributing assistance to socially vulnerable families and victims of natural disasters. The operation has delivered assistance to 37,500 families out of the planned 50,000 families, the beneficiaries of whom belonged to two sets of sectors:

Socially vulnerable families: 29,500 families have received assistance through the IRCS branches. The target beneficiaries have been identified by the branches together with the local authorities based on pre-established selection criteria. The criteria included:

- a) Families without a provider or income or shelter.
- b) Families without a provider or shelter but with little income.
- c) Families without a provider, but with some income and/or shelter.
- d) Families with a supporter, but with no income or shelter



Victims of floods disaster in a temporary shelter

The areas shown on the map (Northern, Eastern and Southern Governorates of Iraq) are highly prone to the annual floods disasters.

The second flash floods disaster hit the northern governorates in November 2006 which affected over 5,000 families and the National Society, with support from the Federation, has delivered assistance to 3,000 vulnerable families that were most in need.

Victims of flash floods: There have been two flash floods disasters that hit the country in 2006 (in February and early November 2006) that affected the Northern, Eastern and Southern Governorates (9 out of 18 governorates). With the support from the Federation, the society has assisted 5,000 of the 10,000 most needy families in its operation in February (please refer to the final report on the Federation web site).



Governorates prone to floods disaster

The content of non-food items have depended on the nature of the disaster or to the weather conditions. The Federation/IRCS non-food **family ration** included: 1tent, 4 blankets, 1kitchen set, 4 mattresses, 4 pillows, 2 sets of linen, 2 jerry cans (fuel and water), 1 kerosene stove, 1 kerosene lamp, 1 kerosene cooker, and 1 kerosene heater.



Relief Distribution to Socially Vulnerable Families

With the support of the Federation alone, the National Society has delivered assistance to socially vulnerable families (large families with no or little income, widows with families to support but with no income, elderly and displaced etc.) and victims of the floods disaster. This was for 37,500 out of the planned 50,000 target beneficiaries.

It is worth mentioning that the plan to distribute winter assistance to 25,000 families in December 2006 did not happen because of inadequate and delayed response to the Federation appeal launched on 10 November 2005.

Objective 2: Enhance the disaster management capacity and technical skills of the staff and volunteers; develop response plan and mechanisms for emergency information, communication and resource mobilisation.

One of the priorities of the society, as reflected in the plan for 2006, was to increase the knowledge, skills and capacity of the IRCS staff and volunteers in Disaster Preparedness. In 2006, two of the four planned training workshops - Sphere & Logistics training - have been conducted for over 40 staff & volunteers. As the society is decentralising its response operation to the branches (18), these training programs have been useful in accelerating the response capacity building at branches level in particular as branches are main program implementers.

Decentralisation of the response operations to the branches has automatically triggered the need for decentralisation of the warehousing, logistics functions and the preposition of essential relief items. The 7,500 family rations of the planned 10,000 response preparedness items were purchased and pre-positioned at HQs and at branches prone to disasters. During the second floods disaster in November 2006, these relief items were quickly mobilised to the affected areas and the society was proud to have responded on time to the acute needs of victims. It has been a good demonstration on the values and effects of response preparedness in reaching the victims at a reasonable time.

3.2 Rehabilitation/Reconstruction:

Objective: The IRCS has rehabilitated or reconstructed a number of its health institutions and its logistics base (warehouse) in Baghdad, and has as well contributed towards the rehabilitation of the drinking water supply system.

During 2006, the physical rehabilitation of two IRCS hospitals in Baghdad and one in Kut Governorates has been finalised. The plan to construct an IRCS logistics base/warehouse in Baghdad has not been realised. Implementation of the plan will start soon, with the fund secured from the Malaysian Red Crescent Society.

The strategic plan for the development of the IRCS warehouse structure includes:

- **North:** The construction of the Salah Al-Din regional warehouse that covers the northern Governorates of Dahuk, Erbil, Sulaymaniyah and Ninewa has been completed in 2006.
- **Erbil regional warehouse:** Based on the request of the IRCS, the original plan (Basra regional warehouse construction plan) has changed to Erbil (Included in 2007 appeal).
- **Centre:** For the construction of the Baghdad regional warehouse that covers the central governorates of Ninewa, Kirkuk, Anbar, Baghdad, Diyala and Salah al-Din, a hard pledge is already secured from the Malaysian RCS and is to be realised in 2007.

4. Health and Care

Existing Challenges in the Health Service delivery:

There are still numerous factors that are contributing to problems being faced in the health service delivery in the country. These include:

- Instability/security threats (according to the recent Ministry of Health report, over 1,000 doctors have left the country in the past three years. Doctors have become primary targets or victims in the ongoing wide spread of kidnapping and killing);
- Annual in-take of medical schools is on the decline and therefore it is difficult to fill the gaps and demands of medical professionals;
- Routine hospital services are interrupted because of the security situation and even then are mostly overwhelmed with casualty cases from the ongoing armed conflict and violence.

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The decline in the health service delivery system has also been worsened due to the government budget cuts in the health expenditures (shortage of medical supplies and equipment and deteriorated physical facilities).

Overall goal: Reduction of endemic health problems of vulnerable populations in the 18 governorates through the development of community organizations and the active participation of trained IRCS volunteers in the health intervention, promotion and psychosocial support activities.

Iraqi Red Crescent contribution to the National Health Service delivery:

The IRCS & Federation joint operation has rehabilitated two PHC centres, four hospitals (two maternity & two surgical) of 190 beds and two PSP or vocational training centres in 2005 and 2006. These efforts have been appreciated as part of the contribution to improve the national health & care services in the country.

Hospital/clinical services:

- Baghdad IRCS surgical hospital of 90 bed capacity (has treated 7,200 patients in 2006),
- Baghdad IRCS maternity hospital of 52 beds capacity (has catered services to 21,600 patients in 2006),
- Baghdad IRCS paediatric hospital with 22 beds
- Kut governorate IRCS maternity hospital of 30 beds capacity (completed in December).

4.1 First Aid

Objective: The IRCS has an increased capacity in planning, organizing and implementing regular First Aid and Health Promotion (HIV/AIDS) courses as a prerequisite to the increased participation of its volunteers in the national health intervention programmes.

Training in first aid skills has become very important, more than ever, in today's Iraq because of the circumstances that surround the political and armed conflict situations that has ravaged the pleasure and happiness of the country. In 2006 alone, the IRCS has trained 60 first aid trainers and provided basic first aid training to its 1,240 staff/volunteers at HQs and branches level. The volunteers have been actively engaged in the various activities of the society such as distribution of relief assistance, polio immunisation campaigns, etc.

4.2 HIV/AIDS

In Iraq, there have been some cases detected even during Saddam's time and the situation has aggravated in the past four years because of the war and armed conflict, security and socio-economic deteriorations that evolved following the war of 2003.

Objective: Increase awareness on the means of the HIV/AIDS transmission, preventive measures and issues related to stigma attached to people with HIV/AIDS - to volunteers, students in schools and out-patient attendants at the health facilities.

During this reporting period, the IRCS has conducted 36 courses – two courses in each of the 18 governorates. Twenty volunteers were enrolled in each course, making a total of 720 volunteers trained. These volunteers are already in action in health promotion and HIV/AIDS awareness in schools and health facilities.

4.3 Immunisation Campaigns

Iraq is one of the countries that committed to the 1988 WHO declaration - to eradicate the vaccine preventable diseases from the globe. It was expected to achieve the goal before most of the countries and had successfully stepped up its immunisation schemes and programmes. It adopted a strategy of "Polio National Immunisation Days (PNIDs)" to achieve the goal. The strategy introduced a monitoring system and the IRCS was chosen and mandated as an independent monitor for the national immunisation program. Unfortunately, the war and insecurity that started in 1990 continued to date and it resulted in deterioration in health service delivery. This situation, war and insecurity, negatively contributed to the reverse of earlier gains leading to the resurgence of cases of measles and polio in the country. Therefore, in the past three years there have been efforts to check the advance of vaccine preventable diseases. In this national effort, the IRCS is making significant contribution to the success of the

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program by monitoring the immunisation campaigns or detecting defaulters to ensure good rate of coverage of each campaign – control of the spread of vaccine preventable diseases.

Objective: Contribute to the national effort in reducing the number of cases, deaths and disabilities from vaccine preventable diseases.

The IRCS has monitored three of the planned four polio vaccination campaigns for 2006. The fourth round of monitoring of the campaign was not carried out due to problem of funding from the side of the Ministry of Health and WHO/UNICEF. In the 2006 national polio vaccination campaigns 70,000 – 90,000 children have received their polio vaccination.

In these campaigns, the IRCS monitors were instrumental in picking the unvaccinated children (defaulters) through a house to house search. The two main findings of the monitors (in the three rounds conducted in April, May and November) as to why the children have been left out include:

- (a) 52% of the unvaccinated children were not at home when the vaccinators went for them,
- (b) Homes of 31 % of the unvaccinated children were not visited by the vaccination teams at all.

The finding of the monitors' reports on the number of unvaccinated children and their where about were submitted the same day to the coordinators of the Regional/district immunization campaign teams who took action; revisits to the identified homes were soon made. As a result, the success rate of the 2006 campaigns (plan coverage) increased to nearly 100%.

Table 1: Figures related to the immunization campaigns (3 rounds – April, May & November 2006)

| Immunisation campaigns | Total children vaccinated | Unvaccinated children picked by monitors | Total children vaccinated | Remark |
|------------------------------------|----------------------------------|-------------------------------------------------|----------------------------------|-----------------------------------------------------------------------|
| First round - April 2006 | 82,682 | 8,092 (8.9%) | 90,774 | All the 90,774 have been vaccinated |
| Second round - May 2006 | 60,607 | 6,357 (9.5%) | 66,964 | All the 66,964 have been vaccinated |
| Third round November - 2006 | 78,825 | 11,895 (23.1%) | 90,720 | Final report not yet submitted - some members are among the kidnapped |

4.4 Psycho-social Support programs

This community based psychosocial program is rather a new approach in the IRCS emergency health response. Experiences show that such services have been normally left for or covered by the religious leaders and local healers. The IRCS, with the support of the Federation, is advocating to the introduction of the service through its volunteers in the branches.

In advancing the new approach, the Federation and IRCS headquarters are responsible for the training of trainers and the branches take the responsibility to implement the community based activities – creatively identify those in need of psychosocial support and organize sessions (stress management) to help them release the psychological stress that victims suffer from.

Overall goal: To contribute to the improvement of the well-being of targeted groups of Iraqis by meeting their psychological and psycho-social needs.

Objective: The IRCS is engaged in providing psychological support to its staff/volunteers; to children, widows, elderly and deprived families.

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In 2006, the IRCS planned to pilot two PSP projects in Basra and Baghdad by training trainers and promoting community based activities to the vulnerable people – families of victims of war and particularly children between ages 12 and 16, widowed mothers, etc.

Finding of the Needs Assessment included:

- A lack of youth activities was reported by parents, teachers, authorities (including religious leaders) and the children themselves as a factor that affected their social development (lack of the opportunity to interact and play).
- Lack of activities and the stress caused by the security situation are noted as main contributing factors for behavioural problems observed in some children.
- Isolation and withdrawal was observed among children that led to problems of adaptation - increased conflict with their families or challenging to parental advices.
- Children are compelled to stay inside the house or within the limits of the house compound all the time (24 hours) due to security risks, leading to an increase in stress.

In appreciation of findings from the assessment, activities were organized particularly for the youth members (both males and females) and included:

- **Art activities:** The volunteer trainers did the painting, ornamentation, music, embroidery with girls, and painting on the glass by a professional. Again there were ten groups, each with ten participants (five groups for male and five groups for female) amounting to a total number of 100 participants (male and female).
- **Cultural study group:** Activities included reading stories by the volunteer trainers to the victims; organising forums for watching movies; role-playing and scientific trip groups (ten in each group); collecting traditional /folk tales; etc.
- **Sports group:** The important aspect was to bring together children in the same neighbourhood to facilitate interaction between them including football/handball and other sport events.
- **Hand crafts/Knitting group:** The enthusiasts were mainly females of varying age group and few males or boys joined the teams.

Trainers and activists in Basra (40) and Baghdad (60) were trained and carried out limited community based activities in Basra. Community based activities have been very limited because of the frequent disruptions from the ongoing armed conflicts and insecurity that ravaged the country. In addition, the IRCS psychosocial support facilities in Basra and Baghdad governorates have not been utilised according to the plan, once again, because of change in priorities in response to crisis or security.

Basra pilot project was by comparison a success story of the planned two pilot projects – Basra and Baghdad. Numerous meetings were held with parents, community leaders, formal and informal leaders, directors of schools, religious leaders, health institutions, etc. in an effort to introduce the PSP programme.

The collection of traditional stories, through the youth and community members, continued to enhance the traditional coping mechanisms, side by side with today's scientific approach. The pertinent and timely stories have been collected, selected, printed and are in wider circulation within the youth and the active community members.

5. Organisational Development

The IRCS has recognized the need to work on some basic organisational development (OD) issues and in the past three years it has addressed strengthening the Society's legal base, conceptualisation of the management and operational structures, increased human and financial resources, branch development, and recruitment and retention of youth and volunteers to ensure effective service delivery.

Programme goal: IRCS has provided effective and efficient services to vulnerable groups on the basis of its legal identity, in full compliance with the fundamental Red Cross and Red Crescent Principles and its own Constitution, and through a well-developed organizational and management infrastructure.

Objective 1: The IRCS has enhanced its organizational and operational capacity at all levels.

The plans to build the capacity of IRCS human resources and financial management systems have been partially developed and implemented at the headquarters and some branches. The society has been overwhelmed with rapidly changing needs in the country. Despite the challenges, 20 of its staff have been trained in project writing and in report writing which are the most crucial skills required for its staff and volunteers. The training of 25 youth and volunteers in youth activities planning and volunteers management was the other crucial activity. Youth/volunteers are the main flag carriers of the society and important pillars to society's activities – emergency relief distribution, immunisation campaigns, etc.

The headquarters and the branches have shown improvement in their programme planning, accounting, monitoring and reporting. These important aspects will certainly require follow up and consolidation during 2007.

The coordination and communication between the headquarters and the branches has improved although the fast changing security crisis situations in the country have negatively impacted on planned structured meetings and regular information sharing.

The gains so far made still require a period of consolidation as a consequence of the socio-political instability that the IRCS has as well suffered from the high turn over of its staff in the face of growing public demands of its traditional services – emergency relief and health and care in particular.

The skills training in disaster management, first aid, project writing and reporting require expanded and consolidated skills training to avoid back drop in the society's future program management. This year's achievements are admirable in consideration of the frequent interruptions caused by the security situation in the country and the over whelming task expected from the society. The Federation is committed to continue to organise refresher courses to accomplish the original goal successfully – human resources capacity building.

Objective 2: The IRCS has developed and implemented an effective youth & volunteer management system.

The youth and volunteers section of the society has been strengthened in terms of its organisational structure, human resources and systems/procedures. The IRCS has more than 9,000 active volunteers who have been regularly engaged in the society's various service programmes. The experience has been instrumental in initiating a new strategic plan and operating procedures to ensure uniformity of the management systems at the headquarters and branch levels.

An increased number of youth volunteers (reflecting gender balance) are trained and the rate of retention has partially improved; encouraging success in light of existing/wide spread security and economic deterioration. The youth members are better recognised by the management of the society; given more responsibility and opportunity to participate or be in charge of the planning and management of services that includes advocacy on the principles and values of RC/RC, health education including blood donors' recruitment, etc. In addition, the youth and volunteers, unlike in the past, are involved in preparedness/response activities such as needs assessment, relief distribution and immunisation campaigns, vulnerability reduction and the community level action activities.

6. Humanitarian Values

Program goal and objectives: To continue to promote the fundamental principles and humanitarian values of the Movement to IRCS volunteers and staff, and to the wider population, throughout the ongoing programme activities.

In today's Iraq where the traditional values are at stake the IRCS, through its staff/volunteers, has continued to demonstrate the humanitarian values and uphold the mission and principles of the RC/RC – reaching in time for those most in need.

All members of the National Society are aware of the humanitarian values of the Movement. All training included inter-active sessions, and the fundamental principles and values Red Cross and Red Crescent Movement. In addition, increased visibility of the IRCS has contributed to a better understanding of its national and international mandate through its action.

2006 been a test period for the IRCS whereby its activities were over shadowed by sectarian violence that included human and material sacrifice – IRCS staff/volunteers have been kidnapped, and relief convoys, warehouses/branches as well sub offices attacked resulting in human and material sacrifice. Despite the harsh difficulties, the society and its staff and volunteers have continued to uphold and demonstrate the humanitarian values by working even in the hot bed areas to reach those most in need.

7. Coordination and Management

Overall goal and objective: To ensure that the IRCS receives practical support in and professional advice on all aspects of operational management, related to the achievement of the goals and objectives outlined in this emergency appeal.

The operational objective of the Federation has evolved into an advisory role with a particular focus on capacity building and monitoring response activities. The effort to strengthening and consolidating the capacity of the society's day-to-day operational and programme management has witnessed a very positive development. It has helped to speed up the capacity building process of the IRCS to be a strong and successful organization.

The emergency appeal has been implemented within the defined time frame except for those projects abandoned because of insufficient funding and high level of insecurity in the country particularly in the second half of 2006. The required resource was not fully mobilized (50%) and in effect, the planned distribution (winter assistance) for the 25,000 families was not achieved.

The National Society has closely collaborated and had to scale up its operational alliance with the established government/international agencies and NGOs in the country to meet the needs of the hundreds of thousands families affected by the adverse and deteriorating living conditions. The IRCS staff has achieved a satisfactory level of competence in operational management but still needs continued technical support from the International Federation with an agreed grace period for consolidation.

8. National Society Capacity

The capacity building program of the society was never a (vertical) program on its own; instead, it has been integral part of each and every project or program component of the society. In effect, the society's capacity in strategic and program planning, disaster management, youth and volunteers' management, delivery of relief assistance, health and other services has shown good improvement irrespective of the difficulties faced because of the ongoing armed conflicts.

IRCS has manpower of 1,565 staff members at the HQ and the 18 branches, and 9,373 volunteers through out the branches and sub-offices. The office structure includes an HQ office that is based in Baghdad, 18 branches in all the 18 governorates and 135 sub-branches or offices.

In relation to the service structures, the IRCS has:

- 3 main warehouses in Baghdad and Sulaymaniyah;
- 4 Hospitals: 1 surgical hospital in Baghdad with 90 beds capacity, 1 maternity hospital in Baghdad with 52 beds capacity, 1 maternity hospital with 30 beds capacity in Wassit, and 1 paediatric hospital with 22 beds capacity in Baghdad;
- 2 psycho-social centres in Suleymaniah and in Basra;
- 1 Orthopaedic centre in Mosul in order to help integrate victims, make them productive and not burden to either their families or respective communities. In 2006, it has produced 188 new limbs and maintained 277 limbs and crutches.

The performances of the IRCS demonstrated in responding to this complex emergency situation in the country, with support from the Movement components, is a clear evidence of its strength and the capacity it has acquired over time.

The International Federation and the Iraqi Red Crescent Society express thanks to all donors who responded favourably with their timely contributions.

9. Financial information

An interim financial statement is attached. The remaining funds of CHF 858,380 from this Appeal are expected to be transferred in three months time to the new Emergency Appeal – Iraq: Response to Humanitarian Crisis (MDRIQ002) – provided that no donor will request partial return of their contribution to this operation.

[Interim financial report below; click here to return to the title page.](#)

International Federation of Red Cross and Red Crescent Societies

M05EA026 - IRAQ: GENERAL COORDINATION

Interim Financial Report

| Selected Parameters | |
|---------------------|-----------------|
| Reporting Timeframe | 2005/11-2007/03 |
| Budget Timeframe | 2005/11-2007/01 |
| Appeal | M05EA026 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

| | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | TOTAL |
|----------------------------------------------------------------|------------------|---------------------|---------------------|----------------------------|-------------------------------|------------------|
| A. Budget | 1,270,000 | 6,453,524 | | 230,000 | 0 | 7,953,524 |
| B. Opening Balance | 0 | 0 | | 0 | 0 | 0 |
| Income | | | | | | |
| <u>Cash contributions</u> | | | | | | |
| American Red Cross | | 89,986 | | | | 89,986 |
| Australian Red Cross | | 48,115 | | | | 48,115 |
| Australia - Private Donors | | 9,524 | | | | 9,524 |
| Capacity Building Fund | | | | 50,000 | | 50,000 |
| Finnish Red Cross | 78,500 | | | | | 78,500 |
| Irish Red Cross Society | | 5,738 | | 3,230 | | 8,968 |
| Japanese Red Cross Society | | 323,153 | | | | 323,153 |
| Monaco Red Cross | | 46,695 | | | | 46,695 |
| New York Office | | 1,276 | | | | 1,276 |
| Norwegian Red Cross | | 418,554 | | | | 418,554 |
| On Line donations | | 2,402 | | 9,734 | | 12,136 |
| South Africa Government | | 82,840 | | | | 82,840 |
| Spanish Red Cross | 64,504 | | | | | 64,504 |
| Swedish Red Cross | | 824,340 | | | | 824,340 |
| United States - Private Donors | | 0 | | 60 | | 60 |
| C1. Cash contributions | 143,004 | 1,852,622 | | 63,024 | | 2,058,650 |
| <u>Reallocations (within appeal or from/to another appeal)</u> | | | | | | |
| American Government | | 376,798 | | | | 376,798 |
| Australian Government | | 65,931 | | | | 65,931 |
| Danish Red Cross | 604,418 | | | | | 604,418 |
| Irish Government | 275,000 | 40,000 | | | | 315,000 |
| Italian Government | | 77,664 | | | | 77,664 |
| Japanese Red Cross Society | 16,175 | 0 | | | | 16,175 |
| Monaco Red Cross | | 0 | | | | 0 |
| Netherlands Red Cross | 26,786 | 49,751 | | 2,238 | | 78,775 |
| Norwegian Red Cross | 269,139 | | | | | 269,139 |
| South Africa Government | | -82,840 | | 82,840 | | 0 |
| Swedish Red Cross | | 2,135 | | 87,762 | | 89,897 |
| C3. Reallocations (within appeal or | 1,191,518 | 529,439 | | 172,840 | | 1,893,797 |
| C. Total Income = SUM(C1..C6) | 1,334,522 | 2,382,061 | | 235,864 | 0 | 3,952,447 |
| D. Total Funding = B + C | 1,334,522 | 2,382,061 | | 235,864 | 0 | 3,952,447 |

II. Balance of Funds

| | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | TOTAL |
|-----------------------------------------|-------------------|---------------------|---------------------|----------------------------|-------------------------------|-------------------|
| B. Opening Balance | 0 | 0 | | 0 | 0 | 0 |
| C. Income | 1,334,522 | 2,382,061 | | 235,864 | 0 | 3,952,447 |
| E. Expenditure | -1,174,993 | -1,686,688 | | -232,387 | 0 | -3,094,067 |
| F. Closing Balance = (B + C + E) | 159,529 | 695,373 | | 3,477 | 0 | 858,380 |

International Federation of Red Cross and Red Crescent Societies

M05EA026 - IRAQ: GENERAL COORDINATION

Interim Financial Report

| Selected Parameters | |
|---------------------|-----------------|
| Reporting Timeframe | 2005/11-2007/03 |
| Budget Timeframe | 2005/11-2007/01 |
| Appeal | M05EA026 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|---------------------------------------------|------------------|------------------|---------------------|---------------------|----------------------------|-------------------------------|------------------|------------------|
| | | Health & Care | Disaster Management | Humanitarian Values | Organisational Development | Coordination & Implementation | | |
| A | | | | | | | B | A - B |
| BUDGET (C) | | 1,270,000 | 6,453,524 | | 230,000 | 0 | 7,953,524 | |
| Supplies | | | | | | | | |
| Construction Materials | 640,000 | | | | | | | 640,000 |
| Clothing & textiles | 1,443,185 | 10,410 | 354,334 | | | | 364,744 | 1,078,441 |
| Medical & First Aid | 77,248 | 77,248 | | | | | 77,248 | 0 |
| Utensils & Tools | 2,234,150 | | 273,766 | | | | 273,766 | 1,960,384 |
| Other Supplies & Services | 144,801 | | 395,358 | | | | 395,358 | -250,556 |
| Total Supplies | 4,539,385 | 87,658 | 1,023,458 | | | | 1,111,116 | 3,428,269 |
| Land, vehicles & equipment | | | | | | | | |
| Computers & Telecom | 47,881 | 1,117 | 72,428 | | 128,814 | | 202,359 | -154,478 |
| Office/Household Furniture & Equipm. | 202,856 | | -14,317 | | | | -14,317 | 217,173 |
| Medical Equipment | 450,000 | | | | | | | 450,000 |
| Total Land, vehicles & equipment | 700,737 | 1,117 | 58,111 | | 128,814 | | 188,042 | 512,695 |
| Transport & Storage | | | | | | | | |
| Storage | 23,000 | | | | | | | 23,000 |
| Transport & Vehicle Costs | 73,900 | 44,065 | 13,844 | | 2,168 | | 60,077 | 13,823 |
| Total Transport & Storage | 96,900 | 44,065 | 13,844 | | 2,168 | | 60,077 | 36,823 |
| Personnel Expenditures | | | | | | | | |
| Delegates Payroll | 158,114 | 41,738 | 102,419 | | | | 144,157 | 13,956 |
| Delegate Benefits | 63,031 | 34,218 | 37,043 | | 56 | | 71,317 | -8,286 |
| Regionally Deployed Staff | 6,503 | | | | | | | 6,503 |
| National Staff | 374,480 | 99,637 | 153,089 | | 31,731 | | 284,456 | 90,024 |
| National Society Staff | 123,692 | 97,367 | 900 | | | | 98,267 | 25,425 |
| Consultants | 27,000 | 10,004 | 7,266 | | | | 17,270 | 9,730 |
| Total Personnel Expenditures | 752,821 | 282,964 | 300,716 | | 31,787 | | 615,467 | 137,353 |
| Workshops & Training | | | | | | | | |
| Workshops & Training | 710,524 | 501,743 | 13,333 | | 62,895 | | 577,971 | 132,554 |
| Total Workshops & Training | 710,524 | 501,743 | 13,333 | | 62,895 | | 577,971 | 132,554 |
| General Expenditure | | | | | | | | |
| Travel | 109,286 | 29,141 | 65,847 | | 3,602 | | 98,590 | 10,695 |
| Information & Public Relation | 185,423 | 132,010 | 17,474 | | 500 | | 149,984 | 35,439 |
| Office Costs | 219,953 | 839 | 21,059 | | 256 | 35,867 | 58,021 | 161,931 |
| Communications | 50,658 | 3,849 | 7,172 | | | 23,790 | 34,811 | 15,847 |
| Financial Charges | 67,860 | -541 | -16,596 | | -12,741 | 22,008 | -7,871 | 75,731 |
| Other General Expenses | 3,000 | 15,774 | 67,051 | | | -81,665 | 1,160 | 1,840 |
| Total General Expenditure | 636,179 | 181,072 | 162,007 | | -8,383 | 0 | 334,696 | 301,483 |
| Depreciation | | | | | | | | |
| Depreciation | | | 5,585 | | | | 5,585 | -5,585 |
| Total Depreciation | | | 5,585 | | | | 5,585 | -5,585 |
| Program Support | | | | | | | | |
| Program Support | 516,979 | 76,375 | 109,635 | | 15,105 | | 201,114 | 315,865 |
| Total Program Support | 516,979 | 76,375 | 109,635 | | 15,105 | | 201,114 | 315,865 |
| TOTAL EXPENDITURE (D) | 7,953,524 | 1,174,993 | 1,686,688 | | 232,387 | 0 | 3,094,067 | 4,859,457 |
| VARIANCE (C - D) | | 95,007 | 4,766,836 | | -2,387 | 0 | 4,859,457 | |