

IRAQ: EMERGENCY ASSISTANCE PROGRAMME

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As delays in the implementation of UN Security Council Resolution 986 reduce its effects, the Federation and Iraqi Red Crescent Society are continuing with supplementary food assistance to malnourished children and the distribution of medicines to paediatric and maternity hospitals throughout the country.

The context

Seven years after the Gulf war, the effects of the international embargo imposed on Iraq are clearly visible in the health and nutrition status of the population. According to UN statistics, an estimated 3.5 million people must be considered "at risk". Because of delays in implementation, UN Security Council Resolution SCR 986 -- the "oil for food" deal -- has not brought the expected improvements. (Under the deal, 70 % of the oil sale proceeds are utilised for humanitarian assistance). Phase II should have been fully implemented by December 1997, but in late January Phase I was still not completed: medicines received in the country represented 63 % of the funds allocated for this phase.

In 1997, the Federation/Iraqi Red Crescent Society (IRCS) relief operation provided basic medical supplies and drugs to hospitals and food aid to the most vulnerable. This year, the operation is continuing, although to a reduced number of beneficiaries.

Latest events

On 4 December 1997 the UN Security Council voted to extend Resolution 986 for a further six months. While the stand-off between Iraq and the UN over weapons inspection worsened, Iraq on Friday rejected the offer made by the UN Secretary General to allow it to increase the sale of oil from US\$ 2 billion to US\$ 5.2 billion in each six months period.

Red Cross/Red Crescent action

Nutrition Programme

In 1997, the Federation/IRCS supplementary food aid programme, which supplies high protein, high energy food to malnourished children under five years old, achieved its goal of assisting 46,000 beneficiaries and providing a general food ration to their families. The children are referred to this programme either by hospital rehabilitation wards after an initial period of hospitalisation of 8 to 20 days or by the health care centres of the IRCS. The situation is reviewed at the end of each month when the child is brought back for the next month's ration.

Phase III of this programme began a few days ago. It will target 10,000 children. All IRCS Branches have been visited by the Federation's Relief Administrator/Nutritionist.

Food●

Phase 9 of the general food aid programme has been completed. In 1997, 16,500 metric tonnes of food were distributed throughout Iraq, reaching 350,000 vulnerable persons each month -- or more than 3.5 million beneficiaries in the course of the year.

Medical Aid●

The medical aid programme distributed a wide variety of medical kits to 22 paediatric and maternity hospitals throughout the country, covering approximately 30 % of the needs in these hospitals.

Additional Aid●

Phoenix International donated through the Federation and IRCS 64 containers x 20 tons of milkpowder to the Ministry of Health. The Red Crescent of the United Arab Emirates shipped five truck loads of medicines that were distributed to designated hospitals. A Swedish Red Cross cash contribution was used to procure 3,450 blankets for long term IDPs in the 3 Northern Governorates.

A copy of the British Pharmacopoeia and Martindales reference manuals were supplied by the British Red Cross to the Ministry of Health drug testing laboratory to help keep the lab testing procedures up to date. A cash donation has been received from the British Red Cross to purchase 2,000 kerosene lamps for distribution to long term IDPs and needy families in Northern Iraq.

Media Coverage●

The activities of the Federation were well covered by the media and specifically a press conference held to publicise the 1998 Emergency Appeal for Iraq.

Training●

A warehouse workshop was conducted in October for the new warehouse managers of IRCS. A nutritional workshop, held in November, had as its theme "How to prevent and treat malnutrition in children". Three Community Based First Aid Courses were held in the last three months of 1997. One Telecommunications workshop was organised.

Contributions

So far only one soft pledge, of USD one million from a private donor, has been received.

Conclusion

The delays in the implementation of SCR 986 have disproved predictions that it would make an important difference in the quantities of basic foodstuffs and medicines available in the country. Nevertheless, the availability of supplies has improved slightly.

The current situation upholds the recommendations of the Federation's assessment mission last September that nutritional and health support should continue on a reduced scale, at least throughout 1998, but that general food distributions would no longer be necessary. Donors are urged to provide support rapidly, to allow the uninterrupted financing of the operation.

Current developments in the weapons inspection issue are being followed closely by the Federation Regional Delegation in Amman and the Secretariat in Geneva in order to adapt programmes should this be necessary.

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