

IOM IRAQ

# COVID-19 RESPONSE OVERVIEW #5

13 October - 9 November 2020





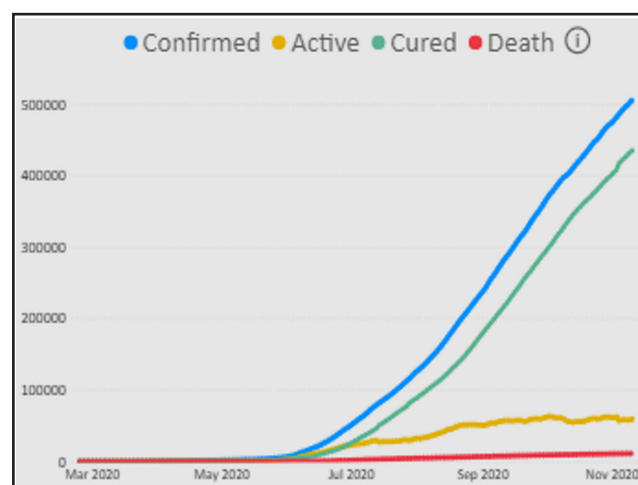
# SITUATION OVERVIEW

IOM IRAQ COVID-19 Strategic Response Plan<sup>1</sup>, February-December 2020, USD 20.45 million  
501,733 Confirmed Cases | 58,120 Active Cases | 432,233 Cured Cases | 11,380 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.

In late September, the Government lifted all curfews that were in place across the country. Citizens across Iraq and within Kurdistan Region of Iraq (KRI) remain permitted to travel between governorates. People can travel freely across governorates, including between federal Iraq and the Kurdistan Region.

International airports in Baghdad, Basra and Erbil remain open for commercial flights but are still running at lower capacity than prior to the pandemic. Flights for emergencies, medical evacuations, carrying cargo and chartering remained operational between 20 October - 2 November.<sup>3</sup>



Cumulative Distribution of Cases in Iraq by Health Status



Sanitizing schools in Basrah in response to the COVID-19 pandemic.

<sup>1</sup> For IOM Iraq COVID-19 Strategic Response Plan, please visit [www.iomiraq.int](http://www.iomiraq.int)

<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 – 20 October – 2 November 2020: <http://iraqdtm.iom.int/COVID19/MovementRestrictions>

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

## Coordination and Partnerships



Several coordination meetings conducted.

- IOM Iraq is working with World Health Organization (WHO) to align COVID-19 activities, including through the UN Country Team (UNCT). IOM is co-leading the Health Cluster Taskforce for health partners, WHO, Ministry of Health (MoH), and Camp Coordination and Camp Management (CCCM) partners including for the preparedness and response plans.
- IOM Iraq has continued to coordinate closely with officials from the Erbil International Airport, MoH, WHO, and other key partners during the reporting period to assess the Points of Entry (PoE) activities.
- IOM has been coordinating with health actors to assess and support COVID-19 screening activities in the IOM supported clinics using Kobo tool.

## Tracking Mobility Impacts



2 Iraq mobility restriction reports published.

The following main activities were implemented:

- IOM Iraq's [Displacement Tracking Matrix \(DTM\)](#) assessed 30 locations including airports and Points of Entry (PoEs) along land borders and maritime boundaries. Seven were reported as closed, 11 partially open, two open, and 10 open only for commercial traffic, as well as domestic movement restrictions. DTM produced two Iraq mobility restriction reports<sup>4</sup> during the reporting period, presenting an overview of mobility restrictions for the monitored PoEs which are partially open or commercial traffic, as well as for Iraq in general.



IOM Iraq delivered roll up banners with information about new health and safety measures, and floor stickers to guide social distancing to authorities at Baghdad International Airport.

<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, Basra, Dohuk, Ninewa, and Kirkuk.
- Hygiene promotion/health sessions for community mobilizers, community leaders, and children in HassanSham camp in Ninewa and Sharia camp in Dohuk to raise awareness on COVID-19 hygiene precautions.
- RCCE activities launched in catchment areas of the IOM targeted health facilities, led by six newly trained RCCE field staff.
- A field assessment of the complaint mechanism pres-

Over **192** awareness/sensitization sessions, reaching more than **1,500** individuals in camp and non-camp settings in **5** governorates.

More than **5,000** COVID-19 card games, board games, coloring books, flyers and posters distributed.

**110** COVID-19 rollups distributed in Erbil and Baghdad International Airports.

ent at the facilities (specifically suggestion boxes) has started.

- Printing and distributing COVID-19 card games, board games, coloring books, leaflets, flyers, and posters.
- Distributing COVID-19 banners in Erbil and Baghdad International Airports.

## Disease Surveillance



The following main activities were implemented:

- Community Based Surveillance Officers have been recruited and are being onboarded in Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad governorates; and community events-based surveillance (CEBS) training material has been created and finalized. Ninewa, and Baghdad governorates; and community events-based surveillance (CEBS) training material has been created and finalized.

Officers have been onboarded in **6** governorates, and training material has been created and finalized.

## Points of Entry (PoE)



The following main activities were implemented:

- Coordinating closely with and providing ongoing technical support for officials from the Erbil International Airport, MoH, WHO, and other key partners

Technical support for PoE activities continued.

for PoE activities including finalising PoE training modules for border/airport officials, which were translated into Arabic and Kurdish.

## Infection Prevention and Control (IPC)



The following main activities were implemented:

- Conducting IPC trainings for DoH clinical and non-clinical staff at IOM supported clinics in Baghdad. As of 29 October 2020, IPC trainings were conducted in all the IOM supported governorates of Anbar, Erbil, Dohuk, Kirkuk, Ninewa, and Baghdad on IPC, screening and triage of COVID-19, usage of personal protective equipment (PPE), and more.
- Screening and Triage processes continued at IDP health clinics prior to patient consultations (Ninawa – Jadaa

**15** DoH clinical and non-clinical staff trained. More than **35,000** individuals screened or triaged for COVID-19 at supported health clinics.

camp; Shekhan camp; Erbil – Debaga camp; Kirkuk – Yahyawa camp; Anbar – Al Mateen camp). These processes were established in two selected community clinics in Erbil and have been established at 20+ selected clinics in communities within Anbar, Baghdad, Erbil, Dohuk, Kirkuk, and Ninewa, ensuring patients are screened for COVID-19 prior to health consultation.



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### Case Management and Continuity of Essential Services

The following main activities were implemented:

- IOM has continued to support 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.
- An isolation area was opened on 25 October 2020 in Laylan Camp 2 in Kirkuk in coordination with CCCM, Médecins Sans Frontières (MSF), the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), and other stakeholders. IOM has been providing technical, material, and human resources support to the isolation area.
- Supporting six DoH COVID-19 response teams responsible for monitoring contacts in self-quarantine and suspected/confirmed cases in home isolation. The teams are attached to the health facilities that are supported in Kirkuk.



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

An Isolation area was opened on 25 October 2020 in Laylan Camp 2 in Kirkuk.

**6** DoH COVID-19 response teams supported.



Distribution of medical kits to Akre Hospital.

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

## Camp Coordination and Camp Management (CCCM)

The following main activities were implemented:

- Ongoing remote CCCM management mechanisms for displaced community leaders in 24 camps and 63 informal sites in Anbar, Baghdad, Ninewa, and Salah Al-Din.
- Continuing to follow up with the committees (Women Empowerment Group [WEG], Youth Empowerment Group [YEG] and managements committees) for any COVID-19 cases registered in the sites.
- Ongoing work to install handwashing stations in the IOM supported sites in Ninewa, Anbar, and Salah Al-Din. IOM will produce posters related to correct usage of the station for both the foot- and the elbow-operated pedal for persons with disabilities.
- Supporting construction works, including construc-



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

**34** Hygiene promotion sessions conducted, reaching **430** beneficiaries.

**1,224** COVID-19 preventive kits distributed.

tion of the Quarantine/Isolation area in Al-Ahal camp in Baghdad and AAF and BZBZ camps in Anbar; and completing the construction of the quarantine area in Jadah 1 camp in Ninewa.

- Providing hygiene promotion sessions in Mosul, Tal Abta, and Sinjar in Ninewa, and Tikrit in Salah Al-Din.
- Distributing COVID-19 preventative kits to households (HHs) in 18 informal sites in Baiji and Tikrit in Salah Al-Din (4 kits per HHs). informal sites and camps in Ninewa, Anbar, and Salah Al-Din.

## 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. Assistance was delivered through field visits when possible, and otherwise by phone.
- Completed a Mental Health and Psychosocial Support (MHPSS) survey among target areas and an assessment on livelihoods and MHPSS integration in IDP locations like Dohuk, Hassan Sham in Ninewa, and Wahed Huzeiran in Kirkuk, to be completed in late November; and developing a leaflet to support bereaving families who lost a loved one to suicide.



More than **490** beneficiaries received protection services.





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:

- Supporting 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. Milestones verification and monitoring were conducted to the SMEs received an EDF grant.
- Delivering Business Development Support (BDS) training to 140 beneficiaries in Baghdad, Dohuk, and Sulaymaniyah. These beneficiaries have been working on their business plans. When the business plans are approved, they will receive a Business Support Package (BSP) grant.
- Implementing several COVID-19 related CfW activities in Baghdad, Salah Al Din, Ninewa, Diyala, and



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

**140** Beneficiaries received BDS training in preparation for receiving BSP grant.

**13** COVID-19 related CFW projects targeted  
**312** beneficiaries implemented.

Dohuk to support individual livelihood; activities directly aiding efforts to tackle the spread of COVID-19 include four activities supporting facial mask sewing in Salah al-Din and Ninewa; one cleaning activity for school and clinics in Salah al-Din; and four activities to assist the DoH to clean and sterilize in a quarantine centre and a hospital in Ninewa.

- Needs assessments are ongoing for potential infrastructural support in response to COVID-19, in the areas of health, WASH, or other high priority areas.

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

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

## IOM Iraq COVID-19 Response Supported By:



For more information, please contact us at [IRAQPSU@iom.int](mailto:IRAQPSU@iom.int)



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