Situation Overview and Humanitarian Need

On 15 September 2015, the Government of Iraq (GoI) confirmed a new outbreak of cholera in the central zone. As of 29 October 2015, over 2,000 confirmed cases were reported across 15 Governorates. UNICEF is concerned that 21 percent, or 1 in 5 cases, are children 0 to 10 years old, a sign that this group is among the most vulnerable. Iraq’s last major outbreak occurred in the north in 2012. Recent armed conflict has destroyed water and sanitation infrastructure, which in combination with a low water table due to several years of drought, has increased likelihood of water contamination. UNICEF, leading the WASH cluster, and the World Health Organisation (WHO), leading the Health cluster, are coordinating closely with the Ministry of Health (MoH) at Baghdad and Erbil levels to treat cases, and prevent cholera.

Highlights

- As of 22 October 2015, 3,202,638 people (533,773 families) were displaced across Iraq. 415,632 individuals are reported as returned to their place of origin (IOM).
- Cases of cholera continue to be reported in Iraq, mainly in the central and southern zones. UNICEF is concerned that 1 in 5 cases are children under 10 years old.
- Responding to cholera, UNICEF provided 820,000 sachets of oral rehydration salt (ORS) supplies for rapid treatment of dehydration, conducted health promotion activities and case-management training for health staff.
- Following heavy rains over the night of 28 October, flooding critically affected 44 camps and informal settlements in Baghdad, Anbar, Salah al-Din and Diyala, impacting over 84,000 people.
- In October, UNICEF partners reached out to 1,598 children with child protection services. Out of these, 1,445 children received psychosocial support services.
- The UNICEF “WARM for WINTER” campaign was launched on 24 October 2015; over 10,000 IDP children and 300 pregnant women were provided winter clothes and blankets to protect them from Iraq’s harsh winter climate.

People in need of urgent humanitarian assistance:

- 8.2 million people, of which:
  - 3.7 million children and
  - 3.1 million IDPs

Target population in 2015 (revised):

- WASH: 3,790,000
- Health: 484,000
- Education: 550,000
- Child Protection: 108,000
- Rapid Response: 4,000,000

UNICEF Requirements 2015 (revised):

- US$ 160 million

Funds received 2015:

- US$ 53 million
spread. UNICEF response, in line with the Joint Cholera Preparedness and Response Plan agreed with WHO and the MoH, focuses on community-level awareness raising, sharing prevention messages via public radio channels, on SMS messaging, on distribution of door-to-door leaflets, and information sharing, as well as supporting prevention of cholera transmission through provision of hygiene kits and supply of safe water. With the Ashura festival on 23 October attracting millions of pilgrims, public information activities were critical to raise awareness of causes of disease transmission and ways to prevent further spread.

An estimated 8.2 million people across Iraq remain in need of humanitarian assistance, including Internally Displaced People (IDP), Syrian refugees, returnees and host communities, as well as affected populations in Armed Opposition Group (AOG) held areas. As of 22 October 2015, 3,202,638 people (533,773 families) were displaced across Iraq1. Numbers of people reported as returned to their place of origin (‘returnees’) are 415,632 individuals2. According to the Camp Coordination and Management Cluster, 49 official IDP camps are active across Iraq and a further 10 are currently under construction, in addition to 38 collective centers3 and numerous informal settlements. Humanitarian access remains hampered by ongoing fighting, leaving some of the most vulnerable Iraqis trapped without humanitarian assistance in ISIL-controlled areas. Return to places of origin continues in areas where change in security conditions allows. Areas of return are severely lacking in basic services or infrastructure as a result of violent conflict. After demonstrations in the central and southern governorates during the summer months, similar events increased in the Kurdistan Region (KR-I) in October. Demonstrators are calling for improved public services, among other issues. Across Iraq an ongoing challenge remains the lack of liquidity in various banks, which has created further issues for public sector staff in accessing salaries.

**Humanitarian Leadership and Coordination**

UNICEF leads the WASH and Education Clusters as well as the Child Protection sub-cluster and is an active member of the Health and Nutrition Cluster. The Iraq Humanitarian Pooled Fund (IHPF) has been established and will provide grants for humanitarian partners responding to critical needs in Iraq, with oversight from the Humanitarian Coordinator. In response to the cholera outbreak, WASH and Health Cluster partners including UNICEF and the World Health Organization (WHO) initiated the Joint Cholera Preparedness and Response Plan for affected central and southern Governorates, while continuing preparedness planning for at-risk Governorates in the north. The Cholera Task Force (the ‘Cholera Control and Command Centre’, or ‘C4’) was established at the Ministry of Health (MoH) in coordination with Health and Water/Sanitation Departments in Baghdad. The overall response remains under the leadership of the Prime Minister’s office. Monthly meetings with RRM Consortium partners including World Food Programme (WFP), International Organization for Migration (IOM), and UN Population Fund (UNFPA) are facilitated to plan coordinated humanitarian assistance. Regular meetings are convened with the Joint Coordination and Monitoring Centre (JCMC) in Baghdad and the Joint Crisis Coordination center (JCC) in Erbil, alongside sister UN Agencies and line ministry members.

**Humanitarian Strategy**

The current inter-agency Humanitarian Response Plan (HRP) for Iraq was launched on 4 June 2015, covering July to December 2015. The total HRP appeals for US$498 million to cover minimal integrated emergency response requirements to meet the priority humanitarian needs for IDPs, host-communities, and other affected populations. Within the HRP, UNICEF is seeking US$48 million for priority critical life-saving responses. UNICEF’s HRP will cover part of UNICEF’s requirements for its humanitarian response in Iraq. As winter approaches, UNICEF’s top priorities include preparations for cold weather especially for vulnerable populations living at high altitude. Work to sustain health and nutrition interventions, provide safe water and sanitation, and to cover the immediate, life-saving needs of highly vulnerable families on the move through the RRM continue. The planning process for the 2016 Humanitarian Response Plan (HRP) for Iraq is currently ongoing. In October the Clusters defined key strategic elements in consultation with partners countrywide.

**Summary Analysis of Programme Response**

**Child Protection (CP)**

During October, UNICEF partners reached out to 1,598 children (G: 883 and B: 765) with child protection services. Out of these, 1,445 children (G: 774 and B: 671) received psychosocial support services, 137 children (G: 51 and B: 86) specialized services and 16 children (G: 8 and B: 8) were documented as Unaccompanied and Separated Children (UASC).

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1 International Organization for Migration (IOM) Displacement Tracking Matrix (DTM) Data Sheet 22 October 2015
2 IOM DTM Returnee Tracking Matrix Master List 22 October 2015
3 CCCM Settlement Status Report, 05.10.2015
In order to enhance awareness on Child Protection a 4-day training on foster care was conducted for 11 participants (2 men, 9 women) as a part of the Foster Care Project currently piloting in Sulaymaniyah. In Kirkuk, International Medical Corps (IMC) supported training of 8 community volunteers (3 women, 5 men) in child protection. The community outreach workers (9 women, 9 men) of 3 local partner organizations also received training on activity planning and data collection. As part of improving identification and referral process, and to address bottlenecks, a camp level coordination meeting was held at Laylan camp for actors working in protection and mental health services. Protection partners report that the population in Waar City settlement in Dahuk is diminishing; Syrian families are leaving the settlement reportedly either to migrate to Europe or move into camps to avoid paying house rent and seeking food assistance inside camps. As part of UNICEF’s larger initiative to support access to child- and youth-friendly juvenile justice services, UNICEF is supporting the renovation of the Juvenile Police Station hall in Basra with support of a local NGO. In a follow up with Independent Human Rights Commission of Kurdistan on the concerns of child recruitment, a greater collaboration was suggested in the area of capacity building, awareness against recruitment and follow up regarding children arrested under charges of terrorist activity.

Education
After the start of the academic year was delayed by the Ministry of Education (MoE) due to the cholera outbreak, schools across Iraq opened in the 3rd week of October. UNICEF officially opened the primary school at Basra IDP camp where the school has been extended to include the 5th and 6th grades. Two newly established schools in Najaf have been handed over to DoE and have started registering children. With close coordination between UNICEF and local authorities in Najaf, the tented Amerli primary school was converted to a prefab school with significant government support. Moreover, an Intermediate school in Al Rahma 1 IDP camp was handed over to Missan DoE; while in Kirkuk a new-tented school in Laylan 2 camp was completed and rehabilitation of school bathroom facilities have been completed for Laylan 1 and Yahyawa camps. UNICEF also distributed 60 prefab classrooms to the DoE in Baghdad in Karkh 1 and Karkh 2.

UNICEF provided teaching and learning support material mainly focused on creating an enabling learning environment, to a number of schools. Forty-five schools in non-camp locations received 1,520 students’ kits benefitting 56, 352 children (boys; 33,313, girls: 23,039). Student kits benefitting nearly 700 students were distributed in Baherka and Harshem IDP camp schools. Schools in Khanaqin and Garmiyani area, Sulaymaniya, received 138 student kits which will support the education of 2,786 children (boys 1,478; girls 1,308).

Health & Nutrition
A nationwide polio campaign took place starting on 4 October, led by the MoH with the support of UNICEF and WHO. The campaign, which has been taking place since cases of 2 cases of polio were confirmed in the centre zone in early 2014, targets all children under 5 in Iraq. The most recent campaign reached 5.4 million children. Since the announcement of the cholera epidemic in Iraq, UNICEF focused on strengthening capacity of healthcare providers in the most affected areas to help MOH to manage, control and prevent cholera. UNICEF provided 820,000 sachets of critical oral rehydration sachets (ORS) to Primary Health Care (PHC) centres across Iraq, via the MoH, in order to support patients suffering from dehydration and conducted health promotion activities and case-management training for PHC staff. Seizing the opportunity offered by the door-to-door vaccination teams used for the polio campaign, UNICEF combined its resources and ensured that cholera awareness-raising messages were delivered to families across Iraq during that period. In October, UNICEF supported PHCs in IDP camps across the KR-I to conduct 2,471 nutrition-screening consultations, monitoring the growth of 1,306 boys and 1,165 girls under 5 years. In October 2,617 children in IDP camps were vaccinated against measles, in line with their routinely-scheduled vaccination programme. Final data from the most recent measles campaign was made available from the MoH; 3.9 million additional children were reached through specific outreach to targeted central and southern zones of Iraq. Children reached in this campaign may have not received routine measles vaccination due to past history of displacement, remote place of residence or other factors limiting their access to health services. Feeding counselling sessions (IYCF) services reached 2,202 mothers through UNICEF-supported ‘Baby Hut’ services, helping to ensure women are well-informed about their children’s nutritional needs at each stage of development. Two newly-constructed ‘Baby Huts’ opened in Kalar and Khanaqin IDP camps in October, improving maternal healthcare options for women and their infants living the Sulaymaniya/Diyala disputed territories of Iraq. To date these services have reached an additional 18 newborns and 36 pregnant women. In total, UNICEF’s newborn home services reached 1,384 babies (690 boys and 694 girls) in the reporting period. Healthcare promotion and nutrition activities for children

4 Only children reached through routine vaccination services are included in UNICEF’s overall results monitoring for children vaccinated against measles.
under 5 in camps were offered in the course of the month. As part of UNICEF’s ongoing support to the government, 20 MoH staff attended a ‘Training of Trainers’ on breastfeeding promotion.

**Water, Sanitation & Hygiene (WASH)**

Since the onset of the cholera outbreak in Iraq, WASH and Health Cluster partners have initiated the Joint Cholera Preparedness and Response Plan for the affected Governorates. Over forty camps and collective centres in Baghdad and Anbar were considerably affected by heavy rains in the last week of October. To mitigate the impact of the heavy rains, UNICEF provided plastic sheets, shovels, wheel barrow and 19 dewatering pumps in Anbar and Baghdad camps, supporting immediate dewatering actions. Specifically for cholera-affected locations, through its partner Rebuild Iraq Reconstruction Programme (RIRP) UNICEF is supporting the extension of the water supply pipeline in Sader Al Yousifiya camp in Baghdad City. Among other actions, temporary clean water supply using bottled water (total: 33,500 sets), reached 37,000 people, while an alternative semi-permanent solution was put in place. UNICEF also increased water trucking to 5,000 people at risk in Abu Ghraib and Mahmoudiya, Baghdad Governorate. In Dahuk, water trucking is ongoing for non-camp IDPs in scattered locations, benefitting 49,300 individuals in 7 districts.

Good quality of water is critical in prevention of water-borne diseases like cholera; UNICEF distributed over 1.3 million water treatment tablets (33 mg for household usage) through Primary Health Centres, supporting provision of potable water for 13,500 people in Baghdad and Qadissiya. In addition 1,000 tablets (1.67g) were used by trained UNICEF implementing partners for water treatment at community-level and in larger water storage tanks, supporting safe water for 5,000 people in Baghdad, Babylon, Anbar, Missan and Basra.

UNICEF distributed family water kits and hygiene kits to vulnerable families in selected most-at-risk localities as defined in cluster planning, reaching over 62,000 people in Baghdad (2 locations), Najaf (3 locations) and Thi Qar (3 locations). Family water kits contain buckets, soap and other essential hygiene items all in one package to provide a more rounded intervention for families in need. Distribution of hygiene kits reached 33,500 families in Baghdad (3 locations), Qadisiya (4 locations) and Muthanna (3 locations), in addition to Najaf (3 locations), Thi Qar (3 locations), Missan (2 locations) and Basra. UNICEF through support of the Board of Relief and Humanitarian Affairs (BRHA) in Dahuk distributed over 13,000 family hygiene kits in Berseve 2, Chamishko, Dalal city, Qadia and Sharia Camps. Solid waste transportation was initiated by municipalities in Khanki camp benefiting 18,165 individuals, with UNICEF support. In Sulaymaniyah, UNICEF is providing safe water and collecting solid waste in IDP camps.

Water supply and sanitation interventions are complemented with hygiene awareness sessions, to promote good hygiene knowledge and practice. Hygiene awareness sessions reached 70,000 people in Baghdad, Muthanna and Najaf. Global Handwashing day events, supported by UNICEF and 10 NGO partners, consolidated efforts on cholera prevention and delivery of cholera awareness messages, reaching over 21,600 children in schools.

**Cash Assistance**

In October 2015, an additional 672 households in Bardarash Camp, Ninewa, received direct cash assistance. Each of the target households received a one-off payment of US$250 (cash). All data are recorded by UNICEF through dedicated hardware and software solution ‘Last Mile Mobile Solution (LMMS). All data are shared with the central database of the Board of Relief and Humanitarian Affairs (BRHA) in the Governorate of Dahuk to avoid duplication and minimize overlapping of interventions. Early results from Post Distribution Assessments show that cash assistance received by UNICEF to date was spent to meet primary needs. Virtually all families spent part of the grant to access food, while up to eighty per cent of families spent part of the grant in support to medical expenses.

**Rapid Response Mechanism (RRM)**

UNICEF formally activated its Rapid Response Mechanism (RRM) to meet the immediate life-saving needs (drinking water, emergency nutrition, and hygiene) of IDPs in August 2014. The RRM consists of rapid assessments (through hand-held digital data tablets) and simultaneous delivery of essential items through a consortium of UN agencies (WFP, OCHA, IOM, UNFPA and UNICEF) and nine NGO partners covering 16 governorates fully and two governorates partially (Ninewa and Anbar). UNICEF is providing overall RRM coordination, including strategic planning and technical leadership, capitalization of lessons learned, and scale up of best practices and innovations. As of end October 2015, the RRM had reached an estimated 4.3 million individuals. In October, the RRM Consortium coordinated by UNICEF and WFP

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1 Khanaqin and Arbat IDP camp
distributed 53,286 RRM kits, benefiting 373,002 individuals at 104 locations across 10 governorates. The October figure includes 31,841 RRM kits delivered across Anbar, Kirkuk and Salah Al Din governorates benefiting more than 214,785 individuals living in hard-to-reach areas.

Winterization
The UNICEF “WARM for WINTER” project was launched on 24 October 2015 to respond to the needs of vulnerable children and pregnant women in need of warm clothes and blankets. UNICEF, working with 5 partners, is planning to distribute a total of 650,000 sets of winter clothes to children ranging in age from 0 months to 14 years, and blankets to 170,000 individuals. Priority is given to IDPs located in high altitude and hard to reach areas facing the sudden onset of winter; IDPs located in unfinished buildings and informal settlements; and IDPs in locations with a high density of displaced people that have not received services before. Since the initiation of the project on 24 October 2015, a total of 10,361 IDPs (4,938 boys, 5,076 girls and 347 pregnant women) received warm winter clothing, shoes and blankets in Dahuk governorate.

Communication for Development (C4D)
UNICEF supported social mobilization through C4D activities for the polio campaign which ran between the 4 and 8 October. Independent monitoring data showed that 68 percent of households heard or saw polio awareness raising materials for the campaign. During the month of October, hygiene promotion messaging and awareness raising on cholera prevention and preparedness were continued with support of the WASH and Health clusters. 1.5 million Households were reached with cholera prevention and awareness messages, taking the opportunity of the door-to-door vaccination approach of the polio campaign. An additional 500,000 people were reached with cholera information and awareness materials in southern and central zones.

Funding
UNICEF is appealing for an overall US$160 million in its Humanitarian Action for Children appeal to respond to the humanitarian crisis in Iraq. This amount includes US$48 million to respond to priority life-saving needs as part of the revised Humanitarian Response Plan (HRP, June to December 2015).

<table>
<thead>
<tr>
<th>Sector</th>
<th>Original 2015 HAC Requirement (US$)</th>
<th>Revised 2015 HAC Requirement (US$)</th>
<th>HRP Requirement (US$)</th>
<th>Funds to date (30.10.15)</th>
<th>Funding gap (US$)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH</td>
<td>63,329,700</td>
<td>32,700,864</td>
<td>10,800,000</td>
<td>10,102,281</td>
<td>22,598,583</td>
<td>69%</td>
</tr>
<tr>
<td>Education</td>
<td>106,520,920</td>
<td>21,744,000</td>
<td>11,448,000</td>
<td>6,059,238.73</td>
<td>15,684,761</td>
<td>72%</td>
</tr>
<tr>
<td>Health &amp; Nutrition</td>
<td>65,000,000</td>
<td>20,119,600</td>
<td>13,119,600</td>
<td>5,339,556.88</td>
<td>14,780,043</td>
<td>73%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>20,632,217</td>
<td>16,200,000</td>
<td>6,801,948</td>
<td>6,144,867</td>
<td>10,055,133</td>
<td>62%</td>
</tr>
<tr>
<td>Social Protection</td>
<td>23,200,000</td>
<td>11,000,000</td>
<td>1,000,000</td>
<td>6,059,927</td>
<td>4,840,073</td>
<td>44%</td>
</tr>
<tr>
<td>Rapid Response Mechanism</td>
<td>21,222,000</td>
<td>14,250,000</td>
<td>5,250,000</td>
<td>13,252,487</td>
<td>997,513</td>
<td>7%</td>
</tr>
<tr>
<td>Winterization</td>
<td>19,526,780</td>
<td>44,000,000</td>
<td>N/A</td>
<td>2,796,419</td>
<td>41,203,581</td>
<td>94%</td>
</tr>
<tr>
<td>Total</td>
<td>319,431,617</td>
<td>160,014,464</td>
<td>48,419,548</td>
<td>49,854,776.41</td>
<td>110,159,687</td>
<td>69%</td>
</tr>
<tr>
<td>Carry forward from 2014</td>
<td>3,204,321</td>
<td>3,204,321</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grand Total</td>
<td>319,431,617</td>
<td>160,014,464</td>
<td>48,419,548</td>
<td>53,059,097.41</td>
<td>106,955,366</td>
<td>68%</td>
</tr>
</tbody>
</table>

Next SitRep: 16/12/2015
UNICEF Iraq Country Office Official Website: http://www.unicef.org/iraq/
UNICEF Iraq Country Office Facebook Page: https://www.facebook.com/unicefiraq

Humanitarian Response for Iraq: http://www.humanitarianresponse.info/operations/iraq

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Disclaimer: This report is based on information received from various internal and open sources. With the exception of the UNICEF Programme Update, not all information could be independently verified and as such, the report does not reflect the opinion or position of UNICEF. This report is intended for informational purposes and is not an official document.
UNICEF appeals for $160 million for 2015, $48 million of which falls under the UN HRP appeal. The table shows Cluster Targets and Results against the UN-wide HRP, and UNICEF targets and results against the larger $160 million HAC appeal. UNICEF’s 2015 HRP targets are shown for each indicator in the relevant footnote.

### SUMMARY OF PROGRAMME RESULTS (October 2015)

<table>
<thead>
<tr>
<th>Cluster Revised Target</th>
<th>Cluster Results (31.10.15)</th>
<th>UNICEF HAC Target</th>
<th>UNICEF HAC Results (31.10.15)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency affected populations with access to a sufficient safe water supply [1]</td>
<td>2,870,457</td>
<td>2,600,216</td>
<td>3,798,583</td>
</tr>
<tr>
<td>Emergency affected populations with access to functional latrines [2]</td>
<td>880,188</td>
<td>498,268</td>
<td>970,607</td>
</tr>
<tr>
<td>IDPs receiving hygiene kits or other hygiene supplies [3]</td>
<td>1,410,376</td>
<td>1,148,794</td>
<td>1,486,086</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School-aged children reached through temporary learning spaces [4]</td>
<td>450,000</td>
<td>314,395</td>
<td>550,000</td>
</tr>
<tr>
<td>Teachers and education personnel trained on PSS or EiE [5]</td>
<td>12,100</td>
<td>2,937</td>
<td>8,000</td>
</tr>
<tr>
<td>Children benefited from the provision of learning materials [6]</td>
<td>500,000</td>
<td>285,266</td>
<td>550,000</td>
</tr>
<tr>
<td><strong>HEALTH &amp; NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newborn babies of conflict-affected families benefitting from newborn home services [7]</td>
<td></td>
<td>39,000</td>
<td>12,432</td>
</tr>
<tr>
<td>Children provided with access to growth monitoring (nutrition screening) services [7]</td>
<td></td>
<td>484,000</td>
<td>152,280</td>
</tr>
<tr>
<td>Under 1 year old children vaccinated against measles through routine immunization [7]</td>
<td></td>
<td>93,400</td>
<td>107,900</td>
</tr>
<tr>
<td>Children 0 - 59 months vaccinated against Polio in crises affected areas through campaigns [8]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grave child rights violations reported and verified [9]</td>
<td>257</td>
<td>903</td>
<td>257</td>
</tr>
<tr>
<td>Children identified for and referred to specialized protection services [10]</td>
<td>14,958</td>
<td>12,178</td>
<td>14,846</td>
</tr>
<tr>
<td>Unaccompanied and separated children reunited, placed in family or alternative care arrangement [12]</td>
<td>1,114</td>
<td>1,316</td>
<td>3,896</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Most vulnerable households receiving child focused cash transfer [13]</td>
<td>28,887</td>
<td>21,053</td>
<td></td>
</tr>
<tr>
<td><strong>Rapid Response &amp; Winterization</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vulnerable people newly displaced by conflict receiving RRM kits within 72 hours of trigger for response [14]</td>
<td>4,080,914</td>
<td>4,301,645</td>
<td></td>
</tr>
<tr>
<td>Most vulnerable children better protected from risks of winter with appropriate clothing</td>
<td>450,000</td>
<td>10,361</td>
<td></td>
</tr>
</tbody>
</table>

[1] The indicator includes water supply & water quality interventions, with exception of the distribution of water bottles and jerry cans, since they are not providing sufficient quantities of water to the beneficiaries. Within the UN-wide HRP, UNICEF’s target for this indicator is 2,798,583.

[2] Within the UN-wide HRP, UNICEF’s target for this indicator is 650,607.

[3] The indicator only includes individuals directly benefitting from distribution of hygiene and dignity kits. Within the UN-wide HRP, UNICEF’s target for this indicator is 936,096.

[4] Indicator is adjusted to more accurately reflect child beneficiaries in UNICEF-supported temporary learning spaces (tented schools). Within the UN-wide HRP, UNICEF’s target for this indicator is 350,000.

[5] The previous indicator ‘Children with access to psychosocial support in education programs’ calculated child beneficiaries using a ‘students per teacher’ proxy. To enhance accuracy of UNICEF’s reporting, the indicator is revised to report only the number of teacher trained. Within the UN-wide HRP, UNICEF’s target for this indicator is 6,000.

[6] Newly-added indicator to reflect children beneficiaries of learning materials. Within the UN-wide HRP, UNICEF’s target for this indicator is 350,000.

[7] Due to multiple displacement, the services may be provided to the same beneficiaries more than one time. Within the UN-wide HRP, UNICEF’s targets for ‘Newborn babies of conflict-affected families benefitting from newborn home service is 12,000’. For ‘Children provided with access to growth monitoring (nutrition screening) services’ is 384,000. For ‘Under 1 year old children vaccinated against measles through routine immunization’ is 80,000. Polio targets remain the same between the HRP and the HAC.
[8] Figures indicate the number of children that have been vaccinated at least once. National polio immunization campaigns target all U5 children all over Iraq. Fewer subnational campaigns target the Governorates worst affected by IDP movements. Results reflect official MoH figures (including immunized IDPs determined throughout the PNIDs) for the May PNIDs. Previously, IDP beneficiary figures were estimated by UNICEF according to IOM’s IDP tracking figures from each governorate and the immunization coverage rate per governorate as per MoH. Reported here are MoH figures as of Polio National Immunization Day (PNID) April 2015. Polio targets remain the same between HRP and HAC.

[9] In previous UNICEF humanitarian reporting, the number of children affected by grave rights violations was reported. This indicator now reports the number of violations of child rights, rather than the number of children affected. Therefore December 2014 results are not comparable and not included here. Figures have been adjusted accordingly. Grave violations of child rights via the MRM targets remain the same between HRP and HAC.

[10] In previous reporting, this indicator included numbers of Unaccompanied and Separated Children (UASC). These children are now reported separately, under a dedicated UASC indicator. Within the UN-wide HRP, UNICEF’s target for this indicator is 8,403.

[11] Within the UN-wide HRP, UNICEF’s target for this indicator is 86,895

[12] Within the UN-wide HRP, UNICEF’s target for this indicator is 896

[13] Within the UN-wide HRP, UNICEF’s target for this indicator is 5,871

[14] Some families are assisted several times through the RRM due to prolonged or multiple displacements. While previously this indicator reflected only the ODK reported individuals reached through the Rapid Response Mechanism (RRM) in partnership with DRC, NRC, ACTED, Mercy Corps, and Save the Children International, it is now calculated by using the number of RRM kits distributed by RRM implementing partners to IDP families and reported back to UNICEF. Each kit is for a family of 7 members. Within the UN-wide HRP, UNICEF’s target for this indicator is 1,380,914