**Highlights**

- Since January UNICEF and partners trained 693 teachers (353 females) on education in emergencies. In August, 437 teachers participated in UNICEF-supported training sessions.
- Since the start of the year, UNICEF has delivered more than 2,800 tonnes of water treatment materials countrywide, contributing to an estimated 10 percent of the national annual requirement.
- In August, UNICEF increased support to health activities to include an extra four mobile teams in Salah al Din, for a total of 14 teams functional in that governorate. In the month, 13,396 children under 1-year-old were vaccinated against measles country-wide.
- Iraq is currently facing water shortages and water quality challenges which are most acute in southern governorates. In August, a scoping mission involving UNICEF investigated water scarcity and disease outbreak took place in southern Iraqi governorates. As of end-August UNICEF had provided financial support to Basrah health authorities for increased water quality monitoring, was in process of delivering a three-month stock of oral rehydration sachets (ORS) as part of treatment of people affected by gastroenteritis, was identifying needs for capacity building of local authority health staff, and working to strengthen coordination across the affected governorates of Basrah, Thi Qar, Missan, and Qadissiyah.

**UNICEF Response with partners**

### Key Indicators

<table>
<thead>
<tr>
<th>UNICEF</th>
<th>Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target</td>
<td>Result*</td>
</tr>
<tr>
<td>Vulnerable people newly-displaced by conflict receiving RRM kits within 72 hours of trigger for response</td>
<td>1,030,000</td>
</tr>
<tr>
<td>Emergency affected populations with access to sufficient safe water supply</td>
<td>1,300,000</td>
</tr>
<tr>
<td>Girls and boys receiving education supplies</td>
<td>450,000</td>
</tr>
<tr>
<td>Children and caregivers participating in structured, sustained, resilience, or psychosocial support programmes</td>
<td>186,300</td>
</tr>
<tr>
<td>Children under 5 vaccinated against polio through campaigns</td>
<td>1,200,000</td>
</tr>
</tbody>
</table>

*Results are cumulative (January-August 2018). For explanation of results compared to targets see the narrative report and footnotes under the Humanitarian Performance Monitoring (HPM) table starting on page 9.

**Since January, progress against 2018 targets has been limited, mainly because of lower than anticipated levels of new displacements. Also, as discussion on camp consolidation/closure remains inconclusive, there have been no large-scale camp relocation movements yet.**

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“No matter how difficult the circumstances, we have to do well and succeed”, says Mohammed, 12 years old. Mohammed studies with his friends in Kilo-18 IDP camp, Anbar ©UNICEF/Iraq/2018/Jeelo
Situation Overview & Humanitarian Needs

Iraq is currently facing water shortages that are expected to worsen in the short to medium term. The southern governorate of Basrah has been particularly affected, as low water levels in the main water source, the Tigris River, contribute to higher levels of water salinity, reducing water availability for drinking and personal use. Critical water scarcity has reportedly caused new internal displacement of around 630 families in the south¹, while an outbreak of gastrointestinal illness has affected more than 22,000 people. In combination with public dissatisfaction and more systemic issues including lack of access to jobs and high levels of corruption, the acute water crisis prompted renewed violent protests in August. Given the scale and complexity of the issues at hand, immediate needs include supporting government health staff and systems to identify and treat cases of gastrointestinal illness, and identifying immediate and medium-term measures to alleviate fresh water stress.

In Iraq, a measles outbreak has occurred every 2-4 years since 2007. In recent months, an increasing number of reported measles cases has been a growing concern. The most recent previous outbreak started in refugee camps in the north and spread to central and southern governorates, resulting in 2,363 confirmed cases from 2013 to 2015. Iraq has seen a similar disease pattern in 2018, with a large majority of confirmed measles cases reported in northern governorates, including 254 confirmed cases (79 per cent of all confirmed cases) in Dahuk, Erbil, Ninewa, and Kirkuk. In addition, measles has also begun affecting central and southern governorates. As of mid-July 2018, a total of 648 cases had been reported, of which 323 (50 per cent) were laboratory-confirmed. Children below 5 years-old represent 75 per cent of confirmed cases, and 62 per cent of total confirmed cases have not received any dose of measles vaccine. A challenge has been concerns about quality of the current surveillance data with potential under-reporting of cases.

In August, owing to lack of funding, highly critical intersectoral service gaps for IDP response were reported in 140 sites including 37 formal camps, impacting an estimated 393,177 displaced people. Gaps include limited access to health care, food, adequate WASH and shelter. Many sites reported children being engaged in labour and lacking access to education.² Despite the overall improvements in internal security in Iraq in 2018, for both returnees and internally displaced people (IDP), extensive humanitarian needs remain. More than four million people, including two million children, have returned to their homes, while 1.9 million people, including 1 million children, remain internally displaced across the country. Of these 570,294 internally displaced persons (IDP) remain in camps and 1.35 million people remain in non-camp locations, including nearly 167,604 living in critical shelter arrangements³. Between January and August 2018, the returnee population increased by around 808,332 individuals. An estimated 97 per cent of all returning populations have returned to their own houses, 2 percent to private settings (e.g., rented homes, homes of relatives), while 1 percent (around 19,000 individuals including 10,000 children) remain highly vulnerable and in critical shelter even in their place of return⁴. In these areas, people - especially children - continue to face insecurity, risks posed by explosive remnants of war (ERW), damage to homes and municipal infrastructure including schools, health centres, and water and sanitation networks, as well as limited access to public services and livelihood opportunities⁵.

On 26 August, an earthquake of 6.2 magnitude struck western Iran, with tremors felt across the Iraq border in the KRI, Diyala, Kirkuk, and Baghdad governorates of Iraq. No reports were received of injury, loss of life, or infrastructure damage in Iraq. The Ministry of Construction and Housing is investigating the possibility of setting technical and engineering regulations and standards to reduce landslide risks in areas likely to be affected by earthquake⁶.

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¹ Office for the Coordination of Humanitarian Affairs (OCHA), Iraq Humanitarian Bulletin, August 2018
² Iraq Camp Coordination and Camp Management (CCCM) Advocacy Appeal for Integrated Humanitarian Action.
³ Critical shelter includes informal settlements, abandoned/unfinished buildings, mosques or municipal buildings such as schools.
⁵ Iraq CCCM Returns Monitoring Analysis, 3 September 2018.
⁶ Per the Joint Coordination and Monitoring Centre’s (JCMC) July 2018 report
Humanitarian leadership and coordination

UNICEF leads the WASH Cluster, co-leads the Education Cluster with Save the Children International, leads the Child Protection Sub-Cluster (CPSC) and Nutrition Working Group, (NWG) and is an active member of the Health cluster. UNICEF, the United Nations Population Fund (UNFPA), and the World Food Programme (WFP) coordinate the Rapid Response Mechanism (RRM) Consortium serving people on the move, and the Multi-Sector Emergency Package (MSEP) delivering aid in retaken areas. In addition, UNICEF, UNHCR, and the World Health Organization (WHO) coordinate with relevant line Ministries through the Cholera Taskforce, led by the Ministry of Health (MoH).

In August, a scoping mission involving the WASH Cluster, UNICEF, WHO, and the International Organisation for Migration (IOM) took place to four southern Iraqi governorates (Muthanna, Qadissiya, Thi Qar and Basrah) to investigate water scarcity and disease outbreak issues, and to determine how UN and NGO partners can support national and local authorities in responding to the acute, but complex, crisis. As of end-August, the gathered information is being reviewed and will inform further planning. In preparation for 2019 humanitarian coordination and planning, in August the WASH and Camp Coordination and Camp Management (CCCCM) clusters are gathering the funding status of partners supporting WASH and shelter services in IDP camps to anticipate potential response gaps.

The Ministry of Health (MoH) requested UNICEF and WHO support to run a nationwide two-phase house-to-house measles campaign targeting 5 million children aged between 9 to 59 months. Phase one is scheduled to take place in September, mainly with government support, while coordination is ongoing between UNICEF and WHO to seek resources to support the second phase, scheduled for later in 2018. The MoH will provide the 3 million doses of measles-containing vaccine already in stock, and is in the process of procuring 5.5 million additional doses. WHO and UNICEF will provide technical and operational assistance, supporting programmatic, administrative, logistic, and financial needs of the MoH and its Directorates (DoH).

Between 5 to 9 August, 20 Child Protection and Gender-Based Violence staff successfully completed Caring for Child Survivors (CCS) training; upon completion, participants move towards individual learning programs to continue capacity building. Since 2016 138 participants have completed the training, improving available in-country capacity to meet the needs of most vulnerable survivors of violence. The CPSC is aiming to re-contact these staff, aiming to offer support to build a stronger network of trained CP responders. The second Child Protection Minimum Standards (CPMS) training and consultation took place in Baghdad between 12 to 14 August. Consolidated feedback from Iraq was shared to the Global Alliance for Child Protection in Humanitarian Action, and will be reflected in an updated CPMS (to be launched in 2019). A 10-week Alternative Care review led by a CPSC partner was completed in August. It consisted of a legal framework review, guided by international standards but based on existing practices in Iraq. A final report is under preparation as of end-August.

Humanitarian Strategy

The Iraq Humanitarian Response Plan (HRP) targets 3.4 million people in need. The plan was jointly launched alongside the Government’s 2018 Plan for Relief, Shelter and Stabilization of Displaced People. The 102 humanitarian partners engaged in the HRP will reach as many newly displaced families as possible by securing safe access and providing sequenced emergency packages. UNICEF’s strategy under its 2018 Humanitarian Action for Children (HAC) Appeal in Iraq is aligned with the HRP.

Humanitarian planning for 2019 continued. On 30 August, a joint UN Country Team (UNCT) and Inter-Cluster Coordination Group (ICCG) workshop agreed ‘people in need’ figures. Based on the latest data and planning projections, it is anticipated that in 2019 Iraq will continue to see two million IDPs, four million returnees, 400,000 people living in host communities in need of humanitarian support, and 250,000 Syrian refugees. The total number of people in need of humanitarian assistance is estimated for 2019 to be 6.55 million.

Summary Analysis of Programme Response

Rapid Response Mechanism (RRM) and Multisector Emergency Response Package (MSEP)

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7 WHO will support training and vaccination through mobile and fixed vaccination teams while UNICEF will support Communication for Development (C4D) with special attention to high-risk districts and IDP/refugee settings. WHO and UNICEF will ensure appropriate monitoring and evaluation.

8 People may be reached by RRM more than once during displacement, including at mustering points; at a screening site with an initial package; and with the full package on arrival at a camp or in host communities. RRM does not register beneficiaries; all efforts are made to reduce duplication in reporting between partners.
In 2018, the Rapid Response Mechanism (RRM) Consortium aims at the delivery of lifesaving humanitarian assistance to vulnerable people, including children, on the move due to crisis or camp relocation. RRM assistance will be extended to highly vulnerable returnee populations intending to return to their areas of origin and requiring support during their repatriations.

Between January and August 2018, the Consortium reached 75,469 vulnerable people including 43,265 children on the move, with emergency response items to support access to safe water, good hygiene practices, and immediate food rations. Of the total reached, 86 per cent were supported during secondary displacements, 3 per cent during new displacements, 4 per cent during camp relocations and the remaining 7 per cent were assisted on Sinjar Mountain (flood-affected internally displaced families).

Most assistance has been first-line response to new and secondary displacement, and to camp relocations. The RRM Consortium planned to support anticipated camp relocation caseloads with immediate response items; however, as discussions on camp consolidation/closure remain inconclusive, there have been no large-scale camp relocations so far. Consortium partners are currently in discussion with OCHA about potential downward revision of its 2018 HRP targets.

In August, RRM partners distributed 636 emergency kits to reach 2,090 individuals including 980 children across four governorates, ensuring the provision of immediate, life-saving emergency supplies to highly at-risk families. In the month, the majority of people (77 percent) were reached in Qayyarah camps, Nineawa. All distributions to new camp arrivals took place in close coordination with the Camp Coordination and Camp Management Cluster (CCCM) and local authorities, to ensure support is only provided to those in need. There were no Multi-Sector Emergency Package (MSEP) deliveries in August, as there was no need to reach people caught in conflict areas.

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

UNICEF supports vulnerable displaced families with temporary and sustainable WASH services and facilities, including emergency water trucking, rehabilitation of water and sewage treatment plants and water supply networks, and upgrade of WASH facilities in schools and Primary Healthcare Centres (PHC). Where possible, services are being handed over to government partners as part of UNICEF’s exit strategy, particularly in areas of return. In IDP camps, planning and completing this handover is a challenge due to uncertainties around camp closure and consolidation, and taking into consideration differences in government capacity in various parts of the country.

As part of response to the complex water crisis in southern Iraq, and in line with preparedness planning undertaken earlier in the year, in August UNICEF coordinated with UN and government partners to identify immediate and medium-term measures to alleviate fresh water stress – discussion with potential donors is ongoing to support allocation of resources including for rehabilitation of water treatment plants and supporting WASH work in schools in affected areas before the start of the new academic year. In central Iraq, it was noted that water levels in the Habbaniyah lake in Anbar also continued to decline – UNICEF and its partner have dug new trenches to facilitate pumping of water from the lower level. Even in areas where water is available, electricity cuts remain regular and shortage of fuel hampers consistent pumping, including in IDP camps and areas of return.

UNICEF progress is at 54 per cent against the water supply targets for IDPs of its Humanitarian Action for Children (HAC) 2018 appeal for, and UNICEF-supported partner contribution has constituted 41 per cent of the whole WASH Cluster results as of August 2018. In ongoing IDP response, between January and August 2018, UNICEF has supported at least 698,551 IDPs (328,319 children of which 167,443 girls) in 174 formal and informal camps, collective centres, and non-camp locations in fourteen governorates through government and non-government partners, including through WASH Service Centres (WSC). UNICEF and partners supported continued solid waste management in various camps across the country including through cleaning campaigns, distribution of garbage bags, and garbage removal and disposal supporting sanitary environments. As of August, 309,782 IDPs (145,598 children, of which 74,255 girls) have had continued access to adequately-maintained toilet facilities (latrines), with UNICEF-supported partners contributing to 79 per cent of the cluster response.

In 2018, UNICEF has worked with Government and UN partners to deliver a parallel ‘quick fix’ strategy in Mosul for water network breakages. Water supply to conflict-damaged areas of Mosul City continued in August, providing daily drinking water for 93,649

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9 Anbar, Kirkuk, Salah Al Din and Nineawa

9a Anbar, Babylon, Baghdad, Dahuk, Diyala, Erbil, Kerbala, Kirkuk, Missan, Muthanna, Nineawa, Qadissiyah, Salah al Din, and Sulaymaniya. Source: Partner ActivityInfo reports. 174, sites is the maximum number served since January 2018.
individuals (44,015 children, of which 22,448 girls) in 21 neighbourhoods. As part of the exit strategy to eliminate water trucking in the City, UNICEF is supporting the Ninewa Directorate of Water (DoW) to upgrade four water supply systems. The progress made in network infrastructure repairs means that, by September, UNICEF anticipates a significant reduction in water trucking services. In 2018, UNICEF has delivered more than 2,800 tonnes of water treatment materials countrywide, contributing around 10 percent of the national annual requirement. Water treatment materials support preparedness against waterborne diseases such as cholera; it is estimated 1.5 million people have benefitted from this supply to date. UNICEF continues to improve WASH services for children in schools and Child Friendly Spaces (CFS) – as of August, partners completed WASH facilities in 13 schools in Salah al Din11 and 4 in Anbar12 supporting 5,209 students (2,657 girls). An estimated 6,000 IDPs had access to adequately maintained and cleaned WASH facilities in the Dari Primary Healthcare Centre (PHC) in Ameriyat al Fallujah, Anbar.

**Education**

UNICEF supports access to education through the establishment of temporary learning spaces, increasing space for formal education, and delivering non-formal education (NFE) interventions through partners. Quality of learning is supported through teacher training and the provision of teaching and learning materials. UNICEF also works to strengthen the capacity of national education actors to implement services in humanitarian situations.

There remain specific protection concerns around education infrastructure in areas retaken from ISIL in 2017, and the need for repair, rehabilitation, and clearance of Explosive Remnants of War (ERW) are significant. As part of ongoing interventions to ensure children and teachers are aware of the dangers of ERW, in August, a UNICEF partnership was initiated focusing on Mine Risk Education (MRE) in Nineawa (Mosul) and Kirkuk prior to the start of the new school year – in the month, 21,358 children (10,014 girls) aged between 5 to 17 years old participated in awareness-raising activities designed to help them recognize and avoid explosive material. Summer school tutoring activities on Arabic, English, maths and science, continued in Ninewa IDP camps,13 with 1,138 children (522 girls) participating in August, while 1,100 children in Dahuk participated in summer activities focusing on encouraging social cohesion. UNICEF and the Directorate of Education (DoE) Dahuk and Ninewa trained 338 teachers (143 female) from 152 schools on ways to deliver the ‘life skills’ curriculum in the classroom.14

Since January UNICEF and its partners have trained 693 teachers (353 females) on education in emergencies (EIE), ways to encourage development of life skills among students, and methods to deliver psychosocial support (PSS) in the classroom. Considering the academic year, holding larger-scale teacher trainings is easiest during the summer break - in August alone, 437 teachers participated in UNICEF-supported sessions. The next round of formal education enrolment will take place in September, as the academic year will re-start in the week beginning 30 September but, since January 2018, UNICEF and its partners have supported 113,142 children (44,554 girls) to enroll in either formal or non-formal education programmes. In advance of the new school year, the remaining 3,022 repaired school desks (of a total 7,000) were delivered to Ninewa schools in August.

Access to Hawiga in Kirkuk, where UNICEF and partners are planning education infrastructure and rehabilitation work, was raised as a challenge in August. Private contractors have been requested to register at the General Secretariat of the Council of Ministries in Baghdad before being allowed to work in Hawiga, but this may take several months. UNICEF and the Education cluster are making efforts to find temporary alternatives, including coordinating with government officials to receive temporary approval to start work during the period that registration is ongoing.

**Child Protection**

UNICEF is reaching vulnerable children and caregivers through structured, sustained psychosocial support services (PSS), with referral to specialized child protection assistance when needed, including for children with disabilities. UNICEF is working to deliver support to children in contact with the law, including children accused of affiliation with ISIL. UNICEF integrates a focus on Gender-Based Violence (GBV) prevention across its work. UNICEF and the Child Protection Sub-Cluster (CPSC) promote integration of services in community centres, aiming to minimize stand-alone activities as part of resilience-focused interventions.

Since the start of the year, UNICEF has begun to consolidate child protection and GBV partnerships for geographic coverage and case management capacity. This process took time and resulted in periods of lower activity in the first half of 2018 as older partnerships concluded and new ones were negotiated. The increase in achievements in the second half of the year is supported by

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11 Schools were in Al Alam 1 and 2., Al Shaharna, Dream City, and Qadissiya
12 Three in Amiriya and one in Bzeibz
13 Debaga, Hasansham, Jed'aah, and Hamam ali Allil camps are covered for this activity by one partner, Terre des Hommes.
14 76 schools each in Dahuk and Nineewa; with 100 teachers in Dahuk and 228 teachers in Nineewa.
15 Specialized assistance includes case management, legal services, family tracing and reunification, and emergency alternative care.
activation of new project agreements, and more children attending activities during summer holidays. As of August 2018, UNICEF partners provided psychosocial support services to 10,632 newly registered IDP children (5,387 girls); since January 2018, the total number has reached 123,116 children (59,382 girls). Specialized child protection services reached 655 IDP children in August (287 girls), bringing the total number reached this year to 6,397 IDP children (2,789 girls). Child protection partners continue to prioritise capacity building for child protection committee members and children on positive parenting and child resilience. In August, 16,897 women, girls, and boys who have experienced, or who are found to be at risk of, GBV have accessed case management and PSS services through UNICEF GBV programming. As of August 2018, new partnerships have come online to support increased outreach of UNICEF-supported GBV services.

Three reports of grave violations of child rights were recorded in August affecting three children in Baghdad, Kirkuk and Salah al Din. None of these cases had yet been verified at time of preparation of this report. Incidents included killing of two children (one boy and one girl) and injuring of another child (a boy), by explosive material. Monitoring of the situation of children affected by conflict for August continues. Access and security threats remain the biggest challenge to obtaining and verifying reports.

There remain gaps in services for adolescent boys and girls due to a lack of dedicated spaces for them to engage in social, recreational and skills-building interventions in a safe and culturally_acceptable environment. UNICEF has initiated integrated projects that try and bridge the gap between child-focused and adolescent-focused spaces and activities.

Health and Nutrition

UNICEF supports delivery of routine immunization services, monitoring of infant and young children’s growth, and counselling on Infant and Young Child feeding practices (IYCF). Where a child is identified with malnutrition, UNICEF and partners ensure referral to specialised care per UNICEF and WHO guidelines. Neonatal health services are supported, including awareness sessions in IDP camps. UNICEF supports government partners through delivery of supplies and staff capacity building, and also engages NGOs to mitigate for short-term gaps in critical service provision.

Connected to the water crisis in southern Iraq, there has been a significant number of cases of individuals (around 22,000) admitted to health facilities for treatment of gastroenteritis. As reported by the Ministry of Health (MoH), the number of visitors to health institutions from 12 August to 25 August was 16,350 cases with 1,660 samples taken from diarrhoea cases for testing; all tested negative for cholera (Vibrio cholera). The MoH indicated no deaths have been recorded, no complications and no cases have reached the epidemic level. As of end-August UNICEF had provided financial support to Basrah health authorities for increased water quality monitoring, was in process of delivering a three-month stock of oral rehydration sachets (ORS) as part of treatment of people affected by gastroenteritis, was identifying needs for capacity building of local authority health staff, and working to strengthen coordination across the affected governorates of Basrah, Thi Qar, Missan, and Qadissiyah.

Through government and NGO partners, since January 2018, 1,585 newborns and their mothers (808 girls) have been visited by trained health worker teams as part of the home visits programme in the critical first month of life. Immunization support through routine services continued, with UNICEF and partners reporting 27,083 children under 1-year-old (13,812 girls) vaccinated against measles and 453,071 children under 5-years-old (234,066 girls) vaccinated against polio. Progress as of August is 54 percent (measles) and 38 per cent (polio) of UNICEF 2018 targets. In addition to the 20 mobile teams supported by UNICEF through the MoH in eight Erbil districts, UNICEF has increased its support to include an extra four mobile teams in Salah al Din, in addition to the 10 already functional in that governorate. Support is being provided in addition to the existing fixed immunization units in IDP and Syrian refugee camps. In Hawiga, Kirkuk governorate, where there has been continued armed conflict in the first half of the year, rates of return are beginning to rise, with a commensurate need for the re-start of basic services. A subnational polio campaign between 8 and 16 August reached 32,503 children under 5-years-old in Kirkuk. UNICEF supported communication for development (C4D) interventions including awareness-raising sessions and Information, Education, and Communication (IEC) materials.

In nutrition interventions, 10,252 pregnant women and new mothers attended health promotion sessions on IYCF between January and August 2018, and 125,186 children aged 6-59 months (63,815 girls) have been screened for nutritional status. Of children screened in August, 754 children (4.3 per cent) were identified with Moderate Acute Malnutrition and 164 (0.95 per cent) were identified with Severe Acute Malnutrition. Malnutrition. For cases with complications, referral to specialist Nutrition Rehabilitation Centres (NRC) was undertaken. The August Global Acute Malnutrition (GAM) rate of 5.25 percent in IDP camps is acceptable per international standards. UNICEF-supported health promotion events reached 12,015 individuals in the month with key messages on food safety, breastfeeding, newborn care, and health during pregnancy. As part of efforts to reduce maternal and neonatal mortality, trained health workers visited 395 newborns and mothers in their tents/homes in the critical first month of life. In cases where risk signs were identified, newborns and mothers were referred to the nearest health facility.

The planned Iraq health and nutrition response remains 45 per cent underfunded; as needed, UNICEF is prioritising interventions to ensure basic child- and mother-focused services continue. UNICEF requires US$1 million to sustain services in IDP camps until December 2018. Reducing these services may expose vulnerable children and mothers to preventable diseases that have life-long impact.
Cash Assistance

UNICEF is establishing links between humanitarian assistance and the Government’s social protection framework to provide integrated support to vulnerable children. UNICEF’s cash assistance is unconditional, but aims to support removal of barriers to children’s access to education. UNICEF delivers an integrated package of support alongside government partners to identify protection-related concerns and refer cases to social workers for additional support. In the first half of 2018, UNICEF has supported 3,902 children (1,877 girls) with cash assistance of US$90 per child per month.

Funding has been limited in 2018 for UNICEF cash assistance for the IDP response, with a 70 percent funding gap as of end-August. UNICEF faces a critical funding gap for emergency cash assistance for vulnerable displaced, returnee, and host community Iraqi children. US$3.1 million is urgently needed to ensure support to vulnerable families begins in time for the new school year, helping parents to meet hidden costs of learning. Without these funds, UNICEF will not be able to reach its full planned target of 9,000 children in 2018, and may not be able to continue support to the 3,900 children benefiting from this assistance up to May 2018 (as part of the 2017/2018 academic year). These children may be at increased risk of drop-out, with longer-term consequences to their future.

Winter Response Preparations

In Iraq, extreme summer heat turns to zero-degree temperatures fast. Winter starts in October and lasts until March, bringing with it heavy rains, snow storms and freezing temperatures. Children are especially vulnerable to cold weather conditions that exacerbate child related diseases such as pneumonia and other respiratory infections. In 2018, UNICEF intends to reach 200,000 of the most vulnerable Iraqi children, delivering warm winter clothing in nine governorates. UNICEF has secured US$2 million to initiate procurement of 65,000 kits, ensuring supplies can be delivered as soon as temperatures start to drop. To ensure 200,000 vulnerable Iraqi children have winter clothes, UNICEF Iraq urgently requires US$ 3.25 million. The lack of funding will leave the displaced and conflict-affected children vulnerable and at risk of illness from a lack of warm clothing to protect them against the harsh winter elements.

Supply and Logistics

Since the start of 2018, UNICEF Iraq dispatched relief items to government and non-government partners with a value of over US$6 million. Up to March 2018, receipt of offshore supplies and internal logistics experienced challenges due to the internal political tension after the 2017 referendum on the KRI’s independence. Between March and August 2018, some delays have still been experienced on approvals relating to import exemption letters but, overall the impact on supply and logistic response has been minimal.

Media and External Communication

In August, UNICEF Iraq participated in World Breastfeeding Week to improve new-born health in Iraq. There was also extensive coverage on improvements in access to education for vulnerable children as well as supporting adolescent development. UNICEF also signed an agreement with Zain Telecommunication cementing a partnership to support advocacy messaging on a range of child- and mother-focused topics from education to health promotion. Celebrations for World Water Day and International Youth Day were marked through social media posts.

Security

Civil protests continued in Basrah, southern Iraq, throughout August, calling for better services, including electricity and water supply, livelihood opportunities, and reduction of corruption. Additional demonstrations occurred in Baghdad, attracting numbers in the low-hundreds. Reports of armed conflict continued in Nineawa, northern-central Iraq, and Anbar. Turkish airstrikes against PKK posts were reported in Erbil and Duhuk, KRI. Many attacks, including two suicide vehicle-borne improvised explosive devices (VBIED) attacks, targeted forces in Kirkuk and Anbar in August. Direct attacks on security personnel and positions also continued in Salah Al Din, Kirkuk, Nineawa and Diyala. Government military operations were markedly lower in August compared to previous months; operations targeted armed groups (AG) in southwest Kirkuk and the Himrin Heights in Diyala. AG activities in Anbar persisted, where improvised explosive device (IED) detonations remained frequent. An increase in terrorism was noted countrywide. Despite these factors, UNICEF missions and field presence continued without undue effect from armed violence or civil action.

Funding as of 31 July 2018

In August, UNICEF received EUR 3.5 million from the European Union (ECHO), to support a new multi-sector RRM, health, education and child protection response to displaced populations, and additional funds of US$ 8 million from the Office of Foreign Disaster Assistance (OFDA) to ensure continued access to water, sanitation and hygiene services to IDPs in camps and most vulnerable communities in Iraq, including populations at high risk of waterborne disease. Flexible thematic funds from UNICEF Portugal, UNICEF Germany, via UNICEF’s global thematic humanitarian funds have helped to support underfunded health and nutrition and cash assistance programmes in 2018. RRM needs have been less acute than anticipated in the first eight months of 2018, and received
resources are so far adequate to meet needs. In most cases, carry-over funds from 2017 and 2018 funds received are earmarked to specific programmes and cannot be used to support gaps in other areas. In cases of prolonged underfunding, UNICEF will adjust programming to focus on first-line response or maintenance of existing basic service provision for most vulnerable groups.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds Available*</th>
<th>Funding Gap</th>
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<tr>
<td></td>
<td></td>
<td>Funds Received</td>
<td>Carry-Over</td>
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<tr>
<td>Rapid Response Mechanism (RRM)</td>
<td>4,870,000</td>
<td>1,171,344</td>
<td>819,370</td>
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<tr>
<td>Water, Sanitation and Hygiene (WASH)</td>
<td>37,000,000</td>
<td>24,498,948</td>
<td>10,002,784</td>
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<tr>
<td>Education**</td>
<td>15,950,000</td>
<td>12,746,516</td>
<td>6,407,974</td>
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<tr>
<td>Child Protection</td>
<td>21,767,000</td>
<td>6,525,568</td>
<td>7,982,281</td>
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<td>Health and Nutrition</td>
<td>10,000,000</td>
<td>4,198,410</td>
<td>1,310,980</td>
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<tr>
<td>Basic Needs (Multipurpose Cash Assistance)</td>
<td>5,564,160</td>
<td>1,049,572</td>
<td>621,828</td>
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<tr>
<td>Winterization (Seasonal Response)</td>
<td>6,000,000</td>
<td>-</td>
<td>1,759,019</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>101,151,160</strong></td>
<td><strong>50,190,358</strong></td>
<td><strong>28,904,136</strong></td>
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*Note: Funds available include HQ cost recovery and cross sectoral costs. Carry-forward figure is programmable balance as of 31 December 2017, for the 2017 HAC Appeal.

**2018 Education response**: As of August 2018, UNICEF Iraq had received an additional US$3,204,490 for Education response above its 2018 requirement.

Next SitRep: 19 October 2018


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## Annex A

### SUMMARY OF PROGRAMME RESULTS (January-August 2018)*

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>Change since last Report</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RAPID RESPONSE MECHANISM</strong> - Needs: 860,000 people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vulnerable people newly displaced by conflict receiving RRM kits within 72 hours of trigger for response</td>
<td>1,030,000</td>
<td>75,469¹</td>
</tr>
<tr>
<td><strong>WATER, SANITATION AND HYGIENE</strong> - Needs 5.4 million people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency affected population accessing sufficient quantity of water of appropriate quality for drinking, cooking and personal hygiene</td>
<td>2,309,765</td>
<td>1,684,736¹</td>
</tr>
<tr>
<td>Emergency affected population benefiting from latrines established/rehabilitated/maintained</td>
<td>436,901</td>
<td>392,698²</td>
</tr>
<tr>
<td><strong>EDUCATION</strong> – Needs 3.3 million school-aged children*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys and girls receiving educational supplies</td>
<td>528,222</td>
<td>284,934¹</td>
</tr>
<tr>
<td>Teachers, facilitators, and education personnel trained on emergency education, life skills, and delivering PSS</td>
<td>5,000</td>
<td>8,545²</td>
</tr>
<tr>
<td>Conflict-affected boys and girls (6-17 years) enrolled in formal and non-formal education programmes</td>
<td>528,222</td>
<td>466,262³</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong> – Needs 2.4 million children under 18</td>
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<td></td>
</tr>
<tr>
<td>Children and caregivers participating in structured, sustained, resilience, or psychosocial support programmes</td>
<td>203,865</td>
<td>220,371¹</td>
</tr>
<tr>
<td>Children receiving specialized child protection services (reunification, alternative or specialized care and services)</td>
<td>29,325</td>
<td>15,331²</td>
</tr>
<tr>
<td>Girls, boys, and women receiving individual or group psychosocial support³</td>
<td>20,000</td>
<td>16,897</td>
</tr>
<tr>
<td><strong>HEALTH</strong> – Needs: 1.2 million children under 5*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New-born babies of conflict-affected families benefitting from new-born home services</td>
<td>8,000</td>
<td>1,585¹</td>
</tr>
<tr>
<td>Under 1 year old children vaccinated against measles through routine immunization</td>
<td>50,000</td>
<td>27,083³</td>
</tr>
<tr>
<td>Children under 5 vaccinated against polio in crises-affected areas through campaigns</td>
<td>1,200,000</td>
<td>453,071³</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children U5 accessing nutrition services</td>
<td>50,000</td>
<td>125,186¹</td>
</tr>
<tr>
<td>Targeted mothers of children 0-23 months with access to IYCF counselling for appropriate feeding</td>
<td>20,000</td>
<td>10,252</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong> – Needs: 1,080,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Most vulnerable children receiving child-focused cash transfer</td>
<td>9,000</td>
<td>3,902¹</td>
</tr>
</tbody>
</table>

### Footnotes:

RM 1: Consortium led by UNICEF, WFP, and UNFPA: Females: 38,489, Males: 36,980. Since January, progress against 2018 targets has been limited, mainly because of lower than anticipated levels of new displacements. Also, as discussion on camp consolidation/closure remains inconclusive, there have been no large-scale camp relocation movements yet.


Education 2: Cluster: Females: 4,358, Males: 4,187. UNICEF: Females: 353, Males: 340. UNICEF-supported trainings take place in agreement with the MoE; larger-scale trainings are scheduled to take place outside the formal academic year to minimise disruption to children’s learning.

Education 3: Cluster: Females: 207,893, Males: 258,369. UNICEF: Females: 59,382, Males: 63,734. Enrolment to formal education takes place once per year (data available after verification by MoE after the start of the academic year). UNICEF is working with the MoE to support
enrolment through establishment of schools, providing pre-fabricated classrooms, and opportunities for children to access formal and non-formal learning.


Child Protection sub-cluster 2: Females: 7,107, Males: 8,314. UNICEF Females: 2,783, Males: 3,624. In 2018, as the acute emergency concluded, UNICEF has begun to consolidate partnerships both for geographic coverage and case management capacity. This process took some time and resulted in periods of lower activity as some partnerships were concluded and new ones were negotiated. The increase in achievements is supported by the signing of long-awaited project agreements, and more children attending activities during summer holidays.


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Health 1: Females: 808, Males: 777. In certain governorates, mobile community health worker teams (covering new-born/nutrition services among others) were paused earlier in 2018; it was instead planned to establish nutrition teams in IDP camps to do growth monitoring by anthropometric measurement. Due to restricted funds, this has been postponed.

Health 1: Females: 808, Males: 777.


Health 3: Females: 231,066, Males: 222,005. UNICEF reports only for its targeted governorates of Anbar, Kirkuk, Ninewa, and Salah al Din, per the HAC 2018. Potential underreporting by partners into ActivityInfo is being investigated.

Health 3: Females: 231,066, Males: 222,005.

Social Protection 1: UNICEF: Females: 1,877, Males: 2,025. UNICEF Humanitarian Action for Children target of 15,000 children is a two-year target 2018-2019. The target of 9,000 reflected is the 2018 target only. Funding has been limited in 2018 for UNICEF cash assistance for the IDP response, with a 70 per cent funding gap as of end-August. This table reflects Iraqi internally displaced/returnee households. Syrian refugee households are reflected in UNICEF Syrian refugee humanitarian reporting.


*Needs per UNOCHA. Each cluster targets its own population in need based on countrywide vulnerability analysis.*