



COVID-19 Response in Iraq

Above: Nurses and doctors inspect and distribute medicine to COVID-19 patients at Karbala's Al-Hussein Hospital. Photo: UNDP Iraq

Bimonthly Update #3: August-September 2020

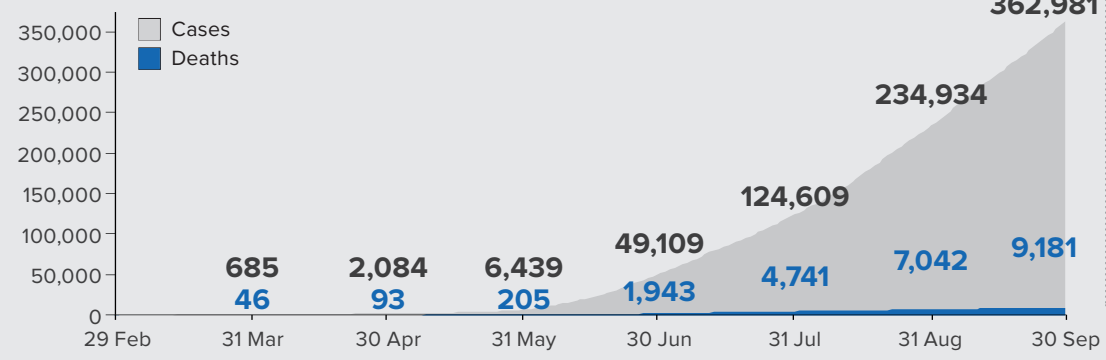
EXECUTIVE SUMMARY

In line with UNDP's Global Integrated Response¹ and the WHO Iraq *Strategic Preparedness and Response Plan*,² UNDP Iraq launched the project **“Support for the COVID-19 Response in Iraq”** in April 2020. To ensure agile, quality implementation in a rapidly evolving operational context, UNDP leveraged existing mechanisms and in-house resources to support its COVID-19 response in Iraq. The implementation of UNDP's COVID-19 response makes use of the operational platforms of the Funding Facility for Stabilization (FFS), the Iraq Social Cohesion Programme and the UNDP Iraq Accelerator Lab.

The number of active COVID-19 cases in Iraq continued to increase during the reporting period (see Figure 1), with the **three highest daily case increases** since the onset of the pandemic reported in September alone. UNDP's support to designated healthcare facilities in 15 governorates reached several milestones during the reporting period. Nine purpose-built COVID-19 isolation wards are now completed in Anbar (Fallujah and Ramadi), Basra, Diyala (Baquba), Dohuk, Karbala, Kirkuk, Ninewa (Mosul) and Tikrit (see Figure 2 overleaf). Each facility will receive the equipment needed for functional, 20-bed airborne infection isolation rooms, except Fallujah and Ramadi, which each have 10-bed facilities. UNDP also continues to procure essential personal protective equipment (PPE) for all locations.

UNDP's **“Corona in Iraq” awareness platform**³ continued to provide trustworthy, reliable information on COVID-19 from national authorities and UN agencies. >

Figure 1. COVID-19 CASES IN IRAQ (Cumulative⁴)



RESULTS August-September 2020



\$27.17m

FUNDING RECEIVED FROM INTERNATIONAL PARTNERS AND UNDP



16

HEALTH FACILITIES TO BE REHABILITATED 9 COMPLETED



147,862

VISITS TO THE ONLINE “CORONA IN IRAQ” PLATFORM



Above: A resident of Ramadi receives personal protective equipment (PPE) and an information leaflet on measures to prevent the spread of COVID-19. Photo: UNDP Iraq

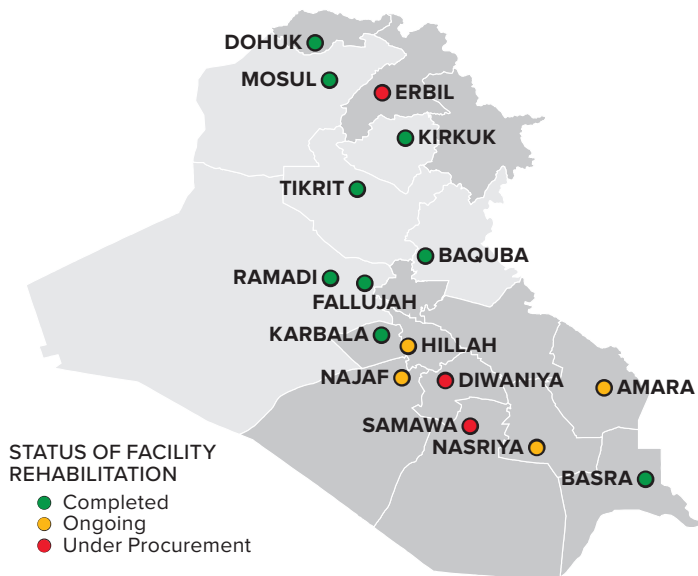
By the end of the reporting period, the platform had 147,862 visits. With accessible language and simple messages, the platform helps increase public awareness about the pandemic and measures for prevention. After observing a decrease in new visits to the platform during the reporting period, likely due to information overload, UNDP’s Accelerator Lab identified ways to adapt the platform by promoting more engagement and competition-based learning. A **partnership with Iraq’s second-largest mobile operator**, Asiacell, will also encourage more engagement-based learning about the virus through customised messaging.

During the reporting period, UNDP also supported Karbala Governorate to track and trace COVID-19 cases using a modern **geographical information system (GIS)**. The system provides decision-makers with situational analysis tools and an operational dashboard that provides a complete analysis of new cases and recoveries, helping them to make quick decisions and respond appropriately.

To support **families that have been disproportionately affected by the COVID-19 pandemic**, UNDP signed agreements with four Community-Based Organisations (CBOs). The CBOs will receive low-value grants to distribute life-support packages and hygiene products in collaboration with 18 Local Peace Committees (LPCs) in Anbar, Ninewa and Salah al Din. At the end of the reporting period, the LPCs and CBOs had provided support to 6,000 families, and completed awareness-raising activities reaching 64,181 people (30,365 women and 15,377 young people).

UNDP also leveraged its **integrator role** to support the UN Resident Coordinator and bring together the UN Development System (UNDS) for system-wide coordination meetings on the Post-COVID-19 Socioeconomic Response Plan (SERP) for Iraq. Finally, in coordination

Figure 2. PROJECT LOCATIONS (on 30 Sept)



with the UN System in Iraq, UNDP launched several impact assessments to examine the far-reaching impact of the pandemic and the decline on oil prices on Iraq’s vulnerable population. The findings and policy implications of the first assessment were published in August.

Despite progress, UNDP also recognised **challenges and risks**, which have been reflected in an updated Project Risk Analysis (see Annex 1).

Recognising the impact of COVID-19 on Iraq, UNDP has seized **opportunities across its portfolio to provide additional support** to pandemic response and recovery. The initiatives, which are implemented by existing projects beyond UNDP’s dedicated COVID-19 support project, are described on Page 7.

Output 1

The healthcare system in Iraq is strengthened to prevent the spread of COVID-19

1.1. 2 online platforms for raising awareness and monitoring COVID-19 are operational

The “Corona in Iraq” platform, launched in April 2020, continues to focus on: (i) Raising awareness on the symptoms and risks of, as well as combat misinformation about, coronavirus disease; (ii) Offering a symptom tracker to encourage users to seek appropriate medical advice; and (iii) Providing a geographical overview of emerging COVID-19 hotspots.

1.2. At least 200,000 views of the online platform

At the end of September 2020, there have been 147,862 cumulative views of the online platform. In August and September, 80 percent of visitors were new users. To increase women’s engagement through the platform, UNDP continues to work with UN Women and UNFPA to gather additional relevant content.

1.3. WHO, MOH and other official/authorised guidance and information on COVID-19 provided

A cumulative total of 10,507 users have made use of the platform’s symptoms tracker. Of the users who chose to share their data, 32 percent were women, an increase from previous reporting period (25.83 percent). The data for August and September also indicates that the symptoms tracker is particularly popular in the southern governorates, mainly Basra, which had the second highest number of cases, after Baghdad.

The “Corona in Iraq” platform was established in partnership with the Government of Iraq (GOI) Commission on Media and Communication and UNICEF. UNDP coordinated with the Ministry of Health and Environment, Commission on Media and Communication, WHO and UNICEF to inform the guidance and public information provided through the platform.

UNDP is partnering with Asiacell Telecom Company to provide customized messages to users, encourage more engagement-based learning about the virus and to link the symptoms tracker on the Asiacell website.

The Karbala ‘Spatial Data Infrastructure’ (SDI) supported by UNDP to track and trace COVID-19 using modern geographic information system (GIS) technologies continues to be in use by the Karbala Governorate.

1.4. 3 medical labs supported by UNDP with priority medical equipment to strengthen testing capacities for COVID-19

The technical evaluation of bids is underway to procure laboratory equipment for the Central Laboratories in Anbar, Dohuk and Erbil, in coordination with the Ministry of Health. The equipment is the critical Reverse Transcription Polymerase Chain Reaction (RT-PCR) thermal cyler and Biosafety Cabinet Class II, which enable these laboratories to process COVID-19 tests, relieving the burden on Iraq’s Central Lab in Baghdad and, overall, expediting testing times.

By end of the previous reporting period, UNDP had confirmed its support to strengthen designated healthcare facilities in 12 governorates. Given the increasing trend in cases, and based on requests for support, UNDP identified the need to support an additional 3 governorates (subject to the availability of funding). Accordingly, the Project now aims to support 15 governorates (Anbar, Babil, Basra, Dhi Qar, Diwaniya, Diyala, Dohuk, Erbil, Karbala, Kirkuk, Missan, Muthanna, Najaf, Ninewa and Salah al-Din).

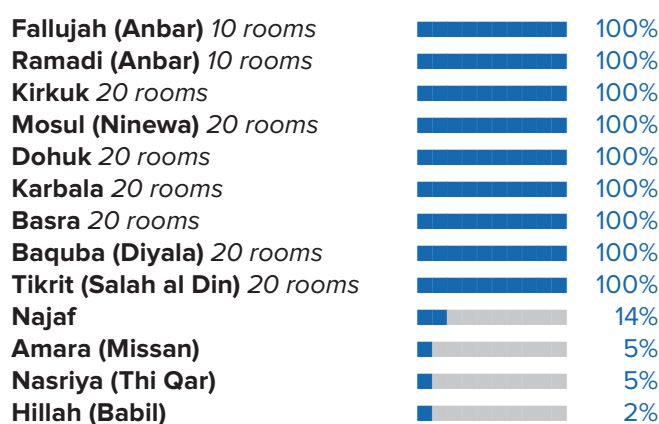
- 1.5.** 16 designated healthcare facilities supported with personal protective equipment (PPE)
- 1.6.** 16 designated healthcare facilities supported by UNDP to strengthen healthcare systems to respond to COVID-19
- 1.7.** 300 beds equipped to treat cases of COVID-19 across the target governorates
- 1.8.** 300 airborne infection isolation rooms (AIIRs) rehabilitated with UNDP support across the target governorates

Leveraging UNDP's procurement systems, the provision of PPE is progressing despite global supply and logistical challenges. A total of 8,160 N95 respirators have been delivered to eight governorates (Anbar, Basra, Diyala, Dohuk, Karbala, Najaf, Ninewa and Salah al-Din). An additional 9,792 N95 respirators are currently under customs clearance. 43,200 gowns have been procured through UNDP's Global Procurement Unit (GPU) and are in the process of being shipped. Further procurement processes are underway to secure additional PPE.

16 designated healthcare facilities in 15 targeted governorates are identified to receive support through UNDP; 13 facilities are in the process of receiving support. These facilities were identified by UNDP in coordination with the Ministry of Health and local authorities. They will receive support through the rehabilitation of facilities and the provision of medical equipment and furniture to make available the necessary airborne infection isolation rooms to strengthen the ability of Iraq's healthcare system to safely treat severe cases of COVID-19.

The healthcare facilities will be supplied with: (1) ventilators and humidifiers; (2) monitors, suckers and defibrillators; and (3) medical furniture and laboratory equipment. This equipment and furniture, which are currently under procurement, will make the wards fully operational. At the end of the reporting period, medical equipment had been delivered to the facilities in Anbar (Fallujah and Ramadi) and Dohuk.

A total of 160 airborne infection isolation rooms (AIIRs) have been rehabilitated by UNDP. The status of rehabilitation work is as follows:



In the interest of time, pending confirmation of funding, UNDP has initiated scoping and Bills of Quantity development work for Diwaniya (Al-Diwaniya Teaching Hospital), Erbil (Baharka Hospital) and Muthanna (Al-Hussain Teaching Hospital).

Output 2

Integrated crisis management and response is strengthened to enable the Government of Iraq to maintain core functions and manage its response

- 2.1.** Coordination meetings facilitated among the UN Country Team (UNCT) on the post-COVID-19 recovery response plan provided with UNDP technical support
- 2.2.** UNCT Iraq's multi-sectoral, Post-COVID-19 Recovery Strategy developed with UNDP technical support

The UN Country Team (UNCT) in Iraq continued to follow the coordination structure outlined in the *UN Framework for the Immediate Socio-economic Response to COVID-19* (April 2020), with the overall coordination structure led by the Resident Coordinator's Office (RCO), the humanitarian response coordinated by OCHA, the health response coordinated by WHO, and the socioeconomic response and recovery coordinated by UNDP.

During the reporting period, UNDP continued to provide technical advisory support through UNCT meetings, the Resident Coordinator's Office/Development Coordination Office (RCO/DCO), and the Programme Management Team (PMT). For increased efficiency, coordination meetings were aligned with the PMT and UNCT Priority Working Groups (PWG). The final draft of the SERP was submitted by mid-August 2020 to the Resident Coordinator, and in September to the DCO Regional Office for approval.

<p>2.3. At least 25,000 people reached through social cohesion activities</p>	<p>To support families who have been disproportionately affected by the COVID-19 pandemic due to the lack of access to services and difficulties earning an income, UNDP provided four Community-Based Organisations (CBOs) with low-value grants to distribute life-support packages and hygiene products, raise awareness on health and COVID-19 prevention guidelines and sterilize public spaces, including school exam centres, healthcare facilities and municipal buildings, in coordination with 18 Local Peace Committees (LPCs) in cities and towns in Anbar, Ninewa and Salah al-Din governorates. All CBOs have completed the distribution of packages to 6,000 families, awareness raising and sterilization of public spaces in their respective governorates reaching 64,181 people (30,365 women, 15,377 youth) and sterilizing 124 locations.</p>
<p>2.4. Local Peace Committees, Youth and Women's Groups, and Community Based Organizations supported to work collaboratively to respond to immediate community needs arising due to COVID-19</p>	<p>In preparation for the nationwide campaign on social cohesion and overcoming the consequences of the COVID-19 pandemic, UNDP is currently in the final stages of selecting a media production company. Following the selection of a production company, graphics, public service announcements and short videos will be produced and disseminated throughout Iraq. To complement the information shared by the campaign, continuous discussions will be held with UNDP's Accelerator Lab to ensure messaging is aligned and consistent.</p> <p>Finally, to support local youth and women's groups in their social cohesion efforts and to combat the stigma and negative stereotypes associated with COVID-19 in their communities, UNDP has selected a cumulative total of 16 initiatives proposed by youth groups and 10 initiatives proposed by women's groups to receive small grants to implement initiatives directly supported by a CBO. 11 initiatives proposed by youth groups (4 in Anbar, 2 in Diyala, 4 in Ninewa, and 1 in Salah al-Din) and 2 initiatives proposed by women's groups in Anbar have been implemented as of end September 2020. Selected initiatives include the sewing and distribution of masks, an awareness raising campaign focused on hygiene and health, and an art project to provide a space to express coexistence, peace, and love during difficult times.</p>

Output 3
The social and economic impacts of COVID-19 are assessed to enable the Government of Iraq to define short- and medium-term recovery strategies

<p>3.1. At least 6 socioeconomic needs and impact assessments completed</p>	<p>The SEIAs supported by UNDP focus on the following thematic issues which are identified as priorities in the context of Iraq, and findings continue to be released through a series of Policy Papers:</p>
<p>3.2. Impact assessment findings/report disseminated</p>	<ul style="list-style-type: none"> • Impact on fragility in Iraq (published 10 August 2020)⁵ • Impact on the macro-economic and fiscal space (published 6 October 2020)⁶ • Impact on social protection (ongoing, with ILO) • Impact on social cohesion (ongoing, with IOM)
<p>3.3. Post-COVID-19 recovery strategies identified to be supported by UNDP Iraq</p>	<ul style="list-style-type: none"> • Impact on household vulnerability (ongoing, with IOM and UN Habitat) • Impact on environmental sustainability (ongoing, with UNEP) <p>The team of technical experts to support the SEIAs, including a Senior Coordinator for the SEIAs, and experts on resilience building, macroeconomics, social protection and social cohesion remained in place. IMPACT/REACH Initiatives was contracted, and planning initiated for the household vulnerability impact assessment, which includes extensive field research covering all governorates in Iraq.</p>

LESSONS LEARNED

The Need for Agility

The need for agility remains critical to respond to emerging needs and to ensure the quality and timely completion of activities in the rapidly evolving operational context. UNDP has done so by using and adapting existing project management systems, operational processes and in-house human resources, including the safe mobilisation of technical capacities in the field to support the COVID-19 response.

Implementation and Monitoring

Implementation continues to be supported by FFS technical experts from the medical and engineering teams in the five liberated governorates. New engineering teams were recruited in Babil, Basra, Dhi Qar, Dohuk, Karbala, Missan, Najaf and Ninewa (Mosul) to implement activities in these governorates, under the supervision of FFS central engineering teams in Baghdad and Erbil. By the end of the reporting period, 39 engineers were supporting the implementation and monitoring of COVID-19 response in the 12 governorates. While having a field presence to support the response has been critical, UNDP has ensured that all field teams are provided with the required PPE.

Continued cooperation with community-based organisations, local peace committees, and youth and women's groups has been important for maintaining community engagement. These organisations and mechanisms have played a key role in reaching out to vulnerable people in their respective communities and providing them with information and support during this pandemic.

After the effective launch of the “Corona in Iraq” platform, the Accelerator Lab’s monitoring system was initiated to measure the use of the platform, and impact of the messaging. Data indicated a decreasing number of users, indicating that people were not actively seeking COVID-19-related content as much as they did when the site was launched during the lockdown period in April, when there was a demand for reliable information. The Lab has identified that this could also be due to information saturation and changes in lifestyle following the lockdown. Therefore, the Lab has identified through its Design Thinking Methodology the need to adapt the platform to the changed context, including by promoting more engagement and competition-based learning through the platform.

Procurement

The dedicated UNDP Iraq Service Centre was leveraged to provide the necessary operational backstopping for quick, efficient and transparent procurement processes to facilitate delivery. Using this dedicated procurement team has enabled a quick response, as well as the ability to rapidly address procurement-related challenges, as needed.

Gender Mainstreaming in UNDP's COVID-19 Response

Gender-sensitive approaches are incorporated into a range of activities, for example:

- 1. Socioeconomic needs and impact assessments (SEIAs):** The SEIAs will have a gender focus, understanding that women and girls have different experiences and face specific challenges when it comes to the impact of the global COVID-19 pandemic.
- 2. UNCT Iraq Socioeconomic Response Plan (SERP):** The SERP has mainstreamed gender considerations to reflect the different needs and challenges faced by women and girls in the current context.
- 3. Women’s engagement in social cohesion activities:** UNDP has received proposals for community initiatives to build social cohesion during the COVID-19 pandemic from women’s groups in Anbar, Diyala and Ninewa. UNDP has selected 10 initiatives for implementation, 2 of which have been implemented in Anbar.

LOOKING AHEAD

Risks and Challenges

Despite progress, the implementation of UNDP Iraq’s COVID-19 response is not without risks and challenges. Particularly within the rapidly evolving operational context, UNDP has been working to mitigate these risks, as far as is possible. An updated risk analysis is provided in Annex 1.

BOX 1. ADDITIONAL SUPPORT TO COVID-19 RESPONSE IN IRAQ

Recognising the far-reaching impact of COVID-19 on Iraq, UNDP has seized opportunities across its portfolio to provide additional support to pandemic response and recovery. The following initiatives, which are implemented by existing projects beyond UNDP's dedicated COVID-19 support project, are described here to present a comprehensive overview of related activities during the reporting period.



Security Sector: In collaboration with the Ministry of Interior, UNDP is supporting police officers in Iraq to continue their functions amidst the COVID-19 pandemic by providing personal protective equipment (PPE). This support was made possible following an agreement with the Government of Canada to repurpose US\$75,000 from the Security Sector Reform/Rule of Law programmes. Some 2,000 boxes of examination gloves, 1,750 boxes of medical masks and 2,000 bottles of alcohol-based hand sanitizer were provided to local police officers engaged in COVID-19 response activities in Baghdad, where the spread of the virus has been the highest in the country. A second batch of PPE is being procured to ensure appropriate mitigation measures for the resumption of specialised training for local police, which had been postponed due to the pandemic. Thanks to an agreement with the Government of the Netherlands to repurpose US\$60,450 from its contribution to the SSR/Rule of Law programme, efforts are underway to develop an e-learning system for additional police training courses. The platform will provide options for continuing training with minimal disruptions, should COVID-19 restrictions continue in the medium term.



Social Cohesion: Through the Integrated Reconciliation Project, 2,700 life-support packages — consisting of non-perishable food items and hygiene products — were distributed to households in Anbar and Salah al-Din. Additionally, UNDP has contracted a community reporter in Ninewa to produce two videos on social cohesion during the COVID-19 pandemic. The first video, which has been produced and widely shared, stresses the importance of maintaining strong, communal social connections during the pandemic.⁸



Livelihoods: UNDP resumed its livelihoods support programming in June 2020 through the Funding Facility for Stabilization (FFS), Iraq Crisis Response and Resilience Programme (ICRRP) and Headway Projects, providing critical support to boost economic activity in target locations in Iraq.



Awareness Raising: The “Let’s Beat Corona” awareness campaign⁹ was implemented from June to September 2020, following an agreement with the European Union to repurpose funding from the Supporting Recovery and Stability in Iraq through Local Development (US\$36,733) and Strengthening the Long-Term Resilience of Sub-National Authorities in Countries Affected by the Syrian and Iraqi Crises/“Headway” (US\$134,770) Programmes. The Headway Programme is financed by the EU Regional Trust Fund in Response to the Syrian Crisis (“Madad Fund”).

Working in close collaboration with government and NGO partners enabled access and community engagement. The campaign adopted a multi-pronged approach and several creative tools to maximise outreach, interest and engagement. Doing so also demonstrated that infotainment and the use of innovative, light content makes messaging appealing and relevant to the younger generation.

The campaign involved both offline and online components. The offline campaign distributed an estimated 70,000 awareness items in 5,389 neighbourhoods, hospitals and public places (e.g. shops, markets, pharmacies and checkpoints) in 10 governorates (Anbar, Basra, Dhi Qar, Dohuk, Erbil, Halabja, Missan, Ninewa, Salah al-Din and Sulaymaniyah).

The online campaign reached 31.7 million people, including 2.7 million through social media (26 percent women), involving 533 multimedia posts on social media platforms, including Facebook, Instagram, Twitter and YouTube. The campaign also featured 32 videos focused on COVID-19 symptoms and prevention measures, as well as an online concert featuring 16 famous Iraqi and Kurdish artists. Finally, an online trivia game focused on COVID-19 prevention, symptoms, myths, mental health and psychosocial support.

ANNEX 1. COVID-19 RESPONSE RISK ANALYSIS

Description of the Risk and Impact	Probability and Impact	Mitigation Measure	Responsibility
1 Risk of exposure of UNDP staff or UNDP's third-party staff to COVID-19 during implementation of activities, resulting in an increase in the case load.	P-2 I-5	<p>UNDP staff movements within Iraq will be guided by the safety and security rules and regulations of the Government of Iraq and UNDSS.</p> <p>UNDP staff and third-party contractors will be provided with PPE to enable engaging with implementation of activities.</p> <p>UNDP staff and third-party contractors will not enter isolation facilities.</p> <p>If rehabilitation work is undertaken in health facilities already treating COVID-19 patients, staff and third-party contractors will be provided with full PPE.</p> <p>UNDP Medical Officers working on the Project will closely monitor the accurate and full use of PPE by staff and third-party contractors.</p> <p>Contractors that undertake rehabilitation work will be required to ensure workers are provided with the required PPE. This requirement will be specified in the contract signed with UNDP.</p>	UNDP Resident Representative Head of Stabilization
2 Contractors/suppliers will not submit bids to Calls for Tender, resulting in the inability to implement identified activities in the target 12 governorates . ⁷	P-3 I-5	<p>UNDP's global procurement rules and support systems for COVID-19 response will be adopted.</p> <p>Additionally, in the event of no response from qualified contractors and/or suppliers, UNDP will, in keeping with its rules and regulations, rely on direct contracting within a specific target location.</p>	UNDP Deputy Resident Representative (Operations)
3 Continued lack of access between governorates will impede the timely delivery of equipment and supplies.	P-4 I-4	UNDP Iraq will secure the required approvals from the Government of Iraq to ensure safe passage for equipment and supplies to be provided through the Project.	UNDP Resident Representative Head of Stabilization UNDP Iraq Area Coordinators
4 Lack of staff in the medical facilities to be supported by UNDP to enable the continued provision of health services.	P-3 I-4	<p>UNDP Iraq will secure confirmation from the Government of Iraq of the continued priority placement of medical staff to the facilities that will be supported through the Project.</p> <p>UNDP will also coordinate with WHO and the Health Cluster with regard to the support it will provide, in order to help leverage any complementary support services provided by non-state service providers.</p> <p>The Project has also proposed to provide PPE for health sector staff in order to help safeguard them from exposure to the virus.</p>	UNDP Resident Representative Head of Stabilization UNDP Iraq Medical Officers

Description of the Risk and Impact	Probability and Impact	Mitigation Measure	Responsibility
5 For UNDP Iraq's "Corona in Iraq platform", there is a remaining risk that other online platforms will be launched which will address the same topics and use similar features, which might, in turn, affect the number of visits to the Platform.	P-3 I-4	<p>The Accelerator Lab is working to scale-up the platform, making the design more engaging in order to attract and reach men, women, boys and girls.</p> <p>The Lab is also working to ensure relevant and appealing content is shared by liaising with different partners, such as WHO, UNICEF, UN Women and UNFPA.</p>	<p>Deputy Resident Representative (Programme)</p> <p>Programme Specialist-Governance</p> <p>Accelerator Lab Team</p>
6 Delays in the delivery of medical equipment, furniture, materials and supplies to Iraq could take place due to limited availability of cargo space.	P-3 I-5	<p>This is a global challenge over which UNDP Iraq has little control. However, in order to mitigate against this risk, UNDP will arrange, if/when needed, for partial delivery of orders in order to take advantage of all available cargo space and accordingly secure delivery of items in smaller batches.</p> <p>UNDP will also identify local representatives of major manufacturers in order to try to resource the required medical equipment in a timely manner.</p> <p>UNDP may also, in keeping with its procurement rules and regulations, explore options for partial bidding on procurement advertisements, to facilitate procurement and delivery in smaller orders.</p>	<p>Deputy Resident Representative (Operations)</p> <p>Head of Service Centre</p>
7 Once medical equipment, furniture and PPE arrive in country, delays in delivering goods to the designated healthcare facilities and the end user could be experienced due to restrictions on movement between the governorates put in place by the GOI and KRG.	P-2 I-4	<p>UNDP is proactively working to obtain all needed facilitation and access letters from Governorates and the KRG Joint Crisis Coordination Centre (JCC) to allow movement between governorates by the suppliers to deliver the medical equipment and furniture.</p>	<p>UNDP Resident Representative</p> <p>Head of Stabilization</p> <p>UNDP Iraq Area Coordinators</p>
8 The increase in global demand for Personal Protective Equipment (PPE) for health sector staff could result in limited global supply and present challenges in procuring the required quantities.	P-2 I-4	<p>If UNDP faces challenges in procuring PPE, particularly with the necessary specifications (i.e. types of masks), due to limited global supply, UNDP will:</p> <ol style="list-style-type: none"> 1. In coordination and consultation with end users, reduce the originally identified quantities to be provided in the initial package for each designated healthcare facility. This will ensure that all healthcare facilities receive some supply of PPE and subsequent follow-up deliveries can be made once additional supply is secured. 2. Explore all available procurement options, seeking to procure PPE not only locally and regionally, but also through UNDP's Global Procurement Unit. 	<p>Deputy Resident Representative (Operations)</p> <p>Head of Service Centre</p>

Description of the Risk and Impact	Probability and Impact	Mitigation Measure	Responsibility
<p>9 In consultation with the Ministry of Health and Environment, UNDP aims to deliver the most critical medical equipment needed to provide high quality care for COVID-19 patients. Some of the medical equipment (e.g. ECMO) requires a high-degree of technical expertise and incurs some significant expense to operate and maintain.</p> <p>Due to its complex nature, there is a risk that targeted governorates may have limited technical capacity to utilise the ECMO and also limited financial capacity for the procurement of patient starter kits that are required to operationalize the system.</p>	<p>P-2 I-4</p>	<p>In order to mitigate these risks, UNDP has confirmed with the Public Health Directorate that each governorate has adequate capacity (<i>i.e.</i> technical human resource capacity, and financial capacity to maintain the supply of the Patient Starter Kits needed to use the machine) to run two ECMO machines. Accordingly, UNDP has decreased the number of ECMO systems that will be provided to each governorate from the originally proposed five to two machines.</p> <p>In order to ensure each governorate has the needed technical capacity, UNDP requires that the supplier provide orientation to each facility receiving the ECMO. Moreover, the Ministry of Health's ICU Committee has agreed to provide a detailed training on the operation and maintenance of the ECMO for medical staff who will be responsible for operating them, once the equipment is delivered and installed.</p>	<p>Head of Stabilization Project Managers Medical Officers</p>
<p>10 Risk of sexual exploitation and abuse (SEA) of staff, partners and beneficiaries/community members</p>	<p>P-3 I-4</p>	<p>UNDP will continue to maintain a zero-tolerance policy for SEA and will continue to further strengthen its accountability mechanisms to mitigate SEA-related issues within the office and project teams through enhanced sensitisation and awareness-raising about SEA and mechanisms in place to report cases.</p> <p>Staff and partners will also be sensitised on SEA and trained on how to prevent SEA.</p>	<p>UNDP Resident Representative Head of Stabilization Project Managers Gender Specialist</p>



Below: Sajjad Abdul-Rasoul, 24, is working at Al-Hussein Hospital, where the construction of 20 COVID-19 isolation rooms was completed during the reporting period. Photo: UNDP Iraq

FINANCIAL UPDATE (in US\$)

Corresponding to the additional needs identified to support three more governorates through a second phase of support, the Project budget was updated in July 2020. Overall, UNDP Iraq has mobilised US\$27.17 million for its COVID-19 response¹⁰ with funds received both as new contributions and through the donor-approved re-purposing of funds previously provided to the Funding Facility for Stabilization (FFS). Funding was also provided by UNDP's Rapid Response Facility (RRF) and UNDP Iraq.

Category	Budget (A)	Funds Allocated (B)	Fund Utilisation (C)	Budget Balance (A-B)
Output 1	36,861,677	20,535,356	9,038,694	16,326,321
Output 2	720,000	640,000	-	80,000
Output 3	1,000,000	800,000	355,363	200,000
Sub-Total Activity Costs	38,581,677	21,975,356	9,364,058	16,606,321
Project Management & Direct Costs	2,413,167	732,778	75,686	1,680,389
GMS (8%)	3,279,588	1,808,650	752,779	1,470,569
Grand Total	44,274,432	24,516,784	10,222,522	19,757,279

CONTRIBUTIONS RECEIVED (as of 30 September)

Source	Contribution	Received (in US\$)
Belgium	Re-purposed	US\$ 1,000,000
Canada	Re-purposed	CAD 2,500,000
Denmark	New Contribution	DKK 6,000,000
Finland	New Contribution	EUR 2,000,000
France	New Contribution	EUR 300,000
Japan ¹¹	New Contribution	US\$ 2,149,714
The Netherlands	Re-purposed	US\$ 2,000,000
Sweden	Re-purposed	US\$ 2,000,000
United Kingdom	New Contribution	GBP 2,000,000
United States of America	Re-purposed	US\$ 10,026,101
Royal Dutch Shell PLC	Re-purposed	US\$ 196,201
UNDP Rapid Response Facility	New Contribution	US\$ 856,000
UNDP Iraq	New Contribution	US\$ 1,000,000
Grand Total		27,172,826

NOTES

1 <https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/beyond-recovery--towards-2030.html>

2 <https://www.who.int/publications/i/item/strategic-preparedness-and-response-plan-for-the-new-coronavirus>

3 <https://stayhome.iq/>

4 WHO Iraq COVID-19 Dynamic Infographic Dashboard: <https://bit.ly/3eQQ86Q>

5 <https://www.iq.undp.org/content/iraq/en/home/library/impact-of-the-oil-crisis-and-covid-19-on-iraq-s-fragility.html>

6 <https://www.iq.undp.org/content/iraq/en/home/library/Stabilization/impact-of-covid-19-on-the-iraqi-economy.html>

7 Anbar, Basra, Diyala, Dohuk, Karbala, Najaf, Ninewa, Salah al-Din, Kirkuk, Babil, Missan and Dhi Qar.

8 Accessible at <https://www.facebook.com/watch/?v=221728485739690>

9 Accessible at https://www.undp.org/content/undp/en/home/stories/eu-funded-_let_s-beat-corona-campaign-raises-awareness-in-iraq.html

10 Based on signed agreements.

11 Excluding contribution for UNDP's Global Policy Network.



United Nations Development Programme
Baghdad, Iraq
www.iq.undp.org