

Final Report

Iraq: Tayaran Square Explosions

DREF operation	Operation n° MDRIQ011
Date of Issue: 29 April 2022	Glide number: OT-2021-000010-IRQ
Operation start date: 5 February 2021	Operation end date: 31 August 2021
Operating National Society: Iraqi Red Crescent Society	Operation budget: CHF 114,714
Number of people affected: 1,452 (242 families)	Number of people assisted: 1,478 (256 families)
Red Cross Red Crescent Movement partners actively involved in the operation: The International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: Local government authorities, health department, and local police department.	

The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden, and Switzerland, as well as DG ECHO and Blizzard Entertainment, Mondelez International Foundation, and Fortive Corporation and other corporate and private donors.

The IFRC, on behalf of the Iraqi Red Crescent Society, would like to extend thanks to all for their generous contributions.

A. SITUATION ANALYSIS

Description of the disaster

Suicide bombings have become relatively rare in the capital of Iraq after years of deadly sectarian violence. On Thursday 21 January 2021, two suicide bombers detonated their explosives on a bustling commercial street in the heart of Baghdad Al Tayaran Square, Bab al-Shaqi neighborhood. The first suicide bomber stormed into the market, claiming to be ill, so that people would gather around him, and then detonated his explosives. After the first explosion, people began tending to the victims and injured. According to the ministry's statement, a second attacker then struck and detonated his device. At least 32 people have been killed and 110 injured as a result of these attacks. The Directorate of Terror's Victims and the Directorate of Health in Baghdad confirmed the deaths and injuries. The Iraqi government's emergency personnel arrived on the scene to assist the victims. The injured were transferred to Al-Kindi Hospital, Sheikh Zayed Hospital, and the Neurological Wholesale Hospital.



Figure 1: IRSC volunteers visits to the affected families (Photo: IRCS)

More than a hundred people were affected indirectly as a result of the disruption in their livelihood. These were daily workers, shoppers, and traders. This was Baghdad's biggest suicide attack in the last three years.

Summary of current response

Overview of Host National Society

The IRCS went into action immediately after the explosions to provide life-saving care and deployed its Emergency Medical Teams. IRCS set up triage and first aid stations to ensure that people with non-critical injuries can be treated and comforted, while the Ministry of Health and Civil Defence ambulances transported the most severely injured survivors to hospitals. The IRCS has deployed Emergency Medical Teams and a fleet of seven ambulances to the site of the explosion, where nine staff and seven trained volunteers were engaged in response activities, to provide any potential support to the Ministry of Health in transferring the injured and providing first aid at triage stations. The government authorities immediately transported the affected people to hospitals and the First Aid support was provided at the Al-Kindi Hospital, the Sheikh Zayed Hospital, and the Neurological Wholesale Hospital. The IRCS National Headquarters mobilized its local branches, staff, and volunteers, to reach out to affected families based on a list provided by relevant government authorities in various governorates. The Directorate of Terror's Victims and the Directorate of Health in Baghdad were established, and information on affected people was gathered.

Overview of Red Cross Red Crescent Movement in-country

IRCS has a longstanding working collaboration with the IFRC and other Movement partners in implementing various programmes. The IRCS National Headquarters was collaborating with the IFRC delegation in Baghdad and provided weekly updates on the DREF operation. DREF operation has been launched after coordination and consultation with Movement partners in the country. The ICRC, German, Norwegian, Danish, Turkish, Qatar, and Swedish Red Cross Red Crescent National Societies are among the Movement partners in Iraq. Following the explosions, the IFRC delegation in Iraq collaborated with the IRCS leadership and technical departments as well as the IFRC MENA regional delegation, to share information about operation activities, and to provide technical support to the National Society in developing the DREF operation. The ICRC supported the IRCS as its primary partner in its development and operations, with a focus on the "Safer Access" approach which promotes safer access to people affected by conflict and other situations of violence, whilst minimizing risks for staff and volunteers.

Overview of non-RCRC actors in-country

Local authorities dispatched police, army, and rescue teams to the scene. The Ministry of Health and Civil Defense supported with evacuation and transport to hospitals. According to the IRCS team's initial observations and assessment, no such support has been extended by any government authority to the victims' families.

Needs analysis and scenario planning

Needs analysis

Following the Tayaran Square attack in central Baghdad, IRCS carried out a rapid assessment to identify the needs of affected families. Following the incident, the IRCS mobilized its staff and volunteers for response and started collaboration with the relevant government authorities to collect validated information about the victims. The operation activities were spread over the six governorates because of the shifting of dead bodies and injured persons to their hometowns. The directorates provided a complete list of affected people to the IRCS representatives. The victims are from six governorates of origin (Dohuk, Muthana, Diyala, Basra, Wassit & Sulaymaniyah). The IRCS Headquarters mobilized its branch staff and volunteers to respective governorates to conduct visits and verify information on affected families, including the verification of deceased families, wounded persons, and those who have had their livelihoods directly disrupted. It was identified that there is a need to provide psychological support and first aid to those directly affected by the incident, particularly survivors, witnesses, and families who have lost family members. IRCS teams visited governorates cities to support affected families with cash assistance and to organize psychosocial support (PSS) activities. During an initial assessment organized by the IRCS, up to 32 families have lost their family members, 110 people were found injured and around 100 families' livelihoods have been disrupted to varying degrees. Some will not be able to go to work due

to injuries, while others have lost their physical ability to work. The IRCS has mobilized trained volunteers and staff to provide psychosocial support to the injured and families who have lost loved ones through psychosocial support and first aid services for the injured through home visits. These families are facing financial difficulties and have requested cash, food, and healthcare assistance. Those families have now lost their only source of daily income.

Exposure to violence, the loss of many lives, constant stress, and a lack of stability are all threatening the mental health of large segments of the population, particularly women and children, as a result of the complex humanitarian situation. As a combination of degraded basic services, loss of livelihoods, and rampant inflation, people have become more vulnerable. While the situation remains inconsistent across the country, the affected population is also confronted with escalating violence and protection crises, all of which contribute to a downward spiraling emergency. The Iraqi government restricted movement and declared a curfew in governorates due to the COVID-19 pandemic, which was exacerbated by the deteriorating security situation in the country. Later, the Iraqi government relaxed the curfew and lifted the lockdown restrictions within the country – inter and intra governorates movement is strictly adhered to Standard Operating Procedures since mid-May 2021.

Operation Risk Assessment

Due to the nature of the operating environment, the IRCS applied all necessary measures to ensure the safety and security of staff and volunteers engaged in the operation, which was prioritized. The IRCS continued to monitor the security situation and liaised closely with the security institutions to reduce the risk in the field. Given the extreme violence situation, IRCS needed to implement firm security measures to avoid any circumstances for access to the affected people. In response to the recent violence, the IRCS has continued to apply operational safety and security measures during its operations to ensure that it maintains access to the affected population, as much as possible, without undue risk to its personnel. IRCS worked closely with local authorities to jointly find the best approach to ensure humanitarian assistance is delivered safely to affected populations.

B. OPERATIONAL STRATEGY

Overall operational objective:

This operation aimed to assist at least 32 families of the deceased, 110 families of the injured, and 100 families who were indirectly affected by the explosions through disruptions in their livelihoods and means of income. The operation was supposed to be implemented over a four-month period with a primary focus on cash assistance and psychosocial support interventions. The initial timeframe for this operation was four months, later it has been extended for another two months with an end date of 31 August 2021.

Proposed strategy

The proposed strategy remained unchanged. The IRCS response aimed to improve the overall well-being of the affected families through comprehensive mental health and psychosocial support (MHPSS) and cash voucher assistance (CVA) activities. Under the MHPSS umbrella, the IRCS approach included livelihoods, disability support, and social cohesion, all of which were deemed vital components for enhancing the resilience of the target families.

Cash interventions for the response:

The unconditional/multipurpose cash assistance was provided to the targeted families as per the following:

- Each of the 32 families of the deceased received a one-time payment of 500 USD. With the loss of a breadwinner, each family in this category was supported for at least three months.
- 110 families of the injured received a one-time payment of 300 USD. Each family in this category received assistance for basic needs and healthcare for two months before their injuries were fully recovered and they could resume earning an income.
- 100 families who were indirectly affected by the explosion and whose livelihoods were disrupted received a one-time payment of 100 USD.

IRCS deployed people from its CVA-trained pool to the branches to assist in the implementation of the cash interventions. Furthermore, cash distribution for this operation was done directly under the supervision of the

IRCS head of disaster management and CVA focal points. Throughout the intervention period, IRCS continued to provide psychosocial support and medical follow-up on the wounded through targeted home visits, including first-aid treatments and post-distribution monitoring.

The IRCS was in charge of the overall coordination and implementation of the IFRC-supported humanitarian response operation. Given the nature and scope of the response, the IFRC mobilized resources on behalf of IRCS through the DREF operation. During the response, a strong coordination mechanism with government authorities was established, and an assessment was carried out by trained IRCS staff and volunteers in six governorates to identify affected families. In addition, a satisfaction survey and a post-distribution survey were conducted to gather feedback from those who were supported. At the conclusion of the DREF operation, a lesson learned workshop was held to identify successes, challenges, and recommendations for future programming.

C. DETAILED OPERATIONAL PLAN



Livelihoods and basic needs

People reached: 1,478

Male: 680

Female: 798

Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Indicators:	Target	Actual
# of families targeted/reached with adequate cash assistance	242	256

Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs

Indicators:	Target	Actual
# of families of deceased receiving unconditional/multipurpose cash assistance	32	32
# of wounded families receiving unconditional/multipurpose cash assistance	110	110
# of indirect affected families receiving unconditional/multipurpose cash assistance	100	114

Narrative description of achievements

The provision of cash assistance to the affected people is the most important aspect of the operation, with three different types of cash assistance in place. In consultation with the local branch, the IRCS management established a cash working committee to assist with the implementation process, with the goal of verifying data received from the Directorate of Terror's Victims and the Directorate of Health in Baghdad.

In consultation with the branches, the cash team developed cash programme implementation guidelines, selection criteria, and data collection formats (beneficiary detail information) to assist the implementation process. These were distributed to the branches and staff to ensure that the planned activities were carried out effectively. Furthermore, the IRCS has deployed two CVA-trained personnel to the branches to assist with the cash assistance activities.

Unconditional cash assistance:

The overall target was to reach 242 families with cash assistance. However, the IRCS increased the target to 256 families for this operation within the same budget allocation due to minor changes in the plan for those families who lost their livelihoods. Unconditional cash assistance was provided to the affected families as outlined below:

- 32 families of the deceased received a one-time payment of 500 USD. With the loss of a breadwinner, each family in this category was supported for at least three months.
- 110 families of the injured received a one-time payment of 300 USD. Each family in this category received assistance for basic needs and healthcare for two months before their injuries were fully recovered and they could resume earning an income.
- 100 families who were indirectly affected by the explosion and whose livelihoods were disrupted received a one-time payment of 100 USD.

This assistance enabled families to meet their basic needs, such as funeral expenses, medicine, and other personal necessities that aid in the grieving process. Selected households for the cash assistance were those who have lost family member(s) and households with injured member(s) during the Al Tayaran attacks.



Figure 2: IRCS team supporting affected families with cash assistance (Photo: IRCS)

The IRCS designated a CVA focal person to train the local branches on the cash disbursement process and to assist with operation activities. Cash was distributed directly to the individuals while the National Society branches maintained the records for each household.

Under this operation, unconditional cash assistance has been distributed to 256 families affected by the explosions in Tayaran Square in central Baghdad for basic needs, including the restoration of their livelihoods.

Challenges

- Due to the curfew situation in central Baghdad, which was extended due to the increase in COVID-19 cases, road blockage by government authorities, and demonstrations, IRCS teams were having difficulty reaching affected families.
- Due to the number of COVID-19 cases identified and tested positive in the staff, IRCS was working with a limited team of less than 50 percent of the essential staff.
- Following the incident, the majority of the families relocated to their hometowns with their deceased and injured family members. It was initially difficult to locate those families; however, after enlisting the help of local branch staff and volunteers in various governorates, the National Society was able to locate the affected families.

Lessons Learned

During the lessons learned workshop, which was held towards the end of the DREF operation, a number of lessons learned were captured, some of which were related to the CVA component under the livelihoods and basic needs area of focus, as listed below:

- Locally trained volunteers played an important role in the community in such circumstances. It is recommended that IRCS staff and volunteers receive comprehensive training on a wide range of topics for higher efficiency, including psychosocial support, safer access, cash transfers, and contingency planning.
- Future DREFs should consider budgeting for logistics, to allow for renting vehicles, and purchasing pre-paid cards for the volunteers' mobile to ensure proper communication flow, which could affect the timeliness and smoothness of the intervention.
- In similar contexts, to consider applying the Safer Access approach to emergency preparedness and development.



Health

People reached: 1,478

Male: 680

Female: 798

Outcome 1: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment

Indicators:	Target	Actual
# of people reached with first aid services to reduce the health risks	80	110

Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.

Indicators:	Target	Actual
# of affected people receiving first aid	80	110

Following the incident in Baghdad's central city Al-Tayaran Square, the injured were suffering from the shock of the explosions and were required to return home to receive basic medical care. The people affected were not all from the same city. Following the explosions, the dead and injured were relocated to their respective governorates' hometowns. As a result, the IRCS local branch staff and volunteers were mobilized to track down the affected people and individuals in order to begin with the standard post-disaster First Aid and PSS activities, which were more household focused.



Figure 3: IRCS volunteers visit to in injured persons for first aid/dressing and verification (Photo: IRCS)

To reduce the impact of trauma, the IRCS local branch teams carried out 110 home visits, and first aiders provided first aid services as well as psychological support to the families of the deceased and the injured. During the home visits, 110 wounded people received first aid services and wound dressing changes, as well as those who required home follow-up.

Outcome 6: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people reached with psychosocial support	1,452	1,478

Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators:	Target	Actual
# of people reached through PSS activities	1,452	1,478

Branches staff have been deployed in six governorates to support the first aid and psychosocial support (PSS) interventions. An initial orientation has been conducted at headquarters and branch levels with the participation of 36 staff and volunteers from the headquarters and the governorates branches.

The psychosocial component of the operation included interventions representing first aid, mental health, and psychosocial support to the affected families. The affected people were not located in the same area where the incident took place in central Baghdad. The majority of those impacted were from various governorates. Based on a list provided by the Directorate of Terror's Victims and the Directorate of Health in Baghdad, the majority of the people belonged to other parts of the country. The main challenge was reaching out to those families and verifying the affected individuals across six governorates. Therefore, the volunteers and staff spent additional time to reach out each family and individual and start the post-disaster intervention for PSS activity.



Figure 3: IRCS staff and volunteers are organising PSS sessions with affected families at governorates level (Photo: IRCS)

PSS and FA training for volunteers

The IRCS headquarters team organized three trainings for six governorates branch staff to improve their skills in providing mental health and psychosocial support services, as well as first aid to affected families. These trained volunteers were given the tools they needed to visit families who had been directly or indirectly affected by the attacks.

Challenges

Despite the fact that IRCS provided operation orientation, it took several weeks for the branches and volunteers to organize activities with affected families due to the numerous unforeseen incidents and COVID-19 restrictions in the country.

Lessons Learned

- Orientations must be conducted at the outset with the participation of all parties involved in the operation from the branches, including the head of branches, staff, and volunteers, to ensure that everyone understands the scope of the operation.
- To improve the impact at the field level, volunteers could have been better mobilized and appropriately trained in First Aid and PSS activities.

Strengthen National Society

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Indicators:	Target	Actual
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# of IRCS branches that are well functioning (for the operation)	1	6
S1.1.4: National Societies have effective and motivated volunteers who are protected		
Indicators:		Target
# of insured volunteers	100	100
Narrative description of achievements		
<p>The operation activities were carried out in six governorates where IRCS has a strong branch presence. The IRCS's strength was its strong branch network and trained/skilled volunteer base. During an emergency, they are at the forefront of providing assistance to the most vulnerable. These trained volunteers are deployed within the first few hours to assist vulnerable people, particularly in hospitals, by providing restoring family links (RFL) and first aid (FA) services. A large number of staff and volunteers have been trained in disaster response, with a focus on health, PSS, and hygiene promotion. These members have received extensive training in life-saving techniques and are available to assist rescue operations in times of need. This operation was carried out by IRCS through its Baghdad branch, with assistance from the national headquarters and national/branch response teams (N/BRT) from six additional governorate branches. They were directly supporting the DREF operation activities with 100 insured volunteers. Furthermore, the implementation was supported by both the IRCS headquarters and the IFRC delegation in Iraq.</p>		
Challenges		
<p>The main challenge for the branches is to maintain continuous volunteer support for the operation. Throughout the operation, volunteers must visit the same households as specified.</p>		
Lessons Learned		
<ul style="list-style-type: none"> Improved volunteer management mechanisms must be identified, as well as a multi-skilled volunteer base must be strengthened. Furthermore, it was noted that having multi-skilled volunteers who could be deployed for any operation is an added benefit. 		

International Disaster Response		
S2.1: Effective and coordinated international disaster response is ensured		
Indicators:		Target
IFRC support to launch a DREF to raise financial and human resources	Yes	Yes
Coordination tools and mechanisms are in use for the operation - RDRT	Yes	-
% ratio of people reached by the IFRC disaster response operations to the people affected by these emergencies	100%	100%
S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained		
Indicators:		Target
# of surge deployments in support of the operation	1	-
Narrative description of achievements		
<p>The IFRC delegation in Iraq provided support to IRCS for this operation. The DRM Delegate provided technical support and backstopping for financial processes, implementation of cash voucher assistance (CVA) interventions, and PSS activities with IRCS technical teams, with the support of the MENA regional team in regular coordination with the National Society.</p> <p>Regular meetings were organized with the National Society to discuss progress and challenges faced by the IRCS during the implementation of the planned activities. Appropriate mitigation actions were identified and implemented to address any challenges as best as possible.</p>		
Challenges		
<p>Given the unique nature of this operation, launching the program, coordinating it, and approaching government officials and affected families proved to be extremely challenging.</p>		
Lessons Learned		
<p>Prepare pre-disaster plans/multi-hazard contingency plan for different types of disaster.</p>		

Influence others as leading strategic partner

Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.

Indicators:	Target	Actual
IFRC and NS are visible, trusted and effective advocates on humanitarian issues	Yes	Yes

Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

Indicators:	Target	Actual
# of lessons learned workshop conducted	1	1

Narrative description of achievements

With their presence in all governorates and assistance to vulnerable people, the IRCS has a strong acceptance in the local communities. The mandate of the IRCS is to ensure a wider provision of emergency mental health and psychosocial care to individuals and affected families, which is needed in the country.

Communications materials produced (social media)

IRCS posted regular updates on social media, including Facebook. Furthermore, the IRCS website was updated accordingly to share updates on the operation.

Deployment of assessment teams at the branches level

Since the attack, the IRCS has deployed a team for first aid response and activated its Baghdad branch to conduct rapid assessments and information gathering with the relevant departments. The IRCS has gathered first-hand information and has dispatched a team to conduct additional verification with affected families in various governorates. From the time of the explosions, rapid and detailed assessment teams were deployed at the branch level. The IRCS has fully engaged and activated all six of its governorates' branches to conduct assessments. The assessment data for the implementation of operation activities was consolidated by IRCS.

Post distribution survey (Satisfaction survey)

A post-distribution survey was conducted to determine the level of satisfaction among those who received cash assistance. Six surveys were carried out in each of the six branches. The survey included 63 people from the 256 families who received unconditional cash assistance.

Lesson learned workshop

A lessons learned workshop was held to identify the operation's learnings. The workshop was attended by the heads of the branches and staff, volunteers, IRCS NHQ staff, and IFRC staff. The final findings are documented for future reference and use.

Challenges

Conducting the initial assessment was challenging because many people were in hospitals or in critical condition. Furthermore, relatives or families were unable to provide any information.

Lessons Learned

The National Society should consider improving the soft skills of volunteers as well as PSS knowledge and first aid, which have been found to be extremely useful in similar contexts. In addition, coordination with authorities at all levels was deemed extremely successful. Learning about how relationships with the local government authorities were built and sustained over time, in particular, should be well captured for future replication.

D. Financial Report

Please see the below final financial report.

There is a budget variance with a remaining balance of **CHF 19,966** that will be returned to the International Federation's DREF fund. The unspent balance was due to the country's deteriorating security situation and the complex situation, particularly curfews and movement restrictions due to the COVID-19 pandemic, which hampered the implementation of the planned operation activities.

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/2-2022/3	Operation	MDRIQ011
Budget Timeframe	2021/2-2022/3	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 29/Apr/2022
All figures are in Swiss Francs (CHF)

MDRIQ011 - Iraq - Tayaran Square Explosions

Operating Timeframe: 04 Feb 2021 to 31 Aug 2021

I. Summary

Opening Balance	0
Funds & Other Income	114,714
DREF Allocations	114,714
Expenditure	-94,748
Closing Balance	19,966

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	57,786	49,955	7,831
PO04 - Health	42,155	43,759	-1,604
PO05 - Water, Sanitation & Hygiene			0
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability			0
PO11 - Environmental Sustainability			0
Planned Operations Total	99,941	93,714	6,227
EA01 - Coordination and Partnerships	947	820	127
EA02 - Secretariat Services	13,826	214	13,612
EA03 - National Society Strengthening			0
Enabling Approaches Total	14,773	1,034	13,739
Grand Total	114,714	94,748	19,966

III. Expenditure by budget category & group

	Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies		85,391	41,590	43,802
	Medical & First Aid	32,911		32,911
	Cash Disbursement	52,480	41,590	10,890
Workshops & Training		7,561	41,858	-34,297
	Workshops & Training	7,561	41,858	-34,297
General Expenditure		14,761	5,518	9,243
	Travel	6,226		6,226
	Office Costs	6,756		6,756
	Communications		201	-201
	Financial Charges	1,779	-519	2,298
	Other General Expenses		5,835	-5,835
Indirect Costs		7,001	5,783	1,219
	Programme & Services Support Recover	7,001	5,783	1,219
	Grand Total	114,714	94,748	19,966



+CIFRC

29 January 2021
MDRIQ011
OT-2021-000010-IRQ

Iraq - Tayaran Square Explosions Disaster Relief Emergency Funds



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.

0 0.0007 0.0014 0.0021 0.0028 km



Reference documents



Click here for:

- [Previous Appeals and updates](#)
- [Emergency Plan of Action \(EPoA\)](#)

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For In-Kind donations and Mobilization table support

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For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.