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Final Report

Iraq: Hospital Fire Incident

 International Federation
of Red Cross and Red Crescent Societies

DREF	Operation n° MDRIQ012
Date of Issue: 26 September 2022	Glide number: FR-2021-000088-IRQ
Operation start date: 25 July 2021	Operation end date: 30 November 2021
Operating National Society: Iraqi Red Crescent Society (IRCS)	Operation budget: CHF 120,022
Number of people affected: 1,212 (202 families)	Number of people assisted: 696 (116 families)
Red Cross Red Crescent Movement partners actively involved in the operation: The International Federation of Red Cross and Red Crescent Societies (IFRC)	
Other partner organizations actively involved in the operation: Ministry of Health, Local Government, Health Department, and the Local Police Department at Dhi Qar Governorate.	

The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, Germany, 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.

[<click here for the final financial report and here for contacts>](#)

A. SITUATION ANALYSIS

Description of the disaster

On 13 July 2021, a fire broke out in the coronavirus ward of the al-Hussein Teaching Hospital located in the southern city of Nasiriyah, southern Iraq. According to health officials, the incident killed 92 people and injured 110 more. Two healthcare workers were among those who lost their lives. Patients were trapped inside, with rescue teams struggling to reach them in time. This is the second hospital fire in Iraq within a three-month period. In April of that year, a fire at a hospital in Baghdad killed 82 people and injured 110 others. The blaze at Al-Hussein hospital in the southern city of Nasiriyah is believed to have been ignited when an oxygen tank exploded, according to police reports.

In the aftermath of the incident, the destruction continued outside the hospital as angry relatives clashed with authorities and set two police vehicles on fire. Prime Minister Mustafa al-Kadhimi ordered the suspension and arrest of health and civil defense managers in Nasiriyah and the manager of the hospital, according to a statement issued from his office.

Already ruined by decades of war, sanctions, mismanagement, and corruption, the pandemic has further crippled Iraq's healthcare system with acute shortages of staff and medical equipment. COVID-19 has killed nearly 25,300 people and infected more than 2.4 million in the country, according to Johns Hopkins University¹.

Summary of response

Overview of Operating National Society

The IRCS immediately went into action to provide life-saving care after the fire and deployed its Emergency Medical Teams. IRCS has mobilized its headquarters and branch-level teams and has collaborated with the hospital management and the relevant government authorities and collected the necessary information from the victims' family members. The teams have evacuated more than 20 wounded patients, who were shifted to safe spaces in ambulances directly after the fire broke out. IRCS teams have managed to treat several cases and provided them with first aid before transferring them to other hospitals. After identification, more than twenty-one charred bodies were transferred from the hospital to their homes. IRCS distributed available medicines and supported 74 families of deceased patients with cash assistance amounting to 636.21 Swiss Francs per family, noting that the affected families did not receive any compensation from government authorities.

Overview of Red Cross Red Crescent (RCRC) Movement in-country

IRCS has a longstanding working collaboration with the IFRC and other Movement partners in implementing various programmes. IRCS National Headquarters (NHQ) were collaborating with the IFRC Iraq delegation in Baghdad and has provided weekly updates on the DREF operation's activities. Coordination and consultation with Movement partners in the country have been made during the launching of the DREF operation. The Movement partners present in Iraq include ICRC, German, Norwegian, Danish, Turkish, Qatar, and Swedish Red Cross / Red Crescent national societies. The ICRC supported IRCS as its primary partner in its development and operations, with a focus on the "Safer Access" approach that promotes safer access to persons affected by conflict and other situations of violence, whilst minimizing risks for staff and volunteers.

Overview of non-RCRC actors in-country

Local authorities of the Thi Qar governorates dispatched police forces to further investigate the incident. The Ministry of Health and the Department of Health and Civil Defense supported the evacuation and transferred the victims to other hospitals. According to the IRCS team's initial observation and information received from relevant authorities, no support has been extended by any government authority to the victims' families.

Needs analysis and scenario planning

After responding to the fire incident at Al Hussein Hospital in Al Nasiriyah, the focus shifted from saving lives to helping people who were affected by the fire. IRCS teams organized the visits to affected families to better understand the current situation and their needs. According to the families, the majority of the affected members, whether through serious injury or death, were the daily labourer and the only source of income for their families. In other terms, some families lost their sole breadwinner and were suddenly without a source of income, which has led to the possibility of not having sufficient financial resources to resume a normal life. Discussions with families have unveiled that the households' priorities were food, water, healthcare, and debt, among others. Besides, more than 100 people were injured from the incident, each having families affected by different degrees of disruption in their livelihoods: some of them were not able to go to work due to their injuries, while others completely lost their physical ability to work. Under the DREF operation, IRCS aimed to reduce the initial distress caused by traumatic events and to foster short- and long-term adaptive functioning and coping.

Risk Analysis

Due to the nature of the operating environment and the extremely violent situation, and despite having widespread acceptance across Iraqi territory, the IRCS applied all the necessary heightened security measures to ensure and prioritize the safety and security of staff and volunteers engaged in this operation. IRCS continuously monitored the security situation of the country and liaised closely with the security institutions to reduce the risk in the field, in an attempt to avoid any barriers that may impede access to the affected people as well as avoid any undue risk to its

¹ John Hopkins University. (2022). Coronavirus Resource Center. Retrieved from <https://coronavirus.jhu.edu/region/iraq>

personnel. Lately, more than ever, IRCS has been jointly working with local authorities to find the best approach that ensures the safe delivery of humanitarian assistance to the affected populations.

B. OPERATIONAL STRATEGY

This operation assisted 60 families of deceased, 56 families of wounded, and families indirectly affected by the explosions through disruption of their livelihoods and means of income. In addition, PSS services were provided to the witnesses of the traumatic event. The operation was implemented within a four-month period with a primary focus on cash assistance and psychosocial support interventions.

Proposed strategy

The IRCS response aimed at enhancing the overall well-being of the affected families through comprehensive Mental Health and Psychosocial Support (MHPSS) and Cash and Voucher Assistance (CVA) activities to support the affected families. IRCS approach included livelihoods, disability support, and social cohesion. These were vital components for enhancing the resilience of the targeted families.

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

- 60 families of the deceased received a one-off grant of 1,000,000 IQD (equivalent to 636.21 CHF). With the loss of their breadwinner, each family in this category was also supported with medicines and other essential needs.
- 56 families of the wounded received a one-off grant of 852,000 IQD (equivalent to 542.05 CHF). Each family in this category was also assisted for basic needs and healthcare for two months before their injuries fully recovered and before resuming their income generation.

IRCS deployed people from its CVA-trained pool to the branches to assist in the implementation of the cash interventions. Furthermore, for this operation, cash distribution was done directly with the supervision of IRCS' Head of Disaster Management and CVA focal points. Throughout the intervention timeframe, IRCS provided psychosocial support and medical follow-up for the wounded, including first-aid treatments, through targeted home visits. Post-Distribution Monitoring (PDM) was also conducted following the cash assistance, to ensure that the aid was distributed in a timely and accurate manner. However, due to the sensitive nature of the incident and pre-existing societal norms, further information could not be collected from the affected families, especially given the disparity between the assistance given and the loss incurred by the individuals.

During the response, a strong coordination mechanism was developed with the government authorities and an assessment was conducted by trained IRCS staff and volunteers to identify the affected families in the Thi Qar governorate. Furthermore, a lessons learned workshop was conducted towards the end of the DREF operation to identify the achievements, challenges, and recommendations for future programming. IRCS was responsible for the overall coordination and implementation of the humanitarian response operation, supported by the IFRC. Considering the nature and scope of the response, IFRC mobilized resources via the DREF operation on behalf of IRCS.

C. DETAILED OPERATIONAL PLAN

	<h3 style="color: red;">Shelter</h3> <p>People reached: 500 Male: 254 Female: 246</p>		
Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.			
Indicators:		Target	Actual
# of people reached to save their lives during the response		500	500
Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.			
Indicators:		Target	Actual
# of blankets replenished		500	500
Narrative description of achievements			
<p>After the fire incident at the hospital, Iraqi Red Crescent Society local branch staff and volunteers immediately responded to the emergency and evacuated the patients from the coronavirus treatment ward. During the response, IRCS utilized blankets and medicines handed over to the hospital management. These medicines were supported by the ICRC to IRCS, and blankets were utilized by the NS from their prepositioned stock, which was replenished under this DREF operation.</p>			
Challenges			
<ul style="list-style-type: none"> The National Society had difficulties in following some of the IFRC procedures, including the procurement process and the approval process. This was due to the internal system and procedure and what is practiced by the NS. 			
Lessons Learned			
<ul style="list-style-type: none"> Frequent communication about following the standard procedure for procurements with the IFRC support team in MENA is regarded as a successful element to replicate in future interventions. In addition, the country delegation organized online meetings for the IRCS with MENA RO technical teams, which aided IRCS to implement this DREF operation. 			

	<h3 style="color: red;">Livelihoods and basic needs</h3> <p>People reached: 696 Male: 353 Female: 343</p>		
Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods			
Indicators:		Target	Actual
# of targeted/reached families with adequate cash assistance		202	116
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		92	60
# of families of wounded receiving unconditional/multipurpose cash assistance		110	56
Narrative description of achievements			
<p>Providing cash assistance to the affected people is the biggest component of the operation, and two types of cash assistance were set in place. The IRCS management at the headquarters established the cash working</p>			

committee to assist the implementation process with the aim of verifying the data received from the Directorate of Health in Baghdad, in consultation with the local branch.

To assist the implementation process, the cash team at NHQ, in consultation with the branches, prepared the cash programme implementation guidelines, selection criteria, and formats for data collection (beneficiary detail information), which were later shared with all branches and staff. Furthermore, IRCS has deployed two of its CVA-trained persons to the branches to assist with the cash assistance activities.

Unconditional cash assistance:

In total, 116 families were reached. Unconditional cash assistance amounting to 68,527 CHF and provided in IQD to the following:

- 60 families of the deceased, as a one-off grant of 1,000,000 IQD (equivalent to 636.21 CHF).
- 56 families of wounded, as a one-off grant of 852,000 IQD (equivalent to 542.05 CHF).

This assistance enabled families to fulfil their basic needs such as funeral expenses, medicines, and other personal requirements to facilitate the bereavement process. The households selected for cash assistance are those who have lost family member(s) and households with injured member(s) following the incident.



Figure 1: IRCS team supporting affected families with cash assistance (Photo: IRCS)

Challenges

Underachievement against the initial targets was due to multiple reasons:

- In the case of the deceased, some bodies were burnt beyond recognition, while others could not be located at all. The absence of a government-led nationwide DNA database created yet another challenge in that regard.
- In the case of the injured, initial government reports were misleading and overestimated the number of injured as a result of the initial confusion caused by the incident.
- Families were moved back to their hometowns along with their injured or deceased members, making them difficult to reach. Despite IRCS staff and volunteers' efforts across six governorate branches, not all families could be located due to their wide geographical spread beyond the Thi Qar governorate.
- Curfews and movement restrictions due to COVID-19 further impeded operational activities, compounded by the deteriorating security situation and political turmoil in the country.
- IRCS was working with limited human resources (less than 50% - of essential staff) due to the number of COVID-19 cases identified among staff members.
- Travel restrictions and VISA issues led to the inability to deploy Regional Disaster Response Teams (RDRT).

Other challenges include:

- Conducting a satisfaction survey for those receiving cash assistance was not possible due to the sensitive nature of the incident, and the disparity between the assistance given and the loss incurred by the individuals. In other terms, it was inappropriate to gauge the satisfaction of cash assistance for people who had just lost a family member.

Lessons Learned

- Under the circumstances, locally trained volunteers played a vital role in the community, especially given the difficulty to locate the families of the affected due to their wide geographical spread within the Al Nasiriyah district, and other governorates.



Health

People reached: 696

Male: 353

Female: 343

Outcome 6: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people reached with psychosocial support	1,212	696

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	1,212	696

Narrative description of achievements

Thi Qar branch staff has been deployed in the governorate to support the initial first aid and psychosocial support (PPS) interventions. Sixteen volunteers from the branch participated in a training that has been conducted with support from the Baghdad HQ branch.

Afterwards, home visits were conducted to the families of the 60 dead and 56 wounded. Some families were visited once, while others were visited twice, based on need. A total of 202 home visits were conducted. Identified cases with health conditions were referred to the HQ Health committee.

At a later stage, the PSS teams accompanied the Disaster Management department on follow-up visits during the cash distributions. This was done to verify the families' conditions, and their current ability to cope after the incident, in addition to identifying any additional cases needing referral to the appropriate service provider.

The psychosocial component of the operation includes 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, as they originated from different governorates. As per a list provided by the Directorate of Terror's Victims and the Directorate of Health, victims were spread across six governorates, which rendered reaching them more challenging. As such, volunteers and staff spent additional time to locate the families and start the post-disaster PSS intervention.



Figure 2: IRCS staff and volunteers are organising PSS sessions with affected families (Photo: IRCS)

PSS and FA training for volunteers

IRCS headquarters' team organised 2 trainings for the Thi Qar governorate branch staff to enhance the skills of those providing mental health and psychosocial support services and first aid to the affected families. These trained volunteers were equipped with the necessary skill set to visit the families of those who were directly and indirectly affected by the fire. Lastly, a full-day stress management course was given to involved volunteers at the end of the intervention.

Challenges

- Due to the tribal nature of the affected families, it was challenging to visually document the interventions.
- In the case of the injured, initial government reports were misleading and overestimated the number of injured as a result of the initial confusion caused by the incident.
- Families were moved back to their hometowns along with their injured or deceased members, making them difficult to reach. 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 their wide geographical spread beyond the Thi Qar governorate as well as the numerous unforeseen incidents and COVID-19 restrictions in the country.
- IRCS was working with limited human resources (less than 50% - of essential staff) due to the number of COVID-19 cases identified among staff members.

Lessons Learned

- Orientations must be organised 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. Under the circumstances, locally trained volunteers played a vital role in the local community.

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
<i># of IRCS branches that are well functioning (for the operation)</i>	1	1

S1.1.4: National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
<i># of insured volunteers</i>	40	40

Narrative description of achievements

The operation activities were implemented in the Thi Qar governorate, where IRCS has a significant presence. The strong branch network and the trained/skilled volunteer base are the strength of IRCS. During any emergency, they are at the frontlines, aiding the most vulnerable. These trained volunteers are deployed within the initial hours, especially in the hospitals to provide first aid (FA) services and Restoring Family Links (RFL). Several staff and volunteers are trained in disaster response, with some teams specializing in health, Psycho-Social Support (PSS), and hygiene promotion. These members are well-trained on life-saving techniques to assist rescue operations in times of need.

The IRCS worked through its Baghdad branch, supported by the national headquarters and National/Branch Disaster Response Teams (N/BRTs) that have directly supported the emergency operation activities through the mobilization of 40 volunteers. Furthermore, implementation was supported by both IRCS HQ and the IFRC delegation in Iraq.

Challenges

- Ensuring continuous volunteer support for the operation remains the main challenge faced by the branches. As previously indicated, volunteers must visit the same households throughout the operation.

Lessons Learned

- Identifying improved volunteer management mechanisms and strengthening/diversifying the skills of the volunteer base.

International Disaster Response

S2.1: Effective and coordinated international disaster response is ensured

Indicators:	Target	Actual
<i>IFRC support to launch a DREF to raise financial and human resources</i>	Yes	Yes
<i>Coordination tools and mechanisms are in use for the operation - RDRT</i>	Yes	No
<i>% Ratio of people reached by the IFRC disaster response operations to the people affected by these emergencies</i>	100%	87%

S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained

Indicators:	Target	Actual
# of surge deployments in support of the operation	1	1

Narrative description of achievements

IFRC delegation in Iraq provided support to IRCS for this operation. The DRM Delegate, with the support of the MENA regional Disaster, Climate, and Crises (DCC) team and in regular coordination with the national society, provided technical support and backstopping for financial processes, implementation of Cash and Voucher Assistance (CVA) and PSS activities with IRCS technical teams.

Regular meetings were organised with the national society to discuss progress and challenges faced by the IRCS during the implementation of operational activities. Appropriate mitigation actions were identified and carried out to address challenges, if any, as effectively as possible.

Challenges

- Given the nature of the operation, programme initiation, coordination, and approach to the government authorities and affected families were deemed very challenging.
- Travel restrictions and VISA issues led to the inability to deploy Regional Disaster Response Teams (RDRT).

Lessons Learned

- Preparing pre-disaster plans/multi-hazard contingency plans for different types of disasters.

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
<i>IFRC and NS are visible, trusted, and effective advocates on humanitarian issues</i>	Yes	Yes

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

Indicators:	Target	Actual
<i># of lessons learned workshop conducted</i>	1	1

Narrative description of achievements

IRCS has earned the acceptance of local communities, as it is present in all governorates and is assisting vulnerable people. IRCS's mandate to ensure the wider provision of emergency mental health and psychosocial care to individuals and affected families is much needed in the country.

Communications materials produced (social media)

IRCS posts regular updates on social media, including Facebook and Twitter. Furthermore, the IRCS website is regularly updated to share updates on the operation.

Deployment of assessment teams at the branches level

Since the incident, IRCS has engaged its team for first aid response and activated its Thi Qar branch to carry out rapid assessments and information collection with the relevant departments. IRCS has collected initial information and mobilised its team to further verify its accuracy with the affected families in different governorates. IRCS consolidated the assessment data for operation activities' implementation.

Lesson learned workshop

A lessons learned workshop was conducted to identify the learnings of the operation. The Heads of the Branches, staff, volunteers, NHQ staff of IRCS along with IFRC personnel attended the workshop. The final findings were documented for future use.

Challenges

- Conducting the initial assessment was challenging, as many people were in hospitals and in critical medical conditions. Furthermore, their family members were not able to provide any details.

Lessons Learned

- NS needs to improve the soft skills of volunteers and enhance PSS knowledge and first aid, which are necessary skill sets in such situations.
- 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

The amount of CHF 120,022 has been allocated for IRCS to respond to the immediate needs of 1,212 people (202 families) in the Thi Qar governorate. By the end of the operation, only 696 people (116 families) were reached. The balance amount of CHF 22,671 will be returned to the DREF pot.

The financial report is found below.

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/07-2022/04	Operation	MDRIQ012
Budget Timeframe	2021/07-2022/04	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 15/Sep/2022

All figures are in Swiss Francs (CHF)

MDRIQ012 - Iraq - Hospital Fire Incident

Operating Timeframe: 25 Jul 2021 to 30 Nov 2021

I. Summary

Opening Balance	0
Funds & Other Income	120,022
DREF Allocations	120,022
Expenditure	-97,351
Closing Balance	22,671

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	7,350	5,759	1,591
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	90,200	73,135	17,065
PO04 - Health	9,898	10,633	-735
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	107,448	89,527	17,921
EA01 - Coordination and Partnerships	1,470	1,440	30
EA02 - Secretariat Services	11,104	6,385	4,719
EA03 - National Society Strengthening			0
Enabling Approaches Total	12,574	7,824	4,749
Grand Total	120,022	97,351	22,670

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/07-2022/04	Operation	MDRIQ012
Budget Timeframe	2021/07-2022/04	Budget	APPROVED

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MDRIQ012 - Iraq - Hospital Fire Incident

Operating Timeframe: 25 Jul 2021 to 30 Nov 2021

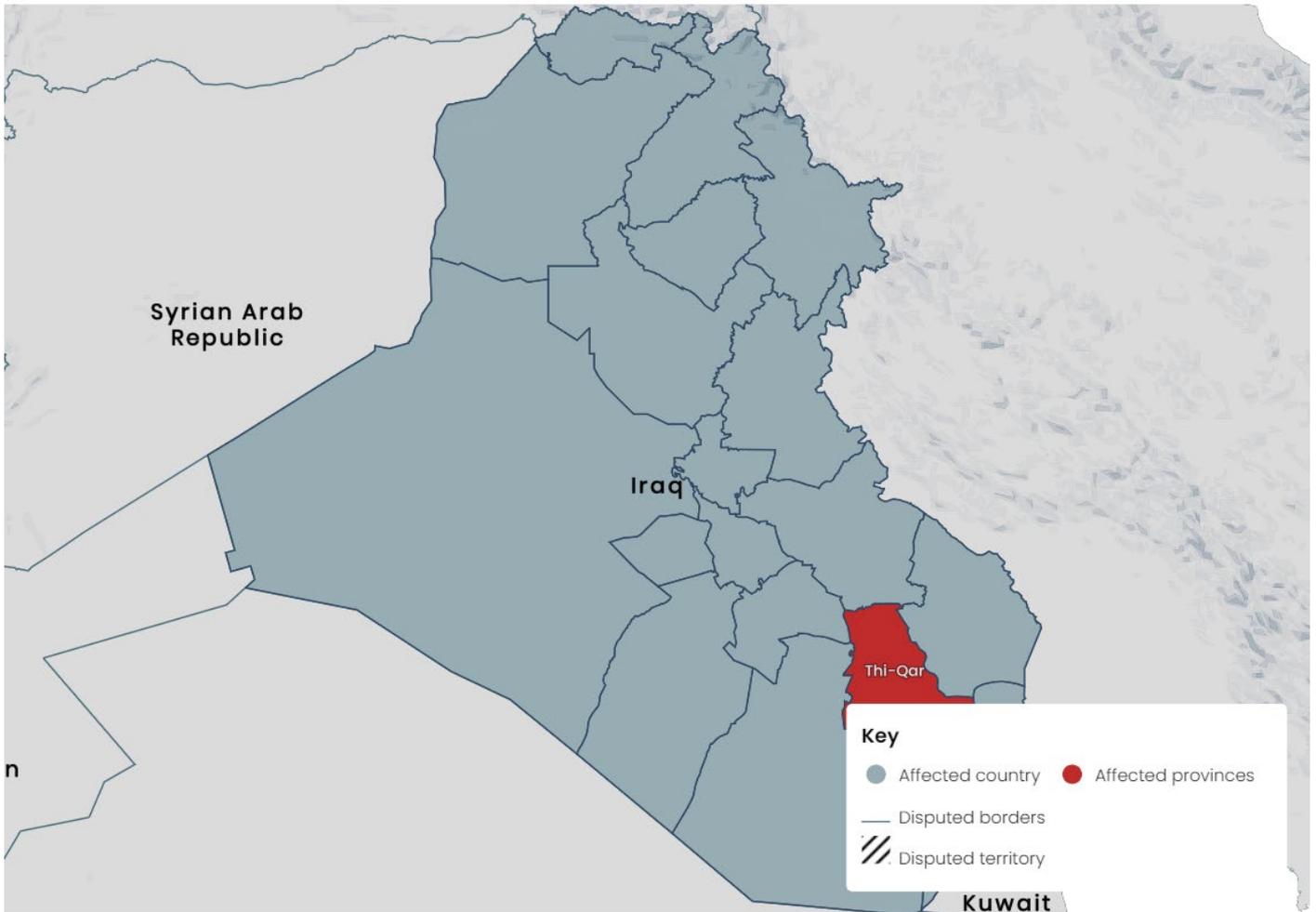
III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	99,050	73,935	25,115
Clothing & Textiles	6,901	5,408	1,494
Other Supplies & Services	9,294		9,294
Cash Disbursement	82,855	68,527	14,327
Workshops & Training	4,141	11,369	-7,228
Workshops & Training	4,141	11,369	-7,228
General Expenditure	9,506	6,106	3,400
Office Costs	7,665	5,995	1,670
Financial Charges	1,840	111	1,729
Indirect Costs	7,325	5,942	1,384
Programme & Services Support Recover	7,325	5,942	1,384
Grand Total	120,022	97,351	22,670



The Fire of Al-Naqa Center in Nasiriyah governorate

July 13, 2021



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, Data sources: IFRC, OSM contributors, Map box.

E. Contact information

Reference documents



Click here for:

- [Emergency Plan of Action \(EPoA\)](#)

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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.