Iraq in 2017

**Youth**
- 9 governorates running the Y-peer network
- 90,545 youth attended GBV/RH awareness sessions
- 549 specialists trained on youth programmes
- 12,763 youth received life skills and vocational training
- 443,786 individuals benefited from GBV services
- 5,726 people trained on GBV services provision
- 923,995 individuals increased awareness on GBV
- 493,786 individuals benefited from GBV services
- 5,726 people trained on GBV services provision
- 923,995 individuals increased awareness on GBV

**Reproductive Health**
- 911,061 women received RH services
- 157 health facilities supported across the country
- 85,363 women reached with RH information
- 191,789 dignity kits were distributed
- 138 women centres supported

**Gender-Based Violence**
- 191,789 dignity kits were distributed
In 2017, UNFPA reached up to 1.5 million individuals in Anbar, Ninewa, Salahudin, Kirkuk, Dohuk, Erbil and Sulimaniyah through the distribution of life-saving assistance through the Rapid Response Mechanism.

This Mechanism is a collaboration between UNFPA, UNICEF and WFP that insures the delivery of potable water, food, sanitary kits and dignity kits within 72 hours of an emergency.

The dignity kits provided by UNFPA include blankets, hair cover, menstrual items, flashlights, and sewing kits among other items. RRM assists most of the displaced families at multiple times and at various locations.
UNFPA increased availability of GBV services to IDP and refugee women and girls. In 2017, UNFPA established 16 women centers hence increasing the number of centres under UNFPA support to 138.

In turn, these centers together with active mobile GBV teams across Iraq provided a range of GBV services to over 600,000 beneficiaries. UNFPA also made significant contribution towards improving the quality of GBV services in Iraq.

During the reporting period, capacity of 5,726 different GBV actors was improved, including government actors and partners.

UNFPA also supported the government to finalize and approve the Clinical Management of Rape protocol, and conduct advocacy campaigns to prevent and eradicate harmful practices such as child marriage.

UNFPA as a GBV sub-Cluster lead also improved coordination among GBV actors including facilitation of the GBV Sub-cluster Standard Operating Procedures. Additionally, 15 data gathering organizations were supported to generate routine GBV data while monthly GBVIMS reports and infographs were compiled to inform programming and advocacy.
Reproductive Health

2016

79 reproductive health facilities supported

UNFPA strengthened capacity of government and partners to meet the emergency reproductive health needs of women and girls, especially those affected by fighting against ISIS in Iraq.

To this end, UNFPA increased coverage of RH services from 79 health facilities in 2016 to 157 health facilities by close of 2017. These facilities included 16 hospitals that were supported to provide BEmONC services and 11 facilities that were supported to offer CEmONC services. These facilities were supported with health workers, emergency RH kits as well as medical and non-medical equipment.

To ensure access to most vulnerable women on frontlines and those stuck behind military checkpoints, UNFPA supported the running of nine mobile delivery units and six mobile gynaecological units.

By close of the year, UNFPA-supported facilities were able to provide a range of reproductive health services to 911,061 women including 110,213 that were provided ANC and PNC, 480,549 that were treated for sexually transmitted infections (STIs)/reproductive tract infections (RTIs); 334,000 that were provided Family Planning (FP) services; 87,583 that were assisted for normal deliveries and 44,056 that were delivered by C-Sections.

85,363 women were reached with reproductive health information through awareness campaigns. Within limitations of acute humanitarian service delivery, UNFPA was also able to build skills of 291 health workers on MISP and other RH services.

2017

157 reproductive health facilities supported
In 2018, UNFPA plans to sustain the current reproductive health services that were established to meet the needs of internally displaced persons.

Where feasible UNFPA will establish additional services to meet reproductive health needs of the most vulnerable populations returning to their communities, those that remain displaced and those that have limited access to reproductive health services.

UNFPA will also pay special attention to building resilience of the national health system through development of relevant reproductive health policies, tools, guidelines and protocols in collaboration with the Government, NGOs and other partners as well as skills development of health workers and health managers.

UNFPA will continue to support government and civil society organizations to prevent, mitigate and respond to sexual and gender-based violence in Iraq.

To this end, UNFPA will continue to support the existing women safe spaces where they will be required and provide leadership of the Gender-Based Violence Sub-Cluster; the Gender-Based Violence Information Management System (GBVIMS); the Prevention of Sexual Exploitation and Abuse (PSEA) Network and the Real Time Accountability Partnership (RTAP).

The year will also provide an opportunity to increase awareness and advocacy for gender equality, women empowerment, and eradication of harmful practices against women while working with government to strengthen the legislative and institutional frameworks to sustain these efforts.

UNFPA will continue to support the youth through the youth-led networks and organizations to consolidate young people’s participation and engagement in socio-economic initiatives in their communities. Special attention will be made towards building their life skills and civic engagement skills and promoting peace building. Selected health facilities will be supported to provide youth-friendly health services.

UNFPA will support national and regional statistics offices to conduct large-scale population-based surveys notably the second Iraqi-Women Integrated Social and Health survey (IWISH II) and preliminary activities for the 2020 population and housing census. UNFPA will also support national efforts to conduct in-depth analysis and dissemination of population data and capacity development of planners on integration of population variables in development frameworks.
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