

Kurdistan Regional Government

Presidency of the Council of Ministers

Office of the Coordinator for International Advocacy



KRG's Measures against the Spread of Covid-19 and the Received Aids

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Preliminary comments:

Up to this point, the number of the confirmed cases of Coronavirus worldwide and the deaths due to the epidemic is about to touch 2,500,000 and 170,000 respectively. The virus outbreak is already out of control in numerous countries-and the poorly established expectations which used to underestimate the fatality of the virus-are already been recalibrated. The disease has transformed from being a contained infection to be a global epidemic. The viral disease is now an imminent threat for almost all countries, causing frequent deaths, city lockdowns, economic crises, and constant dread.

While almost the whole world is witnessing the same danger, the extent to which the countries repelled the epidemic varies. The market and civil society, unfortunately, are currently on suspension, or have their activities reduced in the overwhelming majority of countries. Hence, the governments are almost talking full responsibility of keeping the viral diseases contained; or at least reducing the death toll and infection.

With regard to Kurdistan Regional Government (KRG), it launched an almost sweeping prohibition campaign on public transportation in areas under its jurisdiction since the very beginning of the outbreak. Furthermore, employees from the Ministry of Health and Ministry of Interior are selflessly deployed in the public sectors to deter the spread of the virus.

The epidemic's consequences on local and global economies remain ambivalent to a great extent. Still, its impact on Iraq's economy has been heavy, especially when the oil prices drastically fell in late March. KRG is nonetheless committed to keep the economic repercussions of the outbreak ceased so that people in Kurdistan Region do not suffer from the financial pressures.

This short report aims to illustrate, examine, and assess KRG's procedures in repelling the outbreak of Coronavirus in the Kurdistan Region. It demonstrates the role of health and law enforcement employees of KRG in the last weeks. It also touches upon remarks and contributions made to KRG by local and international counterparts in this period.

A Preview of the Outbreak Data in Kurdistan Region

The first recorded case of COVID-19 in Iraq was on February 24, in the city of Najaf. The Kurdistan Regional Government closed all schools and universities. At the same time, two thousand people in KRI who had returned from Iran were quarantined.

ON March 1st, 2020, the number of recorded cases in Iraq reached 13 with no recorded cases in Kurdistan Region. Iraqi citizens returning to KR-I from Iran are required to undergo a 14-day mandatory quarantine. Security actors in KR-I warn of reports that some people are seeking to be smuggled across the border in order to avoid the two-week isolation period.

As of March 5, 2020, five cases have been recorded in the KR-I. All five cases were in Sulaimaniyah governorate. Duhok authorities unilaterally restricted the movement of people between Duhok and Turkey. The Government of Iraq and the Kurdistan Regional Government have both established COVID-19 crisis management committees, with whom World Health Organization (WHO) is in regular contact.

Between February 24 and March 26, 5144 people were moved to the quarantines. On March 27, the figure was decreased to 1651: 700 in Erbil, 275 in Sulaimani, 39 in Garmian, 566 in Duhok, 42 in Halabja, and 20 in Koya. The sum of the infected people until March 29 was 128, the number of conducted tests was 4774, the number of deaths was 2, and the number of the recovered was 39.

From March 1 towards April 21, the number of samples taken was 23,727. The number of the cases that confirmed positive was 337, from which 41 patients remained under medical supervision, and 292 have been recovered and returned home. The number of deaths is 4.

A Glimpse to the Government Spending and Regulations

KRG started a solidarity campaign by opening several bank accounts to collect funds. Thanks to the contributors who were primarily businessmen and company owners, \$20,875,368 million has been contributed to KRG's bank accounts. KRG maintained transparency in collecting these funds by announcing the updates in exact figures in a consistent way. The whole amount will be spent on purchasing food and drugs, which will be distributed on the governorates in proportion to their populations.

The Federal Government, meanwhile, sent 3,500,000,000 IQD in aid. The 3,500,000,000 IQD received from the Iraqi government has been spent as follows: 1 billion IQD for each of Erbil, Sulaimani, and Duhok governorates, while the rest is distributed on the Halabja Governorate and the directorates of Raparin and Garmian.

The Federal Government also announced that 600,000,000,000 IQD will be allocated to fight poverty in Iraq, but the dedicated portion has not been delivered yet to the Kurdistan Region.

The KRG has so far spent the following amounts in battling the viral disease: 8,040,162,100 IQD for the health directories across Kurdistan Region, 4,400,000,000 to the governorates, and 1,450,000,000 for the security forces. KRG spent the aforementioned amounts from its local incomes. In addition to the aid from the Federal Government, KRG has spent 17,390,162,100 until April 17.

KRG's procedures to repel and deter the spread of Covid-19 have been effective to a great extent. Since the very first of the outbreak, KRG launched restrictive precautionary measures. There have been 22 announcements and decrees released by the Ministry of Interior since the end of February in this respect. As the cases were conceived to be escalating in Iran, KRG dedicated a special budget to fight the epidemic on February 18. It has canceled Friday prayers and large religious gatherings in the region on March 5. Health screening points (testing for fever) have been established at border cross points between KRI and Iran. The Ministry of Health has issued broad directives to the government not to hold or attend large meetings or conferences over the coming two months. On March 10, the KRG announced a two-week closure of governmental institutions until March 29.

The Kurdistan Regional Government has banned all "non-emergency" travel between the three provinces of KRI (Erbil, Sulaymaniyah and Duhok) on March 12, and has announced that domestic flights between Erbil International Airport and the airports in Baghdad and Basra will be suspended from March 14 until March 18.

On April 1, the Kurdistan Regional Government (KRG) extended curfews and movement restrictions until April 10 and announced that government offices will remain closed until April 16. Airports throughout Iraq and the KRI will remain closed until April 11. The GOI has established a ministerial High Committee for National Health and Safety to help

contain the outbreak of COVID-19. The committee is chaired by the Prime Minister and includes the ministers of oil, finance, planning, foreign affairs, interior, higher education, trade, health, agriculture, labor and social affairs, communications, and transportation. Other members include the National Security Adviser, Civil Aviation Authority Director, Kurdistan Region representative. Some banks are re-opening in both KRI and federal Iraq, on reduced operating hours. This is expected to help ease reported problems with cash-based transfers to people in camps, as well as the payment of salaries for national staff.

Anyone who has violated the regulations has been subjected to the required legal proceedings. The security director of Ibrahim Xalil crossing point has been removed from his position after he refused to go to quarantine following his return from Germany. This illustrated that there is no one above the law when public security is at stake. Moreover, concerning public security, KRG has allowed grocery stores, markets, and bakeries to be open. The food supply trend in Kurdistan Region has been constant since the very first of the outbreak, and the market has not faced inflation.

The KRG's Minister for the Relations with the Federal Government was assigned on April 15 to lead a delegation to Baghdad, in order to revive the efforts of combating the viral disease in this stage with the pertinent ministries. The agenda of the meetings will focus on discussing the rights of KRG and the economic condition in Iraq and the Kurdistan Region. The Council of Ministers, furthermore, extended the curfew to April 23, and the lockdown to May 2.

Following the meeting of the Council of Ministers on April 15, KRG Prime Minister released a speech statement. He appreciated the commitment made by the citizens to contain the outbreak through social distancing and adopting hygiene measures. The Prime Minister commended the efforts of the employees of the Ministry of Health and the Ministry of Interior, while acknowledging the remarkable attempts to contain the virus in the Kurdistan Region in the initial phases of the outbreak. He further asked for more patience on behalf of the citizens of the Kurdistan Region, and asserted that the ongoing intense procedures are imperative to repel such an unprecedented threat.

The Repatriation of Kurdistan Region Citizens

The Council of Ministers arranged the procedures of repatriation of the Kurdistan Region citizens who remained outside the Kurdish Region following the suspension of flights. The current data is as following:

On April 2, 100 people were returned to Kurdistan Region from India;

- 118 people were returned to Erbil International Airport from Saudi Arabia on April 13 and transported to Kerkuk and Mosul through buses;
- 157 people were repatriated from Jordan on April 15; and
- On April 17, 107 people in Germany and 163 from Britain have been returned to Kurdistan Region.

This process is based on the cooperation between KRG's Foreign Relations Department and the Iraqi Ministry of Foreign Affairs. The flights are arranged by the Iraqi Airways. The people arrive at the airports will remain in quarantine for 14 days, and are subjected to the required medical examinations.

The Crowded Spots: Prisons and Camps

KRG's policies to combat the viral disease have been parallel with the international calibers of protecting and promoting the human rights of the detainees, refugees, and internally displaced people (IDPs). With regard to the prisoners, KRG has formed a committee that is comprised of medical and legal experts to physically and psychologically examine the prisoners, in order to release those who are susceptible to be infected. The decisions of the aforementioned committee would be binding on senior governmental levels. The conditional exemption from the sentence may not merely include the vulnerable detainees to the virus. It may also incorporate those who have not much time left in the sentence. Thus, the prisoners may temporarily-and conditionally-return to their families at this critical time. So far, 159 prisoners in Erbil, 348 in Sulaimani, and 319 in Duhok have been released on condition.

Concerning the refugee and IDP camps, KRG is committed to contain these spots and provide the required medical care. Meanwhile, KRG urges the World Health Organization (WHO), humanitarian organizations, and other international counterparts to treat the camps with ultimate importance and deliberate medical steps; because the camps are vulnerable spots from which the viral diseases may spread quickly and cause an influx of casualties. In some places, funding the camps has decreased by fifty percent, which by enlarge damaged the government's capability to provide services.

The assistances delivered to the camps and prisons will be highlighted in the next sections.

International Responses and Assistances to KRG

KRG's efforts in combating the novel virus are internationally well perceived and appreciated. Strict regulations were soon implemented in airports and border checkpoints. For example, 2000 people who returned from Iran in early March were isolated in the quarantines for fourteen days. The doctors and nurses devotedly observe the patients, while their teams constantly diagnose the suspects and provide instructions. In a tweet, the Consul General of Italy in Erbil wrote that KRG has done what is necessary to protect its people, while she praised the efforts and announced that she will remain in her home in Erbil, and encouraged people to do so. Similarly, the Consul General of France in Erbil stressed the importance of Coronavirus hotline in Kurdistan Region, and encouraged French residents in Erbil to demonstrate solidarity.

A committee with the leadership of his Excellency, the Prime Minister, has been formed to frame the policies against the Covid-19 outbreak in the Kurdistan Region. The Committee is in a constant contact with the Health Ministry of the Federal Government and the relevant international counterparts to obtain aids and assistance. In the first initiative, on March 24, China offered a generous contribution that consisted of a 1,008 medical testing kits peculiar to Covid-19 diagnoses through the Consulate General of the People's Republic of China in Erbil. Moreover, a medical team also arrived from China on March 27 to deliver recommendations and closely diagnose the infected. A number of Chinese companies promised to provide medical equipment and devices as well. On April 20, on behalf the Chinese government, the Chinese Consulate General, Mr. Ni Ruchi, donated additional medical supplies to Kurdistan Region. The assistances cover test kits, surgical masks, disposable protective clothes, gloves, and etc.

On March 25, the United Nations launched a US\$2 billion coordinated global humanitarian response plan (HRP) to fight COVID-19 in some of the world's most vulnerable countries, including Iraq and Kurdistan Region. On March 19, World Health Organization praised KRG's enacted policies to combat the virus outbreak. Adnan Nawar, an official in WHO, stated that the procedures taken by KRG is parallel to the WHO and other international health regulations and directions. Moreover, Nawar remarked that citizens in Kurdistan Region are well-committed to the imposed curfew.

Spirit of America organization contributed \$18,000 in purchasing protective medical equipment to the Ministry of Peshmerga on March 25. The organization previously provided the Ministry of Peshmerga with assistance. The request was first made by the Ministry of Peshmerga, and then it was approved following reciprocal coordination between the Common Security Office from U.S. Consulate General in Erbil and the General Health Directorate in the Ministry of Peshmerga. The contributions consisted of masks, gloves, medical glasses, sanitizers, and surgery tools.

U.S. Agency for International Development (USAID) has delivered \$670,000 to the World Health Organization (WHO) for the purpose of fighting the outbreak in Iraq.

WHO has provided medical supplies and equipment to the Ministry of Health of the Kurdistan region of Iraq to support response efforts in fighting COVID-19. The 7-truck consignment totaling US\$ 426,732 included 151 pallets of medical supplies, and hospital consumables, in addition to 46 pallets of renewable and supplementary items of the Inter-agency Emergency Health Kit (IEHK) sufficient for a population of approximately 200,000 for 3 months. The consignment also included 3 intensive care unit ventilators and monitors along with personal protective equipment and virus transportation medium, all of which comes as timely support to the Ministry of Health's efforts to fight and contain COVID-19 in the Kurdistan region.

The Office of the United Nations High Commissioner for Refugees (UNHCR) financially aided 110,000 refugee and IDP families-approximately 550,000 people. On April 15, UNHCR distributed funds on Basrma camp residents in the Erbil governorate.

Besides the assistance, KRG's policies have been praised by a large number of human rights activists and organizations. On April 3, an article published in Washington Institute entitled "Kurdistan Region of Iraq and the Coronavirus Response—Lessons Learned". The article plainly praises KRG's efforts in combating the viral disease outbreak, and calls other countries to follow the footprints of Kurdistan Region. It alludes to the fact that unlike many countries which experienced managing epidemic such as SARS, KRG never experienced regulating a health crisis since its establishment in 1992. Yet it so far proved to be a decent example of good governance with respect to repelling Covid-19 outbreak. Furthermore, the article asserts that the media outlets in Kurdistan Region are working excessively to absorb and analysis up-to-date data regarding the outbreak and the officials are giving statements to the public on a daily basis.

Free Burma Rangers (FBR) has shared an overview regarding their support and response plan for COVID-19 in Iraq including the KR-1 as follows:

In Kurdistan, northern Iraq, as in many places around the world, the local authorities and health officials are doing their best to mitigate the spread of the COVID 19. The Free Burma Rangers in Kurdistan have been standing with them to help as they can. In Erbil, the team has provided local Peshmerga troops and traffic police manning checkpoints with gloves, hand sanitizer and masks. Most recently, on 13 April, the team distributed these supplies to those working in the city center and surrounding roadways, following a previous distribution a couple of weeks ago.

In the Dohuk Governorate, the team has been assisting local ambulance services by driving patients from five different villages to hospitals in Bardarash, Dohuk or Akre. They are coordinating with the Bashiqa headquarters and Bardarash Health Center. COVID 19 patients can only be taken to Dohuk or Erbil, but there are many other

patients that need care as well, and our team has been helping to insure these patients are cared for and not forgotten.

We will continue to support local efforts to contain COVID 19 in all the areas where we operate, as well as continue our normal work of standing with the people in war-torn or otherwise oppressed areas. We believe God is bigger than the virus and has a way for each of us to respond.

World Food Program (WFP) has shared an overview regarding Japan support and response plan for COVID-19 in Iraq including the KR-1 as follows:

The IDPs will receive electronic vouchers with which they can purchase the food they need in shops in the camps. “In 2020, Japan provided an overall assistance package for Iraq of US\$41 million – including WFP’s programme to help meet the food security of IDPs,” said Ambassador of Japan to Iraq Naofumi Hashimoto. “With this latest contribution, Japan’s assistance to people affected by the crisis reaches a total of US\$540 million since 2014. We hope that the assistance from the Government and people of Japan will help assure that displaced households meet their basic food needs.” Around 1.4 million IDPs are still unable to return home because of significant issues in their areas of origin such as lack of security, employment and services. Without donor attention and support, the fate of IDPs and refugees in Iraq could become a forgotten crisis. The Iraq Humanitarian Response Plan 2020 estimates that US\$520 million is needed for humanitarian assistance in the country this year. “We’re grateful to the people of Japan for supporting WFP’s operations to provide food assistance to those people in Iraq who are still unable to return home,” said WFP Representative in Iraq Abdirahman Meygag. “This contribution is the latest of the long-term partnership between the Government of Japan and WFP, and we look forward to our continued cooperation.” WFP urgently requires US\$14.8 million to meet the food needs of vulnerable IDPs and Syrian refugees in camps in Iraq over the next six months.

United Nations Development Program (UNDP) has shared an overview regarding Belgium, Netherlands, and Sweden support and response plan for COVID-19 in Iraq including the KR-1 as follows:

The governments of Belgium, the Netherlands and Sweden have collectively committed US\$5 million to support the Government of Iraq’s response to the COVID-19 crisis, in

partnership with UNDP Iraq. The funds, pledged under UNDP's Funding Facility for Stabilization to help rehabilitate infrastructure damaged by ISIL, will be used to support UNDP Iraq's initial \$22 million COVID-19 response package, which is being implemented under the umbrella of UNDP's stabilization program. Measures to combat the virus under this package include increasing the testing capacity of laboratories, providing personal protective equipment to healthcare workers, increasing the number of isolation wards, and undertaking assessments to establish post-COVID-19 recovery strategies. Focusing on the most vulnerable communities in Iraq, activities will be rolled out in nine hospitals selected by local authorities in the underserved areas of Anbar, Diyala, Dohuk, Basra, Karbala, Najaf, Ninewa and Salah Al-Din. "Containing the coronavirus outbreak is now the Government of Iraq's number one priority, particularly as infection rates rise, putting more pressure on the Iraqi healthcare system outside the major capitals. We're extremely grateful to Belgium, the Netherlands and Sweden for acting swiftly to commit these funds for prevention activities to stem this crisis," says Resident Representative of UNDP Iraq, Zena Ali Ahmad. "Due to the strict curfews imposed by the Government of Iraq, we've had no choice but to temporarily halt the implementation of our stabilization activities. However, by capitalizing on the tried-and-tested processes of our successful stabilization work, we will respond to this unprecedented global health crisis with the speed and agility UNDP Iraq is known for," she says. "Once this pandemic is under control, our stabilization activities will resume. Until then, we will work closely with the Government of Iraq, the World Health Organization and other UN agencies to curb the crisis as best we can," she added. UNDP Iraq is currently discussing the remaining funding gap with other international partners. Processes have been established to ensure that once funds have been committed, the response measures can be implemented immediately.

The International Organization for Migration known as (IOM) has shared an overview regarding their support and response plan for COVID-19 in Iraq including the KR-1 as follows:

- Health: Scaling up virtual discussions on tailoring key messages and providing electronic IEC materials. Reinforcing IOM supported facilities in the camps to conduct screening and isolation for suspect COVID-19 cases. For those partners still operating in the field, organizing online sessions on safety precautions.
- Some critical life-saving and life sustaining activities in camp and out-of-camp settings (e.g. camp coordination and camp management in camps for internally displaced persons [IDPs], as well as individual health, mental health and psychosocial support and protection) are continuing as the Government has allowed certain access, and IOM has local staff in certain locations.

- Certain trainings, workshops and meetings for the Government such as those with the Ministry of Interior Community Policing Directorate are now using online platforms.
- For Displacement Tracking Matrix (DTM) and research/analysis: Data collection by phone is ongoing, principally for IDP and returnee master lists and ‘flow monitoring’ at the five border points. DTM has been supporting the Inter Cluster Coordination Groups, including health and CCCM clusters, in terms of data as well as analysis to map vulnerabilities related to COVID-19; and collection data on services, movement restrictions and potential impact of the crisis.
- As part of support to the Iraqi private sector, IOM is identifying businesses that may be supported with grant funding to scale up activities related to medical equipment and supplies, online delivery and other essential activities during lockdown. Support could be provided to businesses such as grocery stores, pharmacies, food delivery and others that provide essential services to populations facing movement restrictions. IOM is looking towards scaling up economic recovery activities post-COVID, especially through the ‘Enterprise Development Fund’, which is a small-grants mechanism. IOM is analyzing the economic impact on the sector. IOM is also developing guidance and referral procedures for appropriate safety measures for SMEs and other businesses, and their staff.
- IOM is in contact with local authorities to understand needs for which cash assistance or CfW would be appropriate, especially to support rehabilitation of WASH infrastructure and other essential services, improve services and increase cash injections into communities suffering from any economic impact.
- The Community Resource Centers (CRCs) are performing outreach activities and online activities especially to returnees and out of camp IDPs. This includes mass messaging and social media campaigns, in coordination with CCCM cluster.
- IOM has developed graphics depicting with information about COVID-19, in Arabic and Kurdish and shared on Facebook, and through bulk SMS (reaching an estimate of 150,000 individuals) all over Iraq (mainly IDPs and returnees). COVID IEC materials were printed and distributed (57,600 flyers and 6680 posters) including during an NFI distribution related to the flooding in Mosul. Messaging is on mental health during lockdown; persons with disabilities; and to combat social stigma; and Gender-specific messages about managing the response.
- Supporting strengthening of existing migration-management Government of Iraq Technical Working Group inter-ministerial/inter-service cooperation to drive policies for stranded and labour migrants present, and develop policies that prepare for other global, regional crises that impact mobility.

IOM Response Plan for Covid-19:

IOM Iraq is employing a multi-sectoral response utilizing a whole of government and whole of society approach and will release Covid-19 Response Plan in line with the IOM Global Appeal, in line with the WHO Operational plans.

The key response areas and outcomes are:

Response Area	<u>Outcome</u> to be achieved through proposed intervention
Coordination and Partnerships	Strengthened capacities of the Government of Iraq to coordinate and respond to infectious disease outbreaks or other crises
Risk communication and community engagement (RCCE)	Improved understanding of COVID-19 to counter misinformation and contain spread of the disease
Surveillance	Disease surveillance systems are reinforced at sub-national and local levels Community-based surveillance and population mobility mapping to support disease surveillance and response
Health System Reinforcement, Case Management and Access to Essential Services	Increased access to essential services through supporting healthcare facilities to effectively identify and manage suspect cases
Camp Coordination and Camp Management	Risk of COVID-19 is reduced in camps and informal settlements
Points of Entry	PoEs have enhanced capacities to detect and manage ill travellers suspected of having COVID-19
Capacity building	Government of Iraq has enhanced capacities to develop policies and procedures and support migration management including for crisis management
Protection and Migrant Assistance	Enhanced protection support and access to services of all migrants, travellers, displaced populations and local communities

Transition and Recovery, including Economic Empowerment and Access to Livelihoods	Increased economic resilience, for communities in situations of heightened vulnerability
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The International Committee of the Red Cross (ICRC) has shared an overview regarding their support and response plan for COVID-19 in Iraq including the KR-1 as follows:

ICRC Health Support:

- * Supported 2 Primary Health Care Centres (PHCC) Sangasar and Derabon PHCCs and 5 Non-Communicable Diseases (NCD), (Gulan, Misrik, Sharia, Batel and Khanke) in Dohuk and Sulaimaniyah accordingly;
- * ICRC delivered the following items; Thermometer, gowns, gloves, boots, googles, surgical masks, disinfectants and soap, to Gulan and Sangasar in Sulaimaniyah and Derabon in Dohuk;
- * Planned to implement the installation of washing hand points in the main entrances of the 7 mentioned supported health facilities;
- * ICRC health team conducted covid 19 awareness session to the health staff in Derabon and Misrik PHCCs in Dohuk.

ICRC Support in detention places

- * In March and April 2020, ICRC distributed support materials such as (thermometers, disinfectant, soap, masks, gloves, protective gowns, goggles, boots, etc) to Erbil Investigation Center General Assaysh (IC Gen Sec), Security Prison (SP) in Erbil, Counter Terrorism Directorate (CTD) in Erbil and the prison of the Directorate of Adults Reformatory (DAR) in Suliamanyah;
- * In March ICRC distributed support materials such as (non-touch thermometers, disinfectant liquids, and hand sanitizers) to Fort Suse Federal Prison in Suliamanyah;
- * Conducted detailed dissemination/awareness session in SP Erbil;
- * Ongoing discussions with detaining authorities in (IC Gen Sec), Assayesh Erbil- SP Erbil, CTD, and CP Kasnazan prisons), in Sulaymaniah (DAR Sulaimaniyah and Fort Suse), and in Dohuk (Assayseh Dohuk- IC Dohuk, and Central Prison Zerga) regarding preventive measures and providing technical support to the medical staff working in these prisons;

* ICRC's guidance note to Coronavirus's Preventive Measures was submitted to Assayesh and CTD authorities;

* ICRC Health in Detention teams are on ongoing Coordination with the Directorate of Health in Erbil, Dohuk and Sulaimanyah for an integrated COVID-19 response in places of detention.

The Role and Contributions of Local Non-Governmental Organizations

Local and international organizations have played an essential role in fighting the Coronavirus. In coordination with the relevant authorities, they have delivered immense assistances to the people in need amid the fragile situation. Below is a reference to the contributions of a number of local NGOs to people in need and security forces in Kurdistan Region:

Barzani Charity Foundation distributed food parcels on 25,234 families from the beginning of the outbreak in Kurdistan Region until April 15. Each of their food parcels contains 11 various dry foods sufficient for a family of 5 for 7 to 10 days. They delivered food parcels to Khalifan, Seberan, and Karezan after they were contained due to the virus. In coordination with Iraq's Red Crescent Society, Barzani Foundation, they provided the entire medical necessities for Erbil International Fair-150 beds-after it was dedicated to Coronavirus patients. The foundation started to build a hospital that accommodates 70 patients. Furthermore, in coordination with Emirate Red Crescent Society, they prepared Emirate Hospital in Erbil to receive patients. The hospital has 50 beds. They also have provided a hotline that operates from 8:00 AM to 8:00 PM, which has so far received 32,904 calls.

Rwanga Foundation made remarkable contributions as well. In cooperation with Burger King and Alhayat Pepsi, Rwanga Foundation distributed 3,300 meals on security forces in Erbil for three days starting on March 15, 2020. Their campaign continued the day after. They provided 1,000 meals for the security forces operating in Sulaimani and Duhok. Overall, 20,091 meals were prepared to medical and law enforcement teams by Rwanga Foundation. They also distributed food parcels to 2,218 families across Kurdistan Region. Rwanga Foundation, furthermore, shared tips in social media regarding the protective measures against Coronavirus, publishing online lessons for the students, and distributing food parcels on families in need.

Faruq Holding, through the Civil Development Organization (CDO), distributed 10,000 food packages and 10,000 protective assets in Sulaimani governorate in fifteen days. The districts and areas covered Bazyan, Alay, Bardaqaraman, Peramagrun, Dwkan, Takya, Aghkalar, Sangaw, Shorsh, Chamchamal, Bakrajo, Qaradax and Sewsenan, Arbat, Sharbazher and its surroundings, Mawat, Tasluja, Sayd Sadq, Xurmal, Darbandixan, and Sulaimani city center. Faruq Holding will continue to lend assists to 1,000 more families.

Swedish Development Aid Organization (SWEDO) played a large role too. As the curfew was imposed, they promptly coordinated with UNHCR, WHO, and health directories. Their teams in Diyala launched a hygiene awareness campaign to 28,000 children and school cadres. In Erbil and Duhok, their teams contributed to raising

awareness and promoting protective measures in the camps and urban areas. They also provided core relief items to flood-impacted families within the camps.

REACH Organization distributed 1200 kits on IDP families in Hasan Sham camp in Erbil Governorate to enhance hygiene and protection measures in the camps. The distribution was arranged by REACH Organization with the support of Hungarian Interchurch Aid.

Dasti Hawkary Organization had sprayed tons of sanitized elements in Erbil, Koya, Soran and Kalak district to fight the outbreak. Additionally, the organization has been providing between 100 to 300 food baskets on a daily basis to the poor since the very first of the outbreak. They also lent financial assistances to 25 orphans on March 18.

Nezhen Organization distributed food supplies to 250 families in Duhok governorate. They also commended KRG for its policies to remarkably contain the outbreak.

ETTC's contribution to Erbil governorate and Erbil city center was as follows: 30,000 gloves, 15 aprons, 6,800 masks, and 3 thermos scanner devices. In Sulaimani governorate as well, ETTC provided 25,000 gloves, 537 hand sanitizer gels, and 600 masks. Collectively, they distributed 66,217 protective supplies in Kurdistan Region (8,280 masks, 56,800 gloves, 1109 hand sanitizers, 25 aprons, and 3 thermos scanner devices).

Tutapona International delivered Mental Health or Psycho-Social Support (MHPSS) to 70 individuals in Eisyan camp remotely, and will persist to lend assists.

The Public Aid Organization has shared an overview regarding their support and response plan for COVID-19 in Iraq including the KR-1 as follows:

In the presence of His Honor Judge Azad Hassan Khoshnaw, Head of the Public Prosecution Service, and Judge Sherzad, a member of the Public Prosecution in the Prosecution Department of the Adult Reformatory in Erbil, in the presence of both the Director General of Social Reform in the region, Mr. Ahmed Najm al-Din, Mr. Hemin Nankli, the Director of the Reformatory, and a number of officials Security and administrators, the Justice Network delegation for the prisoners made up of Mr. Shwan Saber Mustafa, Mr. Hogir Jettu, and Mr. Awara Jalal, handed over the following materials to the correctional department: –

- 1- Silicon Gloves (6000KV)
- 2- Mask (1000 muzzle)
- 3- Sterile hand gel lotion (600 cans)

4- Five glycans aseptic spray material is sufficient to prepare (2500 liters of sterile spray material).

5- Allowances for sterilizers to spray (two)

And the planned program is that all the reforms, positions and detention centers in the region be prepared after obtaining the funding and the original approvals from the donor for the projects and activities of the Justice Network, which is the Norwegian People's Aid Organization (NPA) within its long-term programs in providing funding for activities that The network is implementing it over the past four years, and it is hoped to extend it to another four years. The handover process was preceded by a dialogue session between the attendees, which dealt with the conditions of the arrested and the convicted, and they touched on the necessity of a general amnesty for the convicts who spent half of their sentence and did not pose a threat to the security of society, especially the provisions for car accidents, quarrels and thefts, not serious And begging crimes, violating regulations and instructions, violent crimes within the family, and other crimes, and also the necessity to stop and postpone crimes that are described as (non-urgent and non-urgent) until after the end of the epidemic risks referred to above. Also discussed was the need to expedite requests for police release. The topics of the Prison Administration Law, the Alternative Penal Code, and the amendment of some of the laws were among those discussed. After that, the materials were delivered to the prison administration warehouses, according to the established rules and within the administrative contexts of the receiving and delivery process. And it was an opportunity for His Excellency the Head of the Public Prosecution to take a tour of the correctional facility to see the conditions and problems of the convicts. Finally, the event was covered in the media, and this was done directly on two satellite channels.

Conclusion

KRG's regulatory standards in fighting the spread of Covid-19 virus have been successful to a great extent. The number of the patients remained under medical supervision on April 20 recorded 63, while 270 patients have been recovered and returned home. The perceptible accomplishment is the result of intense social distancing measures, excessive work from medical and law enforcement teams, corroborative activities of civil society organizations, and the commendable patience of Kurdistan Region citizens.

Meanwhile, the role of international organizations and governmental counterparts has been effective. KRG recognizes the existent solidarity in the international community to which it has been indivisible part. The Covid-19 outbreak has remarkably contributed to the enhancement of the spirit of this solidarity. KRG received commendable assistances and contributions from international counterparts. The strong diplomatic and presence of the countries and human rights organizations in Kurdistan Region, nonetheless, sets the collaborative bar a bit higher; especially as the health crisis was accompanied by an economic crisis. Furthermore, KRG's experiences and successes in governance are largely derived from the existing diplomatic relations Kurdistan Region has with international community since its establishment in 1992. These relations enjoy intense feelings of solidarity and reciprocity. Therefore, additional assistances are needed, and we call for a better engagement of international community in this calamity and the future ones alike.

The horror that Covid-19 virus caused was difficult to contemplate in the first phases of the outbreak, but the unprecedented threat is about to be eased and surpassed hopefully.