

### Allocation Summary:

- This allocation strategy is issued by the Humanitarian Coordinator (HC), in consultation with the Advisory Board of the Iraq Humanitarian Fund (IHF), and clusters. In line with the current contextual humanitarian needs, this document defines **IHF funding priorities for the 2021 first Reserve Allocation to help address key response gaps identified in the 2021 Iraq Humanitarian Response Plan and confirmed by the 2022 Humanitarian Needs Overview analysis.**
- An envelope of **US\$12 million** is available under this allocation. The strategy outlines the allocation's strategic focus and priorities, the rationale for the prioritization, and the timeline and procedure for the allocation process.
- All project proposals should be submitted via the IHF Grant Management System (GMS) (<https://cbpf.unocha.org>) **by Wednesday, 8 December 2021 at 23:59 (Iraq time).**

### Section 1: Humanitarian Context

#### 1.1. Overview of the Humanitarian Situation:

Despite progress made to address humanitarian needs that arose over the last four post-conflict years, the humanitarian situation in Iraq remains complex and fragile. By the end of September 2021, 1.2 million people were still internally displaced across 18 governorates<sup>1</sup> underscoring the impact of the conflict. While 4.8 million people have returned to their areas of origin, further returns are hampered by challenges such as inadequate access to basic services, disrupted livelihoods and security concerns. Both groups are also at increasing risk of protection violations. The 2021 HRP indicates that 4.1 million people need some form of humanitarian assistance, including 2.4 million people with acute humanitarian needs.

Notwithstanding funding shortfalls in 2021, and the socioeconomic effects of the COVID-19 pandemic, by September humanitarian partners had reached 771,000 (54 per cent) out of the 1.5 million people targeted by the 2021 Humanitarian Response Plan (HRP) with some form of assistance. However, a mid-year gap analysis of the response by the Inter Cluster Coordination Group (ICCG) revealed that substantial response gaps persist in some areas that had been highlighted in 2020. This was largely due to limited funding, lack of partners, and programme reprioritization due to population movements. Worryingly, some of these areas also host districts with high severity of needs, particularly among vulnerable out of camp internally displaced persons (IDP) and returnees. Without sustained humanitarian assistance, these groups will continue to rely on negative coping mechanisms.

The most acute humanitarian needs are found in five governorates namely Al-Anbar, Diyala, Kirkuk, Ninewa and Salah Al-Din. These governorates were directly affected by the counter-ISIL military operations from 2014 to 2017 and received and hosted significant numbers of the displaced.

#### 1.2. Humanitarian Response Plan/Flash Appeal

Addressing the continuing humanitarian consequences of the 2014-2017 crisis and related displacement, as well as the compounding humanitarian impacts of the COVID19 pandemic, are the central priorities for humanitarian action in Iraq in 2021. The [2021 Iraq Humanitarian Response Plan](#) (HRP) aims to address the most critical humanitarian needs for 1.5 million people, including 221,000 IDPs in formal camps, 295,000 IDPs living in out-of-camp areas, and 966,000 returnees, with a total funding requirement of US\$607.2 million.

This will be achieved through a three-pronged approach, detailed through three Strategic Objectives:

- 1) The most acutely vulnerable displaced and returnee families living will be provided with food, livelihoods support and temporary income sources that will enable them to meet their basic needs.
- 2) The most acutely vulnerable displaced and returnee families will be supported to access quality essential services, including primary and secondary health care, education, water, and sanitation.
- 3) The most acutely vulnerable displaced and returnee households continuing to live in unsafe and undignified living environments, exposed to the risks of climatic elements and physical and psychological threats, will be supported to live in safety and dignity.

While ensuring a tightly focused humanitarian response, the humanitarian community is working closely with stabilization, durable solutions, and development actors to ensure a coordinated approach in addressing the drivers of humanitarian needs and facilitating efforts to end displacement.

<sup>1</sup> IOM Displacement Tracking Matrix (DTM) 30 September 2021 Update

## Section 2: Strategic Statement

This allocation aims to **support response to address priority unmet humanitarian needs among out-of-camp IDPs and vulnerable returnees in underserved locations of Iraq through a focused and accelerated allocation process**. The allocation will use the reserve allocation modality to strategically support humanitarian response in areas (i) where significant response gaps exist, and (ii) where the severity of needs is the highest, as identified by the 2021 HRP gap analysis and 2022 HNO inter-sectoral needs analysis. Given the limited funding available, the allocation will use a targeted multi-sectoral approach to maximize its impact in specific underserved areas and areas of high severity needs.

This allocation will strengthen ongoing responses in health, multi-purpose cash assistance, protection, and WASH clusters to reduce reliance on negative coping mechanisms among targeted groups. The allocation will also support IHF's continued pursuit of the Grand Bargain commitment on localization through promoting submissions from national and international NGOs (INGOs) as first responders. INGOs are further expected to invest in building the capacity of national NGOs with whom they will partner. In line with the Fund's second strategic objective for 2021, the allocation aims to channel funds to underfunded areas of humanitarian response, through prioritizing projects that mainstream gender (especially women and girls), and address the specific needs of persons with disability, and gender-based violence (GBV).

## 3. Operational Strategy

### 3.1 Operational priorities

The HC in discussion with the IHF Advisory Board has set the Allocation criteria and priorities as follows:

#### 1. Demographic and geographic targeting

Projects to target out-of-camp IDPs and vulnerable returnees (those in critical shelter and/or resorting to emergency-level negative coping mechanisms) in the following underserved and high-severity districts identified through the 2021 HRP gap analysis and inter-sectoral needs analysis conducted for the 2022 Humanitarian Needs Overview (HNO).

Governorate	District
Ninewa	Al-Baaj, Al-Hatra and Sinjar districts
Salah Al-Din	Balad, Samarra and Tooz Khurmato districts
Diyala	Baquba district ( <b>for out-of-camp IDP response</b> )
Kirkuk	Dibis district

#### 2. Sectoral prioritization: Considering the limited funds available, as well as recent funding trends including complementary donor funding and context, the allocation will support a limited number of clusters, which are experiencing significant response gaps due to funding shortfalls, particularly relating to activities targeting out-of-camp IDPs and returnees.

- Health
- Multi-purpose cash assistance (MPCA)
- Protection (including Child Protection, GBV and General Protection)
- WASH

#### 3. Cross-cutting priorities

Projects mainstreaming **gender** (especially **women and girls**), **assistance to address specific needs of persons with disability**, and **GBV** to be prioritized (to be reflected in the Strategic Review scorecards).

#### 4. Partner selection

- Only partners that feature on the IHF eligibility list (annexed to this strategy) will be able to apply for direct funding under this allocation. Non-assessed partners, however, may be part of a consortium led by an eligible partner to receive indirect funding.
- **National NGO (NNGO) participation:** Submission from eligible NNGOs and international partners with NNGO partnerships to be prioritized. For the latter, a mandatory capacity-building component to be included in the log frame and budgeted accordingly. To ensure timely impact on the ground, the consortium modality is not a priority under this allocation and the recommended total number of partners per proposal is up to three.
- Only projects submitted by partners with demonstrated operational presence/access and capacity to absorb the allocated funds and implement projects in targeted locations will be recommended for the Strategic Review. For

this, partners should have reported their activities on the Activity Info platform in 2020 and/or 2021 or should have consulted relevant clusters prior to submitting a proposal under the allocation.

- Partners may only submit one proposal under the allocation.

## 5. Project budget, modality, and duration

- All projects under this allocation should be implemented within seven months.
- Partners can submit single-sector or multi-sector projects under this allocation.
- Single partner / standalone projects: The minimum budget for direct funding is \$250,000. The maximum allowable budget is set as per IHF Operational Modalities according to the partner risk level and project duration (see page 12 of the IHF Operational Manual).
- Multi-sector projects: Please note that different sectoral components of a multi-sector project will be vetted separately through respective cluster strategic/technical review processes. Further, a multi-sector project should encompass an integrated response strategy and its added value clearly explained in the proposal narrative. It should not be presented as two unrelated projects patchworked together on paper.

Partners intending to submit multi-sector projects are advised to consult the relevant clusters beforehand to ensure appropriate synergy with cluster priorities to be supported through this allocation. Should only one sectoral component of a multi-sector project be approved, and the other (s) rejected, the grant will be awarded only for the approved sectoral portion and the partner may be asked to readjust the proposal and budget to implement it as a single-sector project.

- Consortia projects: The maximum permissible consortia project budget will be the sum of the individual partner budget ceilings as per IHF Operational Modalities. Non-assessed partners can be part of a consortium led by an eligible partner and their sub-budget ceiling will be the same as that of IHF high-risk partners.

## 3.2 Underfunded Priorities

<b>Women and Girls</b>	The allocation will prioritize projects with demonstrated gender and age mainstreaming to support gender- and age-specific needs of the targeted beneficiaries, especially of women and girls. The Strategic Review will assess the project's design and implementation plan against the four areas of gender equality measures.
<b>People with Disabilities</b>	As part of its cross-cutting priorities, the allocation will prioritize projects which consider and support the specific issues and needs of persons with disabilities (PwD).
<b>Protection (other aspects)</b>	The allocation will support both prioritized protection interventions and projects with demonstrated protection mainstreaming across all clusters.

## 3.3 Crosscutting Issues

<b>GBV</b>	In addition to directly funding projects which are primarily focused on protection interventions to prevent and respond to GBVs, the allocation will prioritize projects that mainstream GBV in all sectors, as part of its cross-cutting priorities.
<b>PSEA</b>	In line with the 2021 Strategic Objective of the Fund, the allocation will prioritize projects which consider and make specific reference to initiatives to promote PSEA.
<b>AAP</b>	In line with the 2021 Strategic Objective of the Fund, the allocation will prioritize projects which ensure beneficiary consultation in the project design and its implementation, as well as the provision of accessible and functioning feedback and complaint mechanisms.
<b>Cash and Voucher Assistance</b>	The allocation will support multi-purpose cash assistance (MPCA) as one of the prioritized modalities of assistance. Further, sectoral cash assistance will be incorporated under prioritized sectoral interventions (e.g., cash for protection). Both MPCA and sector-specific cash partners will be coordinated through the Cash Working Group, which works to harmonize cash assistance' targeting, delivery and synergy across sectors and facilitate the optimum collective impact of cash assistance in Iraq.
<b>Localization</b>	To enhance NNGO participation and capacity, the allocation will prioritize submissions from NNGOs and from international partners with NNGO partnerships, with a mandatory NNGO capacity-building component for the latter.

## Section 4: Cluster Breakdown and Priorities

### 4.1 Cluster Breakdown/ Envelopes

Clusters	Amount allocated (US\$)	People targeted with the allocation
Health	\$2,800,000	510,000
Multi-purpose cash assistance (MPCA)	\$2,700,000	12,780
WASH	\$2,500,000	79,000
Protection	\$4,000,000	
<i>Protection (general protection)</i>	<i>\$1,300,000</i>	<i>20,000-25,000</i>
<i>Protection (child protection)</i>	<i>\$1,300,000</i>	<i>13,500</i>
<i>Protection (GBV)</i>	<i>\$1,400,000</i>	<i>19,000-23,000</i>
<b>Total</b>	<b>\$12,000,000</b>	<b>524,500<sup>2</sup></b>

### 4.2 Cluster Priorities

*See the next page for the cluster priorities.*

<sup>2</sup> Estimated based on the largest cluster beneficiary target per district. In all priority districts except for Al-Baaj and Sinjar, the Health Cluster has the largest target beneficiaries, while the WASH Cluster has the largest target beneficiaries in Al-Baaj and Sinjar districts. Accordingly, the total beneficiary figure was estimated by combining the WASH Cluster beneficiaries in Al-Baaj and Sinjar and the Health Cluster beneficiaries in the rest six districts targeted by the allocation.

	Cluster Priority/Objective	Prioritised activities	Location		Estimated beneficiaries	Budget
			District	Sub-district		
Health	To ensure fair access to the quality primary health care services for the out-of-camp IDPs and vulnerable returnees	Supporting PHCCs and MMCs to provide the following activities: <ul style="list-style-type: none"> <li>Ensuring availability of skilled health personnel</li> <li>Supporting the PHCCs/MMCS with essential medication, NCDs, medical equipment, laboratory items and medical supplies.</li> <li>Supporting referral services to the secondary and tertiary health facilities.</li> <li>Supporting the logistical component of running a PHCC/MMC.</li> <li>Community-based prevention activities include outreach services</li> </ul>	Baquba	Khan Bani Saad Baquba	30,000 20,000	<b>\$2,642,500</b>
			Balad	Balad Al Ishaqi Al Mazarie	Total of 90,000	
			Samarra	Samarra Al Huish Tresha	Total of 60,000	
			Tooz Khormatu		15,000	
			Dibis	Dibis	148,000	
			Al-Hatra	Hatra Tal-Abta Muhallabeya	20,000 60,000 40,000	
			Sinjar	Tal Banat Tal Qasab	10,000 5,000	
			Al Baaj	Al Wardeya	12,000	
	Reduce the risk of spreading diseases & to protect the health and well-being of health care workers and the community	To collect and receive biomedical waste from health care facilities and transfer it to nearest medical waste management unit.	Dibis	Dibis	140,000 + all health facilities in the district	<b>\$140,000</b>
MPCA	Vulnerable IDPs in camps, out-of-camp IDPs and returnees in acute need are supported to access income sources to meet basic needs and minimize reliance on negative coping strategies	MPCA (based on the updated Cash Working Group guidance below)  <b>Transfer value:</b> 440,000 IQD/month/HH. This is based on the revision of the SMEB. Taking in consideration an exchange rate of 1USD = 1,470 IQD, the transfer value in USD is 300.  <b>Frequencies:</b> <u>R2 category:</u> This is the category that currently is receiving 2 months of assistance. For 2022,	Al-Baaj Al-Hatra Sinjar Balad Samarra Baquba Tooz Khurmato	TBD – Based on partner's assessment	<b>Al-Baaj</b> 410 HH / 2,460 individuals (50 IDP and 360 returnees)	<b>\$519,926</b>
					<b>Al-Hatra</b> 450 HH / 2,700 individuals (50 IDP and 400 Returnees)	<b>\$570,650</b>
					<b>Sinjar</b> 350 HH / 2,100 individuals (50 IDP and 300 returnees)	<b>\$443,839</b>

	Cluster Priority/Objective	Prioritised activities	Location		Estimated beneficiaries	Budget
			District	Sub-district		
		beneficiaries falling under this category will receive 2 transfers as well but in a lumpsum. That means, they will receive 880,000 IQD at once. Based on the Randomized Control Trial conducted by the CLCI that assesses the impact of MPCA to people receiving different amounts and tranches, we have concluded that this category (which is the less vulnerable among the extremely vulnerable) will have a greater impact receiving a larger amount at once, since this will help them in protecting better their livelihoods and make small investments in income generating activities.			<b>Balad</b> 270 HH / 1,620 individuals (240 IDP and 30 returnees)	<b>\$342,390</b>
		<b>Samarra</b> 230 HH / 1,380 individuals (230 IDP)			<b>\$291,666</b>	
		<b>Baquba</b> 140 HH / 1,372 individuals (140 IDP)			<b>\$177,536</b>	
		<b>Tooz Khurmato</b> 280 HH / 1,680 individuals (120 IDP and 160 returnees)			<b>\$355,071</b>	
		<b>TOTAL: 2,130 HH / 12,780 individuals</b>			<b>TOTAL: \$2,701,078</b>	
<b>WASH</b>	Operate and sustain quality services meeting minimum cluster standards of water and sanitation services and good hygiene practices to conflict affected populations.	<ul style="list-style-type: none"><li>Regular water provision</li><li>Wastewater desludging</li><li>Solid waste disposal and management</li></ul>	Baquba Al-Baaj Al-Hatra Sinjar		4,000 (all IDP OOC) 6,500 (1,500 IDP OOC, 5,000 returnee) 2,500 (1,500 IDP OOC, 1,000 returnee) 15,000 (10,000 IDP OOC, 5,000 returnee)  <b>TOTAL: 28,000 (17,000 OOC IDPs, 11,000 returnees)</b>	<b>\$850,000</b>

	Cluster Priority/Objective	Prioritised activities	Location		Estimated beneficiaries	Budget
			District	Sub-district		
WASH (cntd.)	Ensure provision of immediate WASH services and proper hygiene practices for conflict affected populations out of camps, while prioritizing innovative, sustainable, and cost-effective interventions when appropriate and sustainability through partnership with local actors and authorities.	<ul style="list-style-type: none"> <li>Rehabilitation of dysfunctional water and sanitation infrastructure for immediate water and sanitation access</li> <li>Maintenance of existing water supply and sanitation systems to ensure continued functionality</li> <li>Hygiene promotion and hygiene kit distribution - in kind</li> </ul>	Dibis Al-Baaj Al-Hatra Sinjar Balad Samarra TooZ Khurmato		2,000 (all IDP OOC) 15,000 (all returnees) 16,000 (all returnees) 15,000 (all returnees) 5,100 (100 IDP OOC, 5,000 returnees) 4,500 (1,000 IDP OOC, 3,500 returnee) 4,400 (400 IDP OOC, 4,000 returnees)  <b>TOTAL: 62,000 (3,500 OOC IDPs, 58,500 returnees)</b>	<b>\$1,650,000</b>
General Protection	<p><b>Emergency and/or full case management</b>, including through identification and <b>referrals</b> to multi-sectoral interventions (livelihood, multipurpose cash, etc.) and <b>cash for protection</b>, as well as <b>PSS</b> for adults.</p> <p><b>Provision of legal assistance:</b> civil documentation, family law, HLP, and detention</p> <p><b>Community-based activities</b></p>	<ul style="list-style-type: none"> <li>Protection Monitoring HH level*</li> <li>Case Management (through community centres and mobile teams)</li> <li>Cash for protection</li> <li>Referrals of cases (emergency cash)</li> <li>Referrals of cases (referral support to services)</li> <li>Legal assistance (detention representation)</li> <li>Legal assistance (documentation and HLP)</li> <li>Psychosocial Support</li> <li>Community-based group activities</li> </ul> <p><i>*Selected IHF partners also part of the NPC PMS will be required to conduct community-level monitoring, as per PMS framework and appropriate).</i></p>	Al-Baaj Sinjar  Hatra Baquba  Balad, Samarra TooZ Khurmato	Al-Qahtanya Al-Qairawan, Al-Shamal Markaz Hatra Markaz Baquba, Beni saad	<p><b>20,000-25,000 direct beneficiaries to be supported through combined protection activities targeting 38,000 individuals<sup>3</sup></b></p> <p><b>Al-Baaj</b> 2,600 IDPs out of camp and 3,705 returnees</p> <p><b>Sinjar</b> 2,660 IDPs out of camp and 4,940 returnees</p> <p><b>Hatra</b> 1,995 IDPs out of camp and 4,940 returnees</p> <p><b>Balad</b> 3,705 returnees</p> <p><b>Baquba</b> 1,330 IDPs out of camp</p> <p><b>Samarra</b> 2,660 IDPs out of camp and 3,705 returnees</p> <p><b>TooZ Khurmato</b> 1,995 IDPs out of camp and 3,705 returnees</p>	<b>\$1,300,000</b>

<sup>3</sup> 38,000 is the combined target of different protection activities estimated to benefit 20,000-25,000 direct beneficiaries (note: some of them are expected to benefit from multiple protection activities). The targets per district are recommendations based on needs, previous protection achievements and priorities for the GP in HRP 2021 and HRP 2022.

	Cluster Priority/Objective	Prioritised activities	Location		Estimated beneficiaries	Budget
			District	Sub-district		
GBV	Vulnerable out of camps IDPs and returnees have access to specialized protection services and community-based interventions to address risks to their physical safety and well-being	<ul style="list-style-type: none"> <li>• GBV case management</li> <li>• Provision of dignity kits</li> <li>• Legal assistance for GBV survivors</li> <li>• Cash for protection - GBV survivors</li> <li>• Structured psychosocial support</li> <li>• Income generation support to counter negative coping mechanism and improve resilience of the survivors</li> <li>• GBV community awareness raising &amp; sensitization</li> </ul>	Baquba  Al-Hatra Al-Baaj	Beni-Saad, Buhriz  Markaz al-Hatra, Al-Qahtania Markaz Al-Baaj	<b>19,000- 24,000 IDPs out-of-camps IDPs and returnees</b>  <b>Baquba</b> 6,000-8,000  <b>Al-Hatra and Al-Baaj</b> 13,000-16,000	<b>\$1,300,000</b>
CP	Vulnerable out of camp IDPs and returnees have access to specialized child protection services, assistance to secure civil documentation and community-based interventions to address risks to their physical safety, well-being, and social integration	<ul style="list-style-type: none"> <li>• Comprehensive case management services and structured psychosocial support services to children adolescents, supporting caregivers and parents positive parenting sessions and community outreach.</li> <li>• Referral to specialized services</li> <li>• Establish &amp; strengthening of Community Based Child Protection Structures</li> <li>• Assistance to secure civil documentation</li> <li>• Develop sustainable local capacities for child protection, including community volunteers on case management; community-based child protection mechanisms (CBCPM) to prevent and mitigate child protection risks in non-camp IDPs settings</li> </ul>	Baquba Dibis Balad Samarra Tooz Khurmato Sinjar Al-Hatra Al-Baaj		<b>13,500 individuals, including 9,500 children and 4,000 adults</b>  <b>Baquba</b> 200 IDPs out of camp  <b>Dibis</b> 220 IDPs out of camp and 100 returnees  <b>Balad</b> 140 IDPs out of camp and 1,500 returnees  <b>Samarra</b> 300 IDPs out of camp and 500 returnees  <b>ToozKhormato</b> 550 IDPs out of camp  <b>Sinjar</b> 1,000 IDPs out of camp and 2,800 returnees  <b>Al-Hatra</b> 200 IDPs out of camp and 3,000 returnees  <b>Al-Baaj</b> 1,000 IDPs out of camp and 1,550 returnees	<b>\$1,400,000</b>



## Section 5: Eligibility Parameters/Guidance to Applicants

### Proposal Preparation

1. All project proposals should be submitted via the IHF Grant Management System (GMS) (<https://cbpf.unocha.org>) **by Wednesday, 8 December 2021 at 23:59 (Iraq time). Any submission after this date will not be accepted.** GMS registration is obligatory for all eligible partners prior to the project proposal submission with **due diligence component approved.** GMS is a web-based platform that supports the management of the entire grant life cycle for the IHF.
2. Once you complete your registration on the GMS, please log into CBPF GMS Support portal (<http://gms.unocha.org/content/partner>) and follow the instructions on how to submit a project proposal.
3. Project proposals should be prepared in line with the objectives of this Allocation Strategy and Annex. This needs to be supported by clear log frames with outcomes, outputs, SMART indicators, and detailed activities. Please refer to the CBPF Operational Handbook [Annex 8](#) for a sample Project Proposal Template (available at <https://www.unocha.org/our-work/humanitarian-financing/country-based-pooled-funds-cbpf/cbpf-guidelines>).
4. Partners should consult with relevant cluster coordinators during the project proposal preparation phase to receive further details of the cluster priorities for the allocation.

### Budget Preparation

5. All project proposals must have a detailed budget outlining all the project-related expenditures under relevant budget lines. Please refer to the CBPF Operational Handbook [Annex 13](#) Project Budget Template for further details.
6. Budget proposals must reflect the correct and fair budget breakdown of the planned costs and clearly outline units, quantities, and percentages. When budget lines contain costs of multiple items greater than US\$10,000 a budget breakdown should be included in the GMS BOQ tool, listing item, unit, quantity, cost (per unit and total cost).
7. Provide a budget narrative (as an essential component of the budget) that clearly explains the object and the rationale of any budget line. For example, shared costs, large/expensive assets, and costs/equipment required to support the regular operation of the implementing partner, are clear cases where the provision of details will be necessary in the budget narrative.
8. Project proposals that do not meet the above requirements or with missing financial and budgeting information (including sub-budgets of sub-implementing/consortium partners) will not make it to the strategic review stage and will be rejected.
9. For further guidance on budgeting (eligible and ineligible costs, direct or indirect costs), please also refer to the CBPF Operational Handbook pages 39-44.

### Start date and eligibility of expenditure

10. The HFU will liaise with the implementing partner to determine the start date of the project. The agreed-upon start date will be included in the Grant Agreement. Under the updated Grant Agreement, the earliest possible start date of the project (and validity of the expenditure) is the date of budget approval in GMS. However, the Grant Agreement is valid and becomes legally binding only after both parties have signed it.
11. Upon signature by the HC, the HFU notifies the partner that the project has been approved and sends the agreement for counter signature. Once the partner has countersigned, the agreement will be sent to OCHA Headquarters for Executive Officer Approval.

### Prioritization of Projects

The prioritization of project proposals is made in accordance with the programmatic framework and focus described above, and based on the IHF Allocation Criteria (see section 4.2 on page 6 of the [IHF Operational Manual](#)), which will be reflected in the Strategic Review scorecard of this allocation.

## Section 6: Process and Timeline

### 6.1 Allocation Strategy Development Process:

The allocation round uses the reserve allocation modality, allowing for a fast-tracked but competitive allocation process, with strategic scope and prioritization criteria developed based on relevant needs and response gap analyses conducted by the Iraq Inter-Cluster Coordination Group (ICCG), as well as a funding analysis based on the FTS data. Consolidated ICCG and OCHA inputs informed the determination of proposed demographic and geographic targeting, sectoral and cross-cutting priorities, which were ultimately endorsed by the Humanitarian Coordinator in consultation with the IHF Advisory Board.

<b>6.2 Allocation Timeline</b>			
	Workflow step	Date	Responsible body
<b>Step 1: Allocation strategy development</b>	<ul style="list-style-type: none"> <li>HC and AB agree on strategic priorities and the timeline for the allocation</li> <li>Allocation priorities and timeline and shared with the ICCG and relevant clusters provide inputs on cluster priorities, targets, and activities</li> <li>Draft strategy development</li> <li>Allocation Strategy submitted for HC/AB endorsement and finalized upon HC approval</li> </ul>	By 9 November	HC, AB, OCHA,
		10-16 November	Clusters
		10-22 November	OCHA HFU
		23-24 November	HC, AB, OCHA HFU
<b>Step 2: Submission of project proposal</b>	<ul style="list-style-type: none"> <li>Allocation Launch – Call for Proposals</li> <li>Proposal development and submission</li> </ul>	24 November – 8 December	OCHA HFU Partners
<b>Step 3: Strategic and Technical Reviews</b>	<ul style="list-style-type: none"> <li>Pre-Strategic Review</li> <li>Strategic and Technical Review (STR)</li> <li>Partner Proposal Revision and Adjustments (rolling basis)</li> <li>Final Technical and Finance Review (rolling basis)</li> </ul>	9 December	OCHA HFU
		10-15 December	Clusters, OCHA HFU
		15-20 December	Partners
		20-22 December	Clusters, OCHA HFU
<b>Step 4: Final approval by the HC</b>	<ul style="list-style-type: none"> <li>Budget Approval</li> <li>Grant Agreement (GA) preparation</li> <li>HC signs GA / Final approval</li> <li>GA countersignature</li> <li>GA financial clearance (EO signature)</li> </ul>	By 26 December 27 December 28 December 29 December 4 January	OCHA HFU OCHA HFU HC Partners OCHA HQ
<b>Step 5: Disbursement</b>	<ul style="list-style-type: none"> <li>Disbursement</li> </ul>	From 11 January	OCHA HQ
<b>Section 7: HFU Contacts and Complaints</b>			
<b>7.1 Key Contacts</b>			
<p>Up-to-date contact details of cluster and inter-sectoral working group coordinators can be found at: <a href="https://docs.google.com/spreadsheets/d/107msNkS9iAg1AyWpdDkNjDcUMmgHGktm3-wW7oqeY/edit#gid=0">https://docs.google.com/spreadsheets/d/107msNkS9iAg1AyWpdDkNjDcUMmgHGktm3-wW7oqeY/edit#gid=0</a></p> <p>Up-to-date contact details of OCHA Iraq Humanitarian Financing Unit (HFU) can be found at: <a href="https://www.unocha.org/iraq/contacts">https://www.unocha.org/iraq/contacts</a></p>			
<b>7.2 Complaints Mechanism</b>			
<p>Complaints from stakeholders regarding the IHF allocation process should be sent to <a href="mailto:feedback-ihpf@un.org">feedback-ihpf@un.org</a>. The OCHA Head of Office will receive, address, and refer any critical issues to the HC for decision-making.</p>			

**Annex 1: List of IHF-eligible partners (as of 24 November 2021) – see next page**

#	Organization	Organization Type
1	Action Contre la faim (ACF)	International NGO
2	Agency for Technical Cooperation and Development (ACTED)	International NGO
3	Al-Mesalla Organization for Human Resources Development (Al-Mesalla)	National NGO
4	Arbeiter Samariter Bund (ASB)	International NGO
5	Arche Nova E.V, initiatives for people in Need (AN)	International NGO
6	Bermen Overseas Research and Development Association (BORDA)	International NGO
7	Blumont (Blumont)	International NGO
8	CARE Deutschland e.v (CARE)	International NGO
9	Cesvi, Italian Agency for Development Cooperation (CESVI)	International NGO
10	Charita Ceska Republika/CCR (CCR)	International NGO
11	Christian Aid Program Nohadra Iraq (CAPNI)	National NGO
12	Civil Development Organization (CDO)	National NGO
13	Cooperazione Internazionale - COOPI (COOPI)	International NGO
14	DAD for Human Rights and Civil Sociality Affair (DAD)	National NGO
15	Dan Church Aid (DCA)	International NGO
16	Danish Refugee Council (DRC)	International NGO
17	Dary Human Organization (DARY)	National NGO
18	Democracy and Human Rights Development Center (DHRDC)	National NGO
19	Doctors Aid Medical Activities (DAMA)	National NGO
20	Dorcas Aid International (DAI)	International NGO
21	EMERGENCY (EMERGENCY)	International NGO
22	Fondation Suisse de Déminage (FSD)	International NGO
23	Food and Agriculture Organization of the United Nations (FAO)	UN Agency
24	French Red Cross (FRC)	Other
25	GOAL (GOAL)	International NGO
26	Green Desert (GD)	National NGO
27	Handicap International (HI)	International NGO
28	Harikar Organization for Protecting and Child Rights (Harikar)	National NGO
29	Heartland Alliance International (HAI)	International NGO
30	HEKS - Hilfswerk der Evangelischen Kirchen Schweiz (HEKS)	International NGO
31	Hilfe zur Selbsthilfe e.V (HELP.e.V)	International NGO
32	Hope Organization for Development and Improvement (HOPE)	National NGO
33	Human Appeal (HA)	International NGO
34	Human for Human Organization (HFHO)	National NGO
35	Human Relief Foundation (HRF)	International NGO
36	Information Management and Mine Action Programs (iMMAP)	International NGO
37	International Medical Corps UK (IMC UK)	International NGO
38	International Organization for Migration (IOM)	UN Agency
39	International Rescue Committee (IRC)	International NGO
40	INTERSOS (INTERSOS)	International NGO
41	Iraqi Al-Amal Association (IAA)	National NGO

#	Organization	Organization Type
42	Iraqi Health Access Organization (IHAO)	National NGO
43	Islamic Relief Worldwide (IRW)	International NGO
44	Janat Al-Frdaws Foundation For Relief & Development (JF)	National NGO
45	Jiyan Foundation for Human Rights (Jiyan)	International NGO
46	Kurdistan Reconstruction and Development Society (KURDS)	National NGO
47	Lutheran World federation (LWF)	International NGO
48	Malteser International (Malteser International)	International NGO
49	MEDAIR (MEDAIR)	International NGO
50	Médecins Du Monde (MDM)	International NGO
51	Mercy Corps (MC)	International NGO
52	Mission East (ME)	International NGO
53	NGO Coordination Committee for Iraq (NCCI)	International NGO
54	Nonviolent Peaceforce (NP)	International NGO
55	Norwegian Church Aid (NCA)	International NGO
56	Norwegian Refugee Council (NRC)	International NGO
57	OXFAM (OXFAM)	International NGO
58	Pekawa Organization for Humanitarian Services and Environmental Development (Pekawa)	National NGO
59	People in Need (PIN)	International NGO
60	POINT (PO)	International NGO
61	Polish Humanitarian Action (PAH)	International NGO
62	Première Urgence - Aide Médicale Internationale (PU-AMI)	International NGO
63	Qatar Red Crescent Society (QRCS)	Other
64	Rehabilitation, Education and Community Health (REACH)	National NGO
65	Relief International (RI)	International NGO
66	Sabe' Sanabul Organization for Relief and Development (SSORD)	National NGO
67	Sahara Economic Development Organization (SEDO)	National NGO
68	Samaritan's Purse International Relief /SPIR (SPIR)	International NGO
69	Save the Children Fund (SC)	International NGO
70	Secours Islamique France (SIF)	International NGO
71	Solidarités International (SI)	International NGO
72	Sorouh for Sustainable Development Foundation (SSDF)	National NGO
73	STICHTING CORDAID (CORDAID)	International NGO
74	Stichting ZOA (SZOA)	International NGO
75	SWEDO The Swedish Development Aid Organization (SWEDO)	International NGO
76	TEARFUND (TEARFUND)	International NGO
77	Terre des homes Italia (TDH It)	International NGO
78	Terre des Hommes Lausanne (TDH-L)	International NGO
79	The Engineering Association for Development and Environment (EADE)	National NGO
80	The Justice Center to Support Marginalized Groups in Iraq (Justice Center)	National NGO
81	Triangle Génération Humanitaire (TGH)	International NGO
82	UN PONTE PER (UPP)	International NGO
83	UN Women (UNWOMEN)	UN Agency
84	United Nations Children's Fund (UNICEF)	UN Agency
85	United Nations Educational, Scientific and Cultural Organization (UNESCO)	UN Agency
86	United Nations High Commissioner for Refugees (UNHCR)	UN Agency

#	Organization	Organization Type
87	United Nations Human Settlements Programme (UN-HABITAT)	UN Agency
88	United Nations Industrial Development Organization (UNIDO)	UN Agency
89	United Nations Office for Project Services (UNOPS)	UN Agency
90	United Nations Population Fund (UNFPA)	UN Agency
91	War Child UK (WC)	International NGO
92	Welthungerhilfe (WHH)	International NGO
93	Women Rehabilitation Organization (WRO)	National NGO
94	World Food Programme (WFP)	UN Agency
95	World Health Organization (WHO)	UN Agency
96	World Vision International (WVI)	International NGO
97	Youth Activity Organization (YAO)	National NGO