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 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.

1 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).

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

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 (to be released upon the allocation launch) 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.
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.

<table>
<thead>
<tr>
<th>3.2 Underfunded Priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Women and Girls</strong></td>
</tr>
<tr>
<td><strong>People with Disabilities</strong></td>
</tr>
<tr>
<td><strong>Protection (other aspects)</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.3 Crosscutting Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GBV</strong></td>
</tr>
<tr>
<td><strong>PSEA</strong></td>
</tr>
<tr>
<td><strong>AAP</strong></td>
</tr>
<tr>
<td><strong>Cash and Voucher Assistance</strong></td>
</tr>
<tr>
<td><strong>Localization</strong></td>
</tr>
</tbody>
</table>
## Section 4: Cluster Breakdown and Priorities

### 4.1 Cluster Breakdown/ Envelopes

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

### 4.2 Cluster Priorities

See the next page for the cluster priorities.

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2 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.
<table>
<thead>
<tr>
<th>Cluster Priority/Objective</th>
<th>Prioritised activities</th>
<th>Location</th>
<th>Estimated beneficiaries</th>
<th>Budget</th>
</tr>
</thead>
</table>
| Health                                                                                   | To ensure fair access to the quality primary health care services for the out-of-camp IDPs and vulnerable returnees  
• Ensuring availability of skilled health personnel  
• Supporting the PHCCs/MMCs with essential medication, NCDs, medical equipment, laboratory items and medical supplies.  
• Supporting referral services to the secondary and tertiary health facilities.  
• Supporting the logistical component of running a PHCC/MMC.  
• Community-based prevention activities include outreach services | Baquba              | 30,000  
Baquba          | 20,000  
Total of 90,000  
Total of 60,000  | $2,642,500  |
|                                                                                         | Supporting PHCCs and MMCs to provide the following activities:  
- Ensuring availability of skilled health personnel  
- Supporting the PHCCs/MMCs with essential medication, NCDs, medical equipment, laboratory items and medical supplies.  
- Supporting referral services to the secondary and tertiary health facilities.  
- Supporting the logistical component of running a PHCC/MMC.  
- Community-based prevention activities include outreach services | Balad               | Balad        
Al Ishaqi        
Al Mazarie       | 15,000  
|                                                                                         | Samarra             | Samarra       
Al Huish         
Tresha           | 148,000  
|                                                                                         | Tooz Khormatu       | 140,000 + all health facilities in the district | $140,000  |
|                                                                                         | Dibis               | Dibis         | 140,000  
|                                                                                         | Al-Hatra            | Hatra         
Tal-Abta         
Muhallabeya      | 410 HH / 2,460 individuals  
(50 IDP and 360 returnees)  
|                                                                                         | Sinjar              | Tal Banat     
Tal Qasab        | 450 HH / 2,700 individuals  
(50 IDP and 400 returnees)  
|                                                                                         | Al Baaj             | Al Wardeya    | 350 HH / 2,100 individuals  
(50 IDP and 300 returnees)  
|                                                                                         | MPCA (based on the updated Cash Working Group guidance below)  
Transfer value: 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.  
Frequencies:  
R2 category: This is the category that currently is receiving 2 months of assistance. For 2022, | Al-Baaj             | TBD – Based on partner’s assessment | Al-Baaj          | 410 HH / 2,460 individuals  
(50 IDP and 360 returnees)  
|                                                                                         | Al-Hatra            | 450 HH / 2,700 individuals  
(50 IDP and 400 Returnees)  
|                                                                                         | Sinjar              | 350 HH / 2,100 individuals  
(50 IDP and 300 returnees)  
|                                                                                         | MPCA (based on the updated Cash Working Group guidance below)  
Transfer value: 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.  
Frequencies:  
R2 category: This is the category that currently is receiving 2 months of assistance. For 2022,
### IHF 2021 First Reserve Allocation Strategy

**Cluster Priority/Objective**

<table>
<thead>
<tr>
<th>Cluster Priority/Objective</th>
<th>Prioritised activities</th>
<th>Location</th>
<th>Estimated beneficiaries</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>District</td>
<td>Sub-district</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td>Operate and sustain quality services meeting minimum cluster standards of water and sanitation services and good hygiene practices to conflict affected populations.</td>
<td>Baquba, Al-Baaj, Al-Hatra, Sinjar</td>
<td>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)</td>
<td>$850,000</td>
</tr>
<tr>
<td></td>
<td>• Regular water provision</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Wastewater desludging</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Solid waste disposal and management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>R3 category:</strong> This is the category that currently is receiving 3 months of assistance. For 2022, beneficiaries falling under this category will receive 4 transfers monthly (4 months in total). So, each month they will receive 440,000 IQD. Again, based on the RCT conducted by the CLCI, we have seen that this category can have a greater impact to meet their basic needs and give a bit more time to allow the referrals to longer-term solutions (Graduation to livelihoods, referrals to other sectors, Durable solutions, and social protection). This is the category with higher level of vulnerabilities, so probably they have less chances to invest in income generating activities by themselves and they would require further assistance from other types of support.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>R3 category:</strong> This is the category that currently is receiving 3 months of assistance. For 2022, 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.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cluster Priority/Objective</td>
<td>Prioritised activities</td>
<td>Location</td>
<td>Estimated beneficiaries</td>
<td>Budget</td>
</tr>
<tr>
<td>---------------------------</td>
<td>------------------------</td>
<td>----------</td>
<td>-------------------------</td>
<td>--------</td>
</tr>
</tbody>
</table>
| **WASH (cntd.)**          | • Rehabilitation of dysfunctional water and sanitation infrastructure for immediate water and sanitation access  
• Maintenance of existing water supply and sanitation systems to ensure continued functionality  
• Hygiene promotion and hygiene kit distribution - in kind | 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) | $1,650,000 |
| **General Protection**    | • Protection Monitoring HH level*  
• Case Management (through community centres and mobile teams)  
• Cash for protection  
• Referrals of cases (emergency cash)  
• Referrals of cases (referral support to services)  
• Legal assistance (detention representation)  
• Legal assistance (documentation and HLP)  
• Psychosocial Support  
• Community-based group activities | Al-Baaj  
Sinjar  
Hatra  
Baquba  
Balad, Samarra  
Tooz Khurmato  
Al-Qahtanya  
Al-Qairawan, Al-Shamal  
Markaz Hatra  
Markaz Baquba, Beni saad | 20,000-25,000 direct beneficiaries to be supported through combined protection activities targeting 38,000 individuals³  
Al-Baaj  
2,600 IDPs out of camp and 3,705 returnees  
Sinjar  
2,660 IDPs out of camp and 4,940 returnees  
Hatra  
1,995 IDPs out of camp and 4,940 returnees  
Balad  
3,705 returnees  
Baquba  
1,330 IDPs out of camp  
Samarra  
2,660 IDPs out of camp and 3,705 returnees  
Tooz Khurmato  
1,995 IDPs out of camp and 3,705 returnees | $1,300,000 |

*Selected IHF partners also part of the NPC PMS will be required to conduct community-level monitoring, as per PMS framework and appropriate.  

³ 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.
<table>
<thead>
<tr>
<th>Cluster Priority/Objective</th>
<th>Prioritised activities</th>
<th>Location</th>
<th>Estimated beneficiaries</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>GBV: Vulnerable out of camps IDPs and returnees have access to specialized protection</td>
<td>• GBV case management&lt;br&gt;• Provision of dignity kits&lt;br&gt;• Legal assistance for GBV survivors&lt;br&gt;• Cash for protection - GBV survivors&lt;br&gt;• Structured psychosocial support&lt;br&gt;• Income generation support to counter negative coping mechanism and improve resilience of the survivors&lt;br&gt;• GBV community awareness raising &amp; sensitization</td>
<td>Baquba&lt;br&gt;Al-Hatra&lt;br&gt;Al-Baaj</td>
<td>19,000-24,000 IDPs out-of-camps IDPs and returnees</td>
<td>$1,300,000</td>
</tr>
<tr>
<td>services and community-based interventions to address risks to their physical safety and well-being</td>
<td></td>
<td>Beni-Saad, Buhriz&lt;br&gt;Markaz al-Hatra, Al-Qahtania&lt;br&gt;Markaz Al-Baaj</td>
<td>Baquba 6,000-8,000</td>
<td>Al-Hatra and Al-Baaj 13,000-16,000</td>
</tr>
<tr>
<td>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</td>
<td>• Comprehensive case management services and structured psychosocial support services to children adolescents, supporting caregivers and parents positive parenting sessions and community outreach.&lt;br&gt;• Referral to specialized services&lt;br&gt;• Establish &amp; strengthening of Community Based Child Protection Structures&lt;br&gt;• Assistance to secure civil documentation&lt;br&gt;• 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</td>
<td>Baquba&lt;br&gt;Dibis&lt;br&gt;Balad&lt;br&gt;Samarra&lt;br&gt;Tooz Khurmato&lt;br&gt;Sinjar&lt;br&gt;Al-Hatra&lt;br&gt;Al-Baaj</td>
<td>13,500 individuals, including 9,500 children and 4,000 adults</td>
<td>$1,400,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Baquba 200 IDPs out of camp&lt;br&gt;Dibis 220 IDPs out of camp and 100 returnees&lt;br&gt;Balad 140 IDPs out of camp and 1,500 returnees&lt;br&gt;Samarra 300 IDPs out of camp and 500 returnees&lt;br&gt;Tooz Khurmato 550 IDPs out of camp&lt;br&gt;Sinjar 1,000 IDPs out of camp and 2,800 returnees&lt;br&gt;Al-Hatra 200 IDPs out of camp and 3,000 returnees&lt;br&gt;Al-Baaj 1,000 IDPs out of camp and 1,550 returnees</td>
<td>Sinjar 1,000 IDPs out of camp and 2,800 returnees&lt;br&gt;Al-Hatra 200 IDPs out of camp and 3,000 returnees&lt;br&gt;Al-Baaj 1,000 IDPs out of camp and 1,550 returnees</td>
<td></td>
</tr>
</tbody>
</table>
### 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](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](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](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.
### 6.2 Allocation Timeline

<table>
<thead>
<tr>
<th>Step 1: Allocation strategy development</th>
<th>Workflow step</th>
<th>Date</th>
<th>Responsible body</th>
</tr>
</thead>
<tbody>
<tr>
<td>• HC and AB agree on strategic priorities and the timeline for the allocation</td>
<td>By 9 November</td>
<td>HC, AB, OCHA, Clusters</td>
<td></td>
</tr>
<tr>
<td>• Allocation priorities and timeline shared with the ICCG and relevant clusters provide inputs on cluster priorities, targets, and activities</td>
<td>10-16 November</td>
<td>OCHA HFU HC, AB, OCHA HFU</td>
<td></td>
</tr>
<tr>
<td>• Draft strategy development</td>
<td>10-22 November</td>
<td>OCHA HFU HC, AB, OCHA HFU</td>
<td></td>
</tr>
<tr>
<td>• Allocation Strategy submitted for HC/AB endorsement and finalized upon HC approval</td>
<td>23-24 November</td>
<td>OCHA HFU HC, AB, OCHA HFU</td>
<td></td>
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</tbody>
</table>

| Step 2: Submission of project proposal | Allocation Launch – Call for Proposals | 24 November – 8 December | OCHA HFU Partners |

<table>
<thead>
<tr>
<th>Step 3: Strategic and Technical Reviews</th>
<th>Pre-Strategic Review</th>
<th>9 December</th>
<th>OCHA HFU Clusters, OCHA HFU Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strategic and Technical Review (STR)</td>
<td>10-15 December</td>
<td>OCHA HFU Clusters, OCHA HFU Partners</td>
<td></td>
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<tr>
<td>• Partner Proposal Revision and Adjustments (rolling basis)</td>
<td>15-20 December</td>
<td>OCHA HFU Clusters, OCHA HFU Partners</td>
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<tr>
<td>• Final Technical and Finance Review (rolling basis)</td>
<td>20-22 December</td>
<td>OCHA HFU Clusters, OCHA HFU Partners</td>
<td></td>
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</tbody>
</table>

<table>
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<tr>
<th>Step 4: Final approval by the HC</th>
<th>Budget Approval</th>
<th>By 26 December</th>
<th>OCHA HFU OCHA HFU HC Partners OCHA HQ</th>
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<tbody>
<tr>
<td>• Grant Agreement (GA) preparation</td>
<td>27 December</td>
<td>OCHA HFU OCHA HFU HC Partners OCHA HQ</td>
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<tr>
<td>• HC signs GA / Final approval</td>
<td>28 December</td>
<td>OCHA HFU OCHA HFU HC Partners OCHA HQ</td>
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<tr>
<td>• GA countersignature</td>
<td>29 December</td>
<td>OCHA HFU OCHA HFU HC Partners OCHA HQ</td>
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<tr>
<td>• GA financial clearance (EO signature)</td>
<td>4 January</td>
<td>OCHA HFU OCHA HFU HC Partners OCHA HQ</td>
<td></td>
</tr>
</tbody>
</table>

| Step 5: Disbursement | Disbursement | From 11 January | OCHA HQ |

### Section 7: HFU Contacts and Complaints

#### 7.1 Key Contacts

Up-to-date contact details of cluster and inter-sectoral working group coordinators can be found at: [https://docs.google.com/spreadsheets/d/107msNkS9iAg1AyWpdDkNjnIDcUMmgHGktm3-w7oweY/edit#gid=0](https://docs.google.com/spreadsheets/d/107msNkS9iAg1AyWpdDkNjnIDcUMmgHGktm3-w7oweY/edit#gid=0)

Up-to-date contact details of OCHA Iraq Humanitarian Financing Unit (HFU) can be found at: [https://www.unocha.org/iraq/contacts](https://www.unocha.org/iraq/contacts)

#### 7.2 Complaints Mechanism

Complaints from stakeholders regarding the IHF allocation process should be sent to [feedback-ihpf@un.org](mailto:feedback-ihpf@un.org). The OCHA Head of Office will receive, address, and refer any critical issues to the HC for decision-making.