

**Testimony by
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**Before the Senate Foreign Relations
Subcommittee on the Middle East and South Asia
Hearing on
“The Return and Resettlement of Displaced Iraqis”**

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**THE INVISIBLE CRISIS:
An On-the-Ground Perspective on Iraqi Refugees and IDPs**

Chairman Casey, Senator Risch, members of the subcommittees, I am Nancy Aossey, President and CEO of International Medical Corps, a private, nonprofit, non-governmental organization headquartered in Los Angeles, California, that has been working continuously in Iraq since the spring of 2003 and is currently assisting Iraqi refugees in Jordan, Syria and Lebanon.

Thank you for the invitation to testify and the opportunity to appear before you. We applaud your decision to conduct this hearing on the plight of the millions of Iraqis forced from their homes over the past six years.

I have led International Medical Corps for the past 23 years since shortly after its founding in 1984. I would like to share with you today our unique perspective as a humanitarian assistance organization that has worked for nearly six years with displaced Iraqis and their families both on the ground in Iraq and in the neighboring countries. International Medical Corps’ work in the region seeks to promote self-reliance and advance long-term development by targeting four key sectors: health, humanitarian assistance, capacity building, and democracy and governance.

International Medical Corps was founded by volunteer doctors and nurses to train mid-level health care workers in Afghanistan. We are now a global humanitarian organization dedicated to saving lives and relieving suffering of those affected by war, natural disaster and disease and to delivering vital health care services that incorporate capacity building of our counterparts. International Medical Corps helps people return to self-reliance by enabling the development of essential skills for health, livelihoods, rehabilitation and service delivery. We implement major emergency relief and longer term transitional and development programs that provide comprehensive health and nutrition services, rehabilitate infrastructure, train local personnel and enhance community participation and development in more than 20 countries worldwide. Those countries today include Iraq, Jordan, Syria and Lebanon, where the overwhelming majority of the displaced Iraqis currently reside.

At your request, I will focus my testimony today on the present day realities in the region for the displaced Iraqi population, how I believe the process of return and resettlement will proceed and how the United States can best play a constructive role in coordination with the Iraqi government and the international community. I will conclude with recommendations to the Administration for addressing the current crisis.

My comments are based on International Medical Corps' considerable experience in dealing with the current crisis—our experience is certainly among the broadest and deepest of the non-governmental, humanitarian relief organizations operating in the Middle East region. Although exact numbers are difficult to obtain, the United Nations High Commissioner for Refugees (UNHCR) estimates the current total displacement in the region at 4.7 million people. Of that number, approximately 2.7 million have been displaced inside Iraq, and up to 2 million refugees are estimated to have fled to neighboring countries.

International Medical Corps has been in Iraq without interruption since the spring of 2003, and has operated extensively in all of the country's 18 governorates. We have worked in the region, providing assistance to a target population of 3 million inside Iraq and are currently serving a beneficiary population of nearly 200,000 Iraqi refugees in Syria, Jordan and Lebanon. We have implemented programs in these areas totaling over \$150 million as of December 2008.

We currently have more than 500 staff members inside Iraq, including 22 expatriates and over 40 visiting technical experts. In Syria, Jordan and Lebanon, we have more than 200 staff, including 13 expatriates. The vast majority of local staff we hire comes from the communities where we work. We have worked in coordination with a variety of US agencies and departments, including the US embassy in Baghdad, the US Agency for International Development (USAID), the US Department of State, as well as with United Nations agencies, international and Iraqi nongovernmental organizations and local religious and tribal leaders.

Despite an extremely difficult environment, International Medical Corps has worked continuously inside Iraq since 2003. In Baghdad, our staff live and work in the so-called "red zone"—the majority of the city that is outside the tightly guarded, high security "green zone" that is home to the US Embassy, the Iraq parliament and the residences and offices of many of the international organizations working in Iraq.

We have been able to work outside the green zone without a heavy security presence. Our ability to do this lies in our disciplined adherence to a few basic "musts". First, we operate on the principle of acceptance of our presence and our work by the local population. Second, we depend on building close ties to the communities where we work. In addition to hiring staff locally, we consult and collaborate with Iraqi institutions, local leaders and groups and government officials at all levels in order to build the necessary support for our relief, development and training efforts. Third, the currency of these relationships is a common understanding and trust. In a very real sense, our word has been our bond.

For example, today in Iraq, International Medical Corps projects build the capacity of the government while concurrently providing direct services to Iraqis. In the health sector, we implement continuing medical education and professional development programs for health

workers, recently, training more than 200 health professionals in anaesthesia, ophthalmology, emergency medicine, psychiatry, and obstetrics/gynaecology. International Medical Corps also responds to emergency situations, including specific incidents that have resulted in displacement. For example, when violence erupted in Mosul in early October 2008, militants forced more than 11,000 of the city's Christians to flee. With financial support from USAID's Office of Foreign Disaster Assistance (OFDA), within 24 hours we procured and delivered emergency food rations, hygiene kits, and household items to displaced families. Also with funding from OFDA, we are assisting the Ministry of Displacement and Migration in operating Returnee Assistance Centers to provide immediate and longer term assistance to internally displaced people and refugee returnees, including registration, protection, legal assistance and ministerial capacity building.

International Medical Corps has used our unique position to conduct original research on the flow of internally displaced Iraqis—especially in and out of Baghdad and also within Baghdad itself. Our January 2007 report on displacement in Baghdad was among the very first to document the gravity and scope of the violence-driven shifts of populations underway in Iraq. Our role as an American non-governmental, international relief agency working in both Iraq and three neighboring countries hosting some of the largest concentrations of displaced Iraqis gives us a special perspective on the impact of the crisis across the Middle East region.

Despite the size of the problem, the plight of Iraq's displaced people is largely invisible. There are no sprawling tent camps or dramatic airdrops to capture international attention. Instead, the majority of Iraq's displaced population has found shelter quietly, often in the poorest neighborhoods of unfamiliar communities, sometimes with friends and relatives inside Iraq, sometimes amid strangers in an overcrowded foreign city. Most are forced to live on their savings because there is little or no work available. In many cases, the communities hosting the 2.7 million internally displaced Iraqis are as destitute as those they are helping. For the majority of the estimated two million other displaced Iraqis who have sought safety in neighboring countries, work is illegal and livelihood opportunities are extremely limited to non-existent. Because they have fled their country of origin, they are officially known as refugees.

I believe the international community owes a debt of gratitude to those nations of the Middle East that have taken in large numbers of these refugees and accepted the economic, social and political burdens that have come with them—all with limited support from the world at large and from the Government of Iraq. That said, the work of important donor agencies, including USAID, the State Department's Bureau of Populations, Refugees and Migration (PRM) and UN agencies such as the UN Children's Fund (UNICEF) and UNHCR have played important roles in helping ease the suffering.

If there is good news about the crisis of displaced Iraqis in the spring of 2009, it is that the number of those on the move has slowed substantially. According to a February 2009 report by the International Organization for Migration (IOM), the numbers of newly displaced families has dropped from an average of 16,000 per month during most of 2006 and early 2007 to only a few hundred families per month in the final months of 2008. Many of these new displacements stem from specific events, such as militia attacks against Christians in the northern city of Mosul last fall.

The bad news, however, is that all too many of the millions of displaced Iraqis are suffering the predictable ills of substandard life. They are experiencing deteriorating health, plummeting income levels, reduced education, poor, over-crowded living conditions and the psychological weight of living a life on hold, uncertain when it might end.

At a political level, the internal displacement of nearly 10% of its population has a serious impact on Iraq's economic development prospects and saddled the government with daunting social and political problems. Outside Iraq itself, the presence of such a large and economically unproductive refugee population has added an additional burden on host nations already struggling to provide for their own. The pressures of the global economic downturn merely exacerbate the situation, building upon social tensions in countries where citizens suddenly find themselves competing with refugees for such fundamentals as adequate health care. In short, the conditions in which the majority of displaced Iraqis currently live is unsustainable over the long term.

As a real, yet fragile, degree of security has settled over Iraq over the past several months, some of the displaced families have begun to return home. The numbers remains small—just under 300,000 individuals so far, according to the most recent IOM figures. That figure is less than 6% of the total displaced population. Nine of every ten returnees are internally displaced, that is they are returning to their locations of origin from other parts of Iraq. That means the burdens on neighboring countries hosting refugees remains essentially unchanged despite the improved security situation.

Our own internal research tells us the majority of those heading home have cited improved security conditions as their reason for moving back. We also know from historical experience that the majority of people forced to leave their homes prefer to return once conditions on the ground are in place that provide a safe and secure environment. We know too that for some, returning may not be an option, and other durable solutions, including resettlement in another country, must be made available.

While evidence of returns is heartening, I believe we need to be careful not to move too quickly on this front. To push for accelerated returns before the proper conditions are achieved could effectively cause us to exchange existing problems for new, equally complex, and possibly more dangerous, concerns.

THE PROCESS OF RETURN

The process of return poses major challenges to the Government of Iraq. To succeed, it will need the help of the United States and other members of the international community. While the Iraqis have instituted a few support measures to help those returning home, they have been insufficient and only marginally effective. The unfortunate reality is that the Government of Iraq has yet to develop a comprehensive strategy to deal with this issue.

Most importantly, necessary conditions must be met that enable both refugees in neighboring countries and those displaced internally to return home voluntarily, in safety and with dignity. Some of these conditions are already in place. For example, with a popularly elected

government, a constitution and an active parliament, Iraq today is increasingly a nation that functions under the rule of law. Other important conditions are also necessary. I will name just a few:

– **Access to accurate information** is a key concern for displaced Iraqis as they consider returning to their place of origin. We know that displaced populations tend to return in large numbers when they believe they have reliable, accurate and objective information on their locations of origin or habitual residence. It is also clear that refugees most often rely on sources of information they most trust--that is the local community, family, friends and relatives still living in the location of origin.

We believe that improving the flow of credible and independent information is a critical component in helping refugees and internally displaced Iraqis in the decision-making process of when—or if—they should return home. This reality merely underscores the need for a community-based approach to providing information. A forthcoming survey on Iraqi internal displacement, conducted by International Medical Corps in conjunction with the Iraqi Ministry of Displacement and Migration and the United Nations, found that displaced Iraqi individuals and families overwhelmingly turned to the local community for information and even tried to visit themselves where possible. Few, however, turned to local or national authorities or other government channels. We at International Medical Corps have worked to open these channels in order to facilitate the flow of information by setting up a web portal at a returnee acceptance center in Baghdad. The web portal was established in cooperation with local community councils and leaders to provide information on specific Baghdad neighborhoods and share experiences with members of displaced families who have already returned. It also serves as an information source for displaced people to learn about the registration process and learn what they can expect to receive in terms of financial and social benefits upon return.

– There must also be **an acceptable level of security**. Security has improved dramatically in Iraq over the past year, but remains fragile and uncertain. According to a Government Accounting Office (GAO) report on Iraq released earlier this month, the number of insurgent-initiated attacks fell from nearly 180 per day in June of 2007 to 27 per day in January of 2009. The challenge here is to make the security gains sustainable so that security becomes stability—an essential ingredient to ending the displacement crisis successfully. To achieve this requires the continued commitment of the Iraqi government. As the number of US troops decreases, it is of course important to further the ability of the national government to provide security for its citizens. Support for other efforts that promote national reconciliation are also critical in helping to establish a stable and secure environment—for example, efforts that promote inter-religious and inter-sectarian dialogue and understanding.

– The Iraqi government must develop a strategic framework to deal with the returns in a systematic, coordinated manner and be in a position to provide **a package of support** specifically tailored to the needs of those returning, such as a functioning mechanism for resolving disputes over property abandoned in haste. The government must also be able to provide the basic public services to the community at large, including health services and education, and assure the availability of both affordable housing and employment opportunities. The job will not be easy. Both Iraqi refugees and those displaced internally remain in desperate

need of immediate humanitarian assistance ranging from health care, water and food to housing, education and economic opportunities. They will also require longer term assistance to help them rebuild their lives and fully integrate into society.

The Government of Iraq has struggled—and often failed—to meet the needs of the relatively small number of displaced Iraqis who have returned so far. In general, the displaced remain in a precarious situation across Iraq and little attention or effort has been devoted to helping them reintegrate into their original communities. Property issues have been, and will continue to be, an important challenge for those responsible for managing the returns process. Over half of the families who return to their original location report that their homes are seriously damaged or occupied by another family, according to data from the IOM. To succeed in the larger task ahead, the Government of Iraq will need the support of the international community—including the United States, the United Nations and non-government organizations with experience of such crises such as International Medical Corps.

To prepare for a greater flow of returns, the Iraqi government's Ministry of Displacement and Migration has taken some steps. It has opened Returnee Assistance Centers in Baghdad, and others are planned for areas outside the capital. The Iraqi government also provides one-time grants of 1 million dinars per family—an amount equivalent to about \$850—to help ease the financial costs of returning home. Officially, the decision to return rests with the individual displaced families. However, concern has been expressed by a number of international groups supporting displaced Iraqis that the present poor conditions in which the displaced currently live could lead to returns that are not truly voluntary. Mounting political pressure for return from some of the governments involved in the crisis may also result in the displaced returning at a time conditions on the ground may not yet be suitable, safe or sustainable.

Returning to one's place of origin is the preferred durable solution for any displaced population, while recognizing that there need to be options in place for those who feel that they cannot return. But return can only—I repeat, only—occur when Iraqi families feel it is safe and secure to do so. Returns must take place in an environment of confidence, dignity, safety and mutual respect. Conditions for return must also be sustainable. In such an atmosphere, I can assure this committee that International Medical Corps and other non-governmental organizations inside the country will be well-positioned to assist returnees as they meet the many challenges involved in the transition back home to a productive, peaceful life.

While the evidence of returns is heartening, I believe we need to be careful not to move forward too quickly. To push for accelerated returns before the proper conditions are achieved could effectively cause us to exchange existing problems for a new, equally complex—and possibly more dangerous—set of challenges. We must also ensure that other options, such as resettlement in a third country, and integration into current communities, are available to those for whom return is not appropriate.

In the struggle to stabilize Iraq, every year has been heralded as “critical.” Yet, coming after the surge, with provincial and national elections looming, US forces due to withdraw from cities and towns, and a new US administration to take the helm during a time of unprecedented domestic and international economic upheaval—2009 truly promises to be a watershed in the Iraq conflict.

The staying power of Iraqi civil and security institutions, and therefore US investment in building their capacities, will be sorely tested.

THE ROLE OF THE UNITED STATES

After six years of sacrifice and tens of billions of dollars of investment to rebuild Iraq, International Medical Corps believes the United States would be ill-advised, at this important juncture, to reduce US support of Iraq's development process. Technical assistance from the US, the UN and other international agencies and organizations is a must in order to assure robust and fully supported programs that create jobs, stabilize local economies and raise the prospect of a better future for all Iraqis.

There are also compelling reasons why the United States must remain fully engaged in Iraq at this crucial time.

– Because a stable Iraq is vital to the stability of the broader Middle East, the United States must reinforce its efforts to strengthen the Iraqi government's capacity at all levels to respond to the needs of its people, regain their trust and rebuild the kind of strong, prosperous communities that lie at the heart of a stable nation.

– Such efforts are the most effective weapon against a resurgence of extremism. And at a time large numbers of displaced Iraqis weigh the possibility of returning home, effective measures are needed to improve the chances of the successful reintegration of these returnees. If this process of return fails, the result will be heightened social tensions and a very real danger of a new descent into violence.

– It is also important that the United States set an example of moral leadership in helping the Iraqis help the most vulnerable elements of their population—the more than 4.7 million displaced by violence.

I can assure members of this subcommittee there is compelling evidence that the Government of Iraq needs help in this task. I am encouraged that those in key Iraqi government ministries understand this fact and want our help. They have demonstrated a commitment and a willingness to reform. International Medical Corps has experienced this first-hand as it has worked to strengthen the capacity of important ministries, including the Ministry of Displacement and Migration, a key ministry in the process of return.

Currently, however, the majority of Iraqi ministries are crippled by problems of political patronage, unskilled staff, bureaucratic inertia and decision-making processes that are unnecessarily convoluted and highly centralized. The price of such practices is high. I cite just one example: The recently released GAO report on Iraq noted that central government ministries responsible for providing essential services to the Iraqi people managed to spend only 11% of their 2007 budgets. We do not believe such problems should be addressed by sending in battalions of outside advisors, many of whom may not even possess the needed expertise. Our experience tells us that carefully calibrated, targeted assistance deployed to work on well-defined issues is an efficient, cost-effective way to generate meaningful results.

Since 2006, International Medical Corps has been at the forefront of efforts to improve the capacities of these ministries. We have assisted numerous Iraqi ministries in improving their technical, managerial and administrative capacities with the aim of promoting good governance, transparency and improvement in the delivery of essential services to Iraq's citizens. Central to our approach to building the capacity of the Iraqi government to serve its people is the belief that "professional development" is not a one-off event, but rather a continuous process of improvement and growth through the accumulation of skills and ideas.

Most recently, International Medical Corps has been working in partnership with the ministries of Migration and Displacement, Health, and Labor and Social Affairs to design and deliver programs tailored to address each ministry's existing gaps in capacity and improve the skill sets of senior and middle management. The success of our programs in this area has led to an increase in requests from Iraqi ministries for the establishment of direct partnerships. Such partnerships would strengthen staff capacity and ensure that public sector employees possess the skill sets necessary to provide high quality services to the population. To fail to respond to such requests would, in my opinion, be simply irresponsible.

THE REGIONAL PICTURE: HIDDEN SUFFERING, UNSEEN PRESSURES

The estimated 2 million Iraqis who fled to neighboring countries and now wait to come home do not fit the refugee stereotype. They don't live in camps and only a minority has registered with UNHCR. None of the three host countries where International Medical Corps works—Syria, Jordan and Lebanon—has signed the 1951 Refugee Convention, the cornerstone document in international law that defines both the rights of a refugee and the obligations of a hosting country. The result of all this means that Iraqis who have fled to these countries live amid considerable uncertainty.

An International Medical Corps assessment in all three countries conducted in early 2007 found that the majority are living with limited access to health care and education. Having left their homes and jobs behind, many Iraqis have lost a stable income and live in squalid conditions, depending on loans and gifts. Working legally is extremely difficult. Our research found that most Iraqis in exile are extremely vulnerable. Women and children especially show signs of declining health and social isolation. In all three countries, Iraqis have fled insecurity only to face severe poverty and deprivation.

In these countries, International Medical Corps has operated a series of services for refugees, ranging from continuing medical education and continuing professional development programs that target the skills of Iraqi refugee professionals to the distribution of non-food items, such as mattresses, blankets, children's clothing and diapers, to improve living conditions.

To all but the discerning eye, the Iraqi refugees are unseen, many of them swallowed up in the poorer neighborhoods of Damascus and Amman and the southern suburbs of Beirut. The price of relative safety in a foreign land has been steep for an Iraqi refugee population, much of which once considered itself part of a well-educated middle class. In Syria, for example, nearly one-third of the refugees have a college degree, according to UNHCR. One-third expects their

financial resources will last for three months or less. The refugees scattered across the region come from different areas of Iraq, but a majority share a common dream. They want to go home.

Syria

International Medical Corps began working in Syria in 2007 and continues to be the only American, medical, non-government organization authorized or officially registered to operate there. Over half of all Iraqi refugees in the current crisis have fled to Syria, a country that suddenly finds itself host to the world's largest concentration of Iraqis outside of Iraq. Worried about being overwhelmed by the wave of refugees that followed the February 2006 bombing of a holy Shi'ite shrine in Samara, Syrian authorities ended unrestricted entry for Iraqis in the fall of 2007 and implemented visa requirements that allow entry to certain categories, such as academics and their families, students and a limited number of other categories.

Under programs funded by PRM and in collaboration with the Syrian Arab Red Crescent, International Medical Corps operates clinics in four different Syrian communities, focusing on providing comprehensive primary and preventative health care needs for some of the most vulnerable refugees. Over a six month period, International Medical Corps-supported clinics provided nearly 50,000 consultations, an effort that helped ease pressures on Syria's existing health infrastructure—one already hard-pressed to meet the demands of its own citizens.

In the past 18 months, conditions for some refugees have eased following the arrival of several international assistance groups, including UN organizations such as UNHCR, the World Health Organization, the World Food Programme and UNICEF.

I would like to cite an example of the impact assistance from the United States has made at a very personal level. It is the story of a young Iraqi girl named Zainab, whom we saw at an International Medical Corps clinic in Syria. She had acute lymphoblastic leukemia, but had to stop her treatment short because it was so expensive. We approached our US government donor about the possibility of including care for chronic and complicated health issues in its already successful Syria-Iraqi Refugee Assistance Program. Shortly after, a program was launched that brought specialized treatment to people suffering chronic conditions, including Zainab. Although Zainab died of leukemia last December, the program she inspired is saving lives. Three Iraqi women in the program would not otherwise have received care for their high-risk pregnancies and were scheduled for Cesarean-section births to bring their babies into the world safely, thanks to American assistance and the inspiration of a remarkable child.

Jordan

Conditions for Iraqi refugees in Jordan are also difficult. Iraqis in Jordan equal about 8% of the country's own population. Visa requirements have limited the entry of many Iraqis trying to enter the country, while western human rights groups have reported a disproportionate number of young men being turned back at the border. Once in Jordan, life is tenuous for Iraqi refugees. Their legal status is unclear and opportunities for work are severely restricted. Only one in five low-income Iraqis reported having a valid residence permit, according the UNHCR. As in Syria, some Iraqis live off their savings, while others are supported by relatives from outside the

country. According to UNHCR statistics, one in five families is headed by a female—an additional burden in the Arab world—and are often found living among more impoverished elements of society. Despite this, the overwhelming majority of Iraqis recently surveyed in Jordan by UNHCR—95%—said they wanted to return to Iraq only when security conditions had improved.

Much as in Syria, the addition of a large and vulnerable population of Iraqi refugees has strained Jordan's public services, including its health care system. Iraqis have access to the same medical services as Jordanians, but the overall health infrastructure lacks the capacity to provide comprehensive primary health care services to the enlarged population. As the Iraqi refugee population grew, Jordan also opened its schools to Iraqi children.

International Medical Corps' programs in Jordan have serviced the Iraqi refugee population since 2007, while at the same time also providing critical services to vulnerable Jordanians. Working from clinics and mobile units, International Medical Corps provides community level primary and mental health services and is working to boost the ability of Jordan's primary health care providers to deal with mental illness through theoretical and on-the-job training. International Medical Corps also offers pediatric health screenings and facilitates mother-to-mother support groups that deal with health care and other child-rearing issues. Because the women are under stress, we have found these sessions are often emotional. In one such meeting, a woman named Hadaf introduces herself with one sentence. "I am an Iraqi woman; I have no other aim than going home one day." Her comment came in what is called the 'ice breaker', when women tell the other women in the group about themselves in a few sentences. Within minutes all of them are crying, for themselves and the other Iraqi mothers in the room whom they never met before but who share their hardship, their homesickness, and their lost sense of belonging in exile.

The workshops, run by social workers from International Medical Corps and the Jordan River Foundation, address how these women can build positive relationships with their children and discover how to change negative practices. The project is a small but important component of a far larger effort to improve the quality of life for Iraqi refugees. It is funded by UNHCR, UNICEF and PRM. In total, 600 mothers have participated and ten of them eventually will become 'peer mothers' and train others in improving the well-being of their children.

Lebanon

For the estimated 50,000 Iraqi refugees in Lebanon, where International Medical Corps has worked since 2006, conditions appear to have improved over the past year, although they remain arduous. Due to Lebanon's delicate religious and sectarian balance, integrating or legalizing Iraqi refugees is not a political option. The majority of Iraqis in Lebanon are young, single men, not permitted to work legally. A quarter of them are Christian. Prior to February 2008, human rights groups, such as Amnesty International, reported that Lebanese authorities arrested and detained hundreds of Iraqis, who were then held indefinitely on charges of being in the country illegally. The tactic was viewed by many as an apparent attempt to coerce the refugees to return to Iraq. Early last year, the Lebanese government changed course, introducing a program to legalize foreign nationals and offer them year-long residence and work permits; however the costs and necessary bureaucratic steps made the offer difficult to fulfill. Still, according to a June 2008

Amnesty International report, the number of refugees in detention had dropped from about 600 in early 2008 to less than 150 five months later.

Iraqi refugees have settled in various parts of Lebanon, but the majority now lives in Beirut's southern suburbs, an area where the government's law enforcement has been historically weak. A second concentration, mainly comprising Iraqi Christians from Mosul and Baghdad, has come together in the poor Christian neighborhoods of northeast Beirut. Many of the estimated 11,000 Christians fleeing intimidation and violence carried out by militia groups in Mosul ended up in Beirut because of the relative freedom of Christians to follow their faith there. The story of one such family that received support from International Medical Corps helps illustrate the fate of Iraq's Christian minority in Lebanon. The family of five, including two infants, headed by a man named Nawar, managed to escape Mosul with little more than the clothes on their back. They came to Beirut because, like other Christians, they felt it was a safe place to practice their faith. The entire family lives in a one-bedroom apartment with no heating and sporadic electricity. Both Nawar and his mother have health problems, and because Nawar cannot work, they don't have the money to buy the nutrient-rich food his infant sons require. An International Medical Corps mobile medical unit provides free food supplements, clothing, hygiene kits and even complete physical exams to Nawar's family and other refugee families with young children.

IRAQ: ENCOURAGING SECURITY, ELUSIVE STABILITY

International Medical Corps assessment teams first crossed into Iraq from Kuwait in March 2003, amid concerns that heavy fighting would generate a large population of refugees or internally displaced persons (IDPs). As we now know, those population movements only came later—beginning in 2004 and escalating with the rise in sectarian violence, the beginning of al Qaeda operations in western Iraq and a dramatic deterioration of security in many areas of the country.

Changing security landscape and the rise in returns

It is evident that overall living conditions in Iraq have improved. Physical and human security has especially improved in ways we could only hope for just 18 months ago. These dramatic changes in Iraq's internal dynamics have also had a strong effect on the issue of displacement within the country and across its borders. By late 2007, it was clear that displaced Iraqis were beginning to feel confident and safe enough to begin weighing a return to their homes and locations of habitual residence.

Since then, the number of returns has increased steadily, with the most notable rise taking place in Baghdad, where it is estimated that upwards of 31,521 families (or 189,126 individuals) have returned to the governorate, according to the February 2009 IOM Emergency Needs Assessment Report. That constitutes nearly two-thirds of all returnees. According to the same report, returns have also picked up in areas of the country that were once subject to some of the worst of the country's sectarian-based violence. In Diyala, for example, 8,818 families (or 52,908 individuals) have returned, while 4,542 families (or 27,525 individuals) have returned to Anbar.

As noted earlier, issues surrounding property rights represent just one problem displaced Iraqis face as they return home, attempt to reclaim their lives and begin anew. Among the others:

Security—real but fragile

Security continues to be a priority concern for displaced Iraqis as they weigh the possibility of return—whether they be refugees residing outside the country or those who have been displaced inside Iraq. And although there have been major improvements in the last several months, the tangible gains are considered fragile and the perception of displaced population is that it is generally not yet stable enough for them to return to their place of origin. There are also several factors that will test the strength of the existing calm in the months ahead. For example, the Iraqi government's inability to spend money already budgeted coupled with the unexpectedly sharp decline in the price of oil have raised the prospect of cuts in the Iraqi military, which is now the single most important player in maintaining law and order in the country. Another vital component in Iraq's security fabric is the US military presence, which is also expected to decline steadily in numbers. At the same time, tensions are rising between the government and the mainly Sunni militias that have helped keep the peace in Sunni-dominated western Iraq.

The early stages of the return process constitute an especially delicate time, both socially and politically, in a society such as Iraq, so deeply divided along both sectarian and ethnic lines. Significant population movements can easily reignite violence and therefore need to be handled very cautiously. However, the inability to spend money already appropriated for essential services plus worries about shrinking oil revenues could also limit the kind of Iraqi government support needed to ease social tensions, such as new jobs and public services.

Kirkuk—exception to a larger calm

Unlike most of Iraq, security in the key northern city of Kirkuk has not improved and in some areas has actually worsened. It still presents a difficult security challenge for the Government of Iraq. The city has sizable populations of nearly all Iraq's ethnic, religious and linguistic groups, in addition to one-third of Iraq's proven oil deposits. It is also an anomaly in that both its displaced and returnee populations, unlike the rest of Iraq, continue to be highly mixed in their ethnicity, religion and language. Because of its oil, Kirkuk has long been the object of a power struggle between Kurds and Arabs, and the enormity of the economic stakes, coupled with the social tensions, make the issue as delicate as it is complicated.

The call for a more comprehensive approach to the needs of the displaced

Increasing humanitarian aid to those still displaced is needed to avoid so-called push factors—factors driving the displaced from their current location and effectively forcing them to return home. If displaced Iraqis return home because they cannot access basic services in their location of displacement (as is currently the case in many areas), it does not qualify as a voluntary, safe and dignified return. Meeting the immediate humanitarian needs of displaced Iraqis must be kept a priority and cannot be sidelined even in the face of increasing returns.

For those who do choose to return home, assistance must move beyond the current level provided to them—primarily a one-time monetary grant. Returns should be sustainable, and conditions must be in place to make that happen. Basic services, including employment generation activities and such services as psychosocial assistance, vocational and skills training and child development activities, should be extended to populations that host displaced people, as well as vulnerable communities and populations where returns are taking place.

Speaking for an organization with vast experience in the health sector, I can attest that Iraq's health care system has been hit hard by the flight of skilled medical professionals, and important gaps now exist in access to medicine and equipment, while medical facilities have been damaged or neglected. While affecting all Iraqis, this situation disproportionately impacts the internally displaced and other vulnerable populations, where a lack of quality health care increases the spread of disease and worsens the impact of chronic health conditions.

The option of staying put

Because of these and other difficulties, there is evidence to suggest that many of those displaced inside Iraq appear to be considering the option of remaining where they are. A large number of families participating in the national survey on internal displacement said they preferred to integrate locally into their current community rather than return home. Depending on the area of the country, the percentage of families expressing this desire ranged from roughly half to almost 80%, according to preliminary data gathered by International Medical Corps and the Iraqi Ministry of Displacement and Migration.

However, there are also problems for IDPs in trying to settle permanently where they are. For example, there are serious disparities in the level and quality of services offered in different parts of the country. The data gathered through the national survey on internally displaced Iraqis suggest this disparity falls mainly along sectarian lines, with IDPs in predominantly Sunni areas having more difficulty in accessing government benefits and services. Between 70% and 85% of the IDPs questioned during the survey reported they were dependent on some form of assistance as their main source of income.

The fate of minorities

As a country whose land encompasses both the cradle of civilization and some of the region's most well-traveled ancient trade routes, Iraq is home to a generous sprinkling of ethnic, religious and national minorities, including Jews, Christians, Turkomen, Kurds, Yazidis, Palestinians and Mandaeans. With the exception of the Kurds, who govern three northern governorates of Iraq where they constitute a majority of the population, most of Iraq's minorities have suffered disproportionately during the past years of unrestrained violence. As a result, their numbers have declined sharply. Iraq's Ministry of Displacement and Migration estimates nearly half the country's non-Kurdish minority population is no longer in the country. According to a recently released Brookings Institution report on Iraqi minorities, all but a handful of Iraq's few hundred remaining Jews have fled the country, the Turkomen population has dropped by about 75%, the Palestinians by over half and a sizable Christian minority of as many as 1.4 million is now believed to be between 600,000 and 800,000, according to Ministry figures.

Many Christians have taken refuge in Lebanon, while others have sought resettlement to third countries, including the United States, Canada, Australia and Europe.

RECOMMENDATIONS: AN AGENDA FOR FOSTERING STABILITY AND SUSTAINABILITY

While recognizing that humanitarian crises require political solutions, it should also be recognized that addressing Iraq's displacement crisis is a key element in achieving sustainable peace and security in Iraq and the region. The United States must also demonstrate moral leadership in helping to resolve the crisis of Iraqi refugees and internally displaced persons.

How the displacement crisis is handled—by this Administration, the Iraqi government, countries hosting the refugees and the broader international community—will have far reaching consequences. Decisions regarding return, repatriation and resettlement should not be made in haste and must ensure that the best interest of displaced Iraqis, not political pressure, is the guiding factor in determining the appropriate solutions.

An effective strategy will mean ensuring that immediate needs of IDPs, refugees and returnees are met, in addition to longer term planning to develop effective policies that address the underlying social, political, economic and cultural dimensions of the crisis.

Considering the conditions that I have just described, I recommend the following elements be included in US policy toward Iraq:

- 1. Implement a strategy to address the crisis of Iraqi displacement that figures prominently in the Administration's plan for political and economic stability in Iraq as it decreases its military presence over the coming months.**

It should be acknowledged that addressing Iraq's displacement crisis is a key element to ensuring a sustainable peace in Iraq and the region. Focused, high-level US government engagement and coordinated, strategic planning among US agencies is critical in both addressing the needs surrounding displacement and in helping to facilitate steps toward durable solutions.

Working together with the Iraqi government, UN agencies and other international actors, the US government can develop its strategy that will support Iraqi communities. With the change of Administration, such a focused approach would signal to Iraq, the region and the international stage that the US government is serious about facing the challenges surrounding Iraqi displacement.

- 2. Increase support for humanitarian efforts aimed at fostering the conditions necessary for safe, voluntary and sustainable return.**

Despite the fact that new displacements have virtually ceased, those who have been driven from their homes, whether as IDPs or refugees, continue to live in dire conditions

where access to health care, water and sanitation, employment, electricity, education and other services is extremely limited. To avoid involuntary returns, humanitarian assistance that addresses the current needs of those displaced must be increased.

Similarly, the conditions needed for durable solutions can only come when people are well-informed and confident they are returning to an environment that can meet their basic needs. Effectively addressing this challenge will require the understanding that Iraq's displacement crisis is more than a humanitarian emergency, that it is inextricably linked to the country's security, stability and prosperity. Any large scale return of displaced Iraqis before adequate support and basic services are in place to serve their needs could lead to renewed social tensions, conflict and instability.

It would be irresponsible and dangerous to assume that the challenge is over once IDPs and refugees start returning in large numbers. Efforts must focus on building the capacities of the Government of Iraq and local communities to deliver more than transitional assistance to those returning. Displacement will only truly end when people have regular access to services, sustainable employment and adequate housing.

Additional resources should be provided to USAID and the Department of State to achieve the humanitarian and development objectives necessary to effectively address the crisis in a comprehensive manner. This assistance should be allocated to approaches that are community-based and through established, accountable agencies and organizations that possess the necessary technical expertise and capacity to do the job efficiently and well.

3. Urge and support the Iraqi government in the development of a unified legal and administrative framework designed to ensure safe and sustainable returns.

Beyond working to create conditions that will be conducive to returns, the US government should urge and support the Iraqi government ministries dealing with the crisis—especially the Ministry of Displacement and Migration—to develop and implement a comprehensive framework and package of measures that ensures sustainable returns and durable solutions.

At the moment, returnees receive some assistance from the Iraqi government, although mainly in the form of financial compensation. Follow-up support, however, is either entirely absent or extremely limited and ad hoc in nature. More troubling is the fact that no overarching strategy or plan exists at the national, provincial or local level to coordinate the response of government entities responsible for managing returns. In order to effectively deal with returns, it is imperative that a national legal framework be put in place to guide the government's response.

Supporting and assisting in the development of such a framework should be a key priority for the United States government. By helping the Iraqi government establish a legal and administrative framework for returns, the United States will ensure that the Government of Iraq and its ministries are up to this crucial task, that ministries and systems are

synchronized to confront the range of challenging issues arising from return, such as property restitution and providing access to basic services, documentation and government benefits.

4. Accelerate technical and capacity building measures with Iraqi government ministries to help them comprehensively address the country's displacement crisis.

Managing the displacement crisis must be an Iraqi-led process. It must not, indeed cannot, be carried out solely by the United States government, international nongovernmental organizations, the United Nations or any other international agency. A sustainable approach to returns, however, will necessitate that Iraq's government ministries are responsive, capable and functional. Unfortunately, at present most Iraqi ministries, including the Ministry of Displacement and Migration as the lead ministry on displacement issues, lack the skills, capacity, management and general expertise needed to meet these challenges. This fact is painfully obvious to the millions of Iraqis living in displacement.

There is, however, reason to be hopeful. There have been successes in building Iraqi government capacity, and we know, first-hand, it can be done. US government-funded projects have allowed International Medical Corps and other nongovernmental agencies to carry out capacity building programs with a variety of Iraqi ministries. International Medical Corps has worked with the Ministry of Health, Ministry of Labor and Social Affairs and, most recently, with the Ministry of Displacement and Migration. As a result of International Medical Corps' work with the Ministry of Displacement and Migration, the ministry was able to open on time a much-needed second Returnee Assistance Center in west Baghdad. The center has been open since November 2008, and its capacity to register returnees is triple that of the original center.

These successes underscore the need to accelerate technical assistance and capacity building support to Iraq's ministries, especially those tasked with handling the displacement crisis.

In conclusion, I would like to thank you again for inviting me to testify before the subcommittee on the critical issue of Iraqi refugees and internally displaced persons that is so central to the future stability of Iraq. I would be happy to answer any questions from the subcommittee.