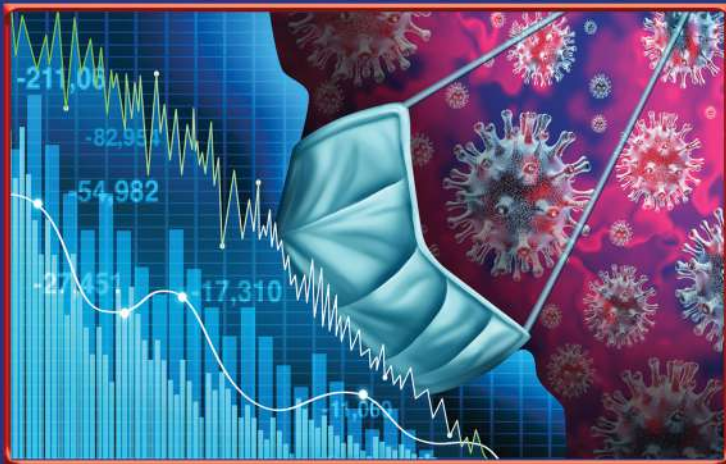


Corona pandemic and the construction of resilience in Iraq Lessons and opportunities



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:Case study

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About Al-Rafidain Center for Dialogue

Al-Rafidain Center for Dialogue is one of the qualitative centers in Iraq, which brings together political, economic and academic elites which are active in guiding visions and influences in decision-making and public opinion.

It is an independent think tank, which promotes dialogues in political, cultural and economic affairs among Iraqi elites, with the aim of promoting democratic experience and achieving community peace, and helping state institutions develop themselves, by providing strategic expertise and insights, the center is a salon for dialogue that is objective and neutral which employs its outputs to pressure decision makers and direct public opinion towards building a state of institutions, within the framework of democratic system, the rule of law, and respect for human rights.

The center was established on February 1, 2014 in Najaf city in the form of a virtual group in cyberspace comprising a limited number of politicians, academics and intellectuals, and the idea developed later, to be legalized by registering the center in the NGO department of General Secretariat of the Iraqi Council of Ministers.

Today, the Rafidain Center for Dialogue brings together more than 700 Iraqi members from all political orientations, academic disciplines and religious denominations, as it can be likened to a "mini-Iraq" in which everyone agreed to adopt dialogue as a key pillar for addressing problems and producing strategic solutions, in harmony with the center's vision of building a prosperous nation. The administrative center also has 30 employees from different disciplines.

In a short time, the Center has been able to achieve a range of achievements by harnessing different energies and employing its outputs for the benefit of the Iraqi cause, taking advantage of modern technologies in electronic communication with the elites at the decision-making center and overcoming the barriers of geography, time and security imperatives, which may hinder direct dialogue.

The Centre not only engaged in electronic communication, but also set up a range of activities on the ground, including a number of seminars, conferences, workshops and specialized interactive sessions, including, but not limited to: The development of the banking sector and the

stock market, the ripening of national reconciliation projects, the mediation between the Government of the Centre and the government of the region during crises, the improvement of the service sectors, the elimination of administrative bureaucracy and routine, the achievement of water and food security, as well as the extrapolation of many thorny problems, such as the Constitution, petroleum, foreign relations, popular mobilization, border crossing points, investment, social welfare and others.

The Forum for Dialogue is a milestone in the Centre's activities, which is the first of its kind in Iraq, and the most extensive and structured, aimed at enriching dialogue among decision makers on issues of concern to the country, promoting discussions on them and exchanging experiences, experts and academics.

The vision of the center:

The center is the station at which the views of elites and decision makers converge in its entire political, religious and national spectrum, providing a positive interactive environment that improves the creation of common spaces and contributes to the building of a thriving country.

The message of the center:

Promoting and developing substantive and serious dialogues between ethnic elites and decision makers that enhance democratic experience, and achieve community peace and sustainable development in Iraq.

Objectives of the Centre:

The Center seeks to achieve a number of objectives, including:

- Achieving and sustaining social peace by promoting constructive dialogue and intellectual exchange among Iraqi elites within comprehensive national rules and frameworks.
- To promote a sense of national responsibility in society by making a public view towards sustaining democratic experience and maintaining a balanced relationship and mutual trust between elites on one hand and state organs and institutions on the other.
- Assist State institutions and bodies develop solutions to the problems facing their work by providing strategic studies, consultations and insights by specialized researchers.

- Expanding the base of commons between political and social entities by providing a neutral and objective dialogue environment that guides dialogue in the public interest of the nation and the citizen.

Means:

In order to achieve its objectives, the Centre uses the following methods:

- Holding conferences, seminars and specialized meetings in the political, social, economic and cultural fields, providing appropriate media coverage and following up on its outcomes.
- producing composed and translated books, magazines, newspapers, publications and research in Arabic or other languages, and publishing them in paper or electronically.
- Conclusion of agreements and partnerships for cooperation and the signing of memorandums of understanding with local and international institutions, organizations and centers with orientations and objectives similar to the center's.

- Concluding agreements with high-level universities and colleges in Iraq and abroad to hold joint scientific events that contribute to achieving the center's objectives.
- The establishment of scientific, intellectual and cultural research and studies departments, and the formation of specialized permanent or temporary committees, which strengthen the scientific research movement to contribute to achieving the center's objectives in issues concerning Iraq and the Middle East region.
- Holding dialogue and understanding sessions between different people whether they engage in ethnic, racial or political differences, to develop mechanisms for understanding the other as a prelude to discovering national commons and making them the starting point for a creative constructive dialogue for social integration.

First: the introduction:

Contemporary humanity stands on the echoes of a new threat that softly penetrates the cells of the peaceful human body, lethal, wrecking and destructive. It's a new epidemic in which the sounds of bombs, bullets, tank roars, economic and financial crises, hurricanes, earthquakes and volcanoes are not heard, it's the (covid-19) epidemic that took everyone by surprise and none of the people or governments whether rich, poor, advanced or developed were prepared for it. In these moments, human societies are all facing a global health crisis like no other, in which human beings are mercilessly being killed, the suffering is spreading between residential neighborhoods and families, and the lives of people are utterly undermined. It's undoubtedly much more than just a health crisis.

It is a virus that threatens human societies at their core. The current crisis has put the world at a crossroads where everyone is aware of the fragility of their health systems and preventive measures. It has put them facing the impossibility of continuing movement within the social system because of the fear of infection, pain and death. It

has pushed governments and states to make unprecedented decisions to close borders and cities, to impose curfews, to use armed forces for support, with the alertness of the community with all its partners and patterns. The crisis has indeed compromised the well-established credibility of many societies considering the efficiency of their health systems and precautionary procedures.

There is no doubt that the widespread and serious impact of crises, disasters and epidemics, including the Corona epidemic and the accompanying successive difficult struggles, impose a reality that requires focusing on addressing the issue of resilience through projects and programs that intensify serious dialogues and discussions in the quest to mitigate shocks, prevent risks and then build resilience, and through the assessment of the capacities of society and its vital culture and the role of the human and social capital in nation-building and strengthening community cohesion. This study therefore looks forward to improving the opportunities for understanding and raising awareness about the vital and active power of formal and informal institutions, cooperation and networking, volunteerism and social

integration in building community resilience, among all development partners at the local, national and international levels.

These manifestations of resilience and prevention become even more important when the risk prevention and shock mitigation system lacks physical resources, as well as the weak human capabilities, and the clear visibility and the response to the effects of disasters. In this study, we see resilience as a growing process that demonstrates the ability of local governments and other development partners, primarily the active forces in the community, to resist the challenges posed by the effects of the crisis, to absorb trauma, to adapt, to recover, to heal wounds from the effects of epidemics — and to rebuild in a better way.

Perhaps the most important entry point is a growing realization that crises are in fact influenced by humanitarian action or inaction, as well as the nature of development choices. It has become clear that countries which have made significant progress in Human Development Indicators at present are paying high costs in the face of the devastating events. The damage caused by

those crises could lead the country into recession, fragmentation, conflict and possibly disintegration.

Based on these data, human and social capital becomes the cornerstone of effective policies to prevent and reduce the losses caused by the accumulation of crises, thus forming the solid foundation for the resilience and stability of society and alleviating social costs. All these transformations are accompanied by scientific attempts to identify the most prominent manifestations of the situation and to try to provide effective solutions and participations that mitigate the effects of trauma, and avoid risks, involving specialists in sociology, psychology and philosophy, as well as medical groups to address the epidemic, Whereas the social and human sciences occupy an increasing position among a wide audience, at a time when a new reshaping of the world is taking place, the human-friendly sectors (health, education, social work) are taking a more effective role in meeting its needs and dealing with its consequences.

Perhaps of interest to this subject (as the hidden face of resilience and flexibility) is what the, indigenous interdependent harmonious traditional societies have,

with their cultural balance and historical extension of an ontological depth (in the words of the sociologist Basker).

Especially in times of crisis, they have levels of existence below what appears on the surface, beyond what appears to the visible eye, and these underlying levels are particularly important, they help us understand the elements and components of building resilience and then interpret what it looks like for us.

Privacy here is a cultural concept, capital, social and civil responsibility, to which individual and family security, civil peace and social cohesion are enshrined.

There are two issues that deserve to be noted in this context: First, the technical, legal and security approach to this problem is inseparable from the complex social dimension of the health problem. The crisis is an accelerating factor for testing social solidarity, distributive justice and the role of the State in it is at stake. And the second: Because of their differences and their varying levels of culture and livelihood, Iraqi citizens generally do not have the same perceptions and representations of the imminent danger that they're facing, and the possible cost of a general health quarantine. This has created real

problems that have threatened health security and, at the same time, shaken everyone's certainty that the situation can be controlled and its repercussions can be addressed.

Second: the importance of the subject.

From the 1980s to the present day, Iraq has experienced various external and internal wars and conflicts and has experienced many conditions of political instability, all of which have had significant negative effects on the composition and cohesion of the State, on the effectiveness and legitimacy of its institutions, on the strength of the social fabric and the nature of relations between groups, and on the national economy and natural resources. And today, it faces fundamental challenges related to the ability to cope with crises and the fragility of the internal situation, perhaps the most prominent of which is the exacerbation of the problems of epidemics and the fundamental challenges it poses to the achievement of the Sustainable Development Goals in general and to the promotion of social cohesion in particular.

Therefore, this reality reopens the debate on the subject of human and social capital, which until recently has not received real attention, as the increasingly challenging circumstances and their implications on human security in Iraq oppose that the concept of resilience building become a key focus in the discussion of policies to reduce shocks and risks and the resulting problems in the region, by evaluating the flexibility and capabilities of formal and informal institutions in mitigating them.

In this attempt, we seek to provide perceptions and indicators that can contribute to improved understanding and awareness among multiple national and local stakeholders about the strength and vitality of communication and cooperation processes, partnerships and volunteering, and social integration in building strong societies capable of coping with risks and threatening epidemics.

Those exposed to crises and disasters are not only the most vulnerable group regarding the basic and necessary needs of shelter, food, medical care and so on, but are also those who suffer from multiple forms of marginalization, exclusion and discrimination, including within a single

country, which threatens to disintegrate the fabric of society.

According to these data, human and social capital becomes more important to mitigate shocks, prevent risks and build a society of resilience, at a time when the State is suffering from financial crises, fragmentation of its social structures, disintegration of public policy-making systems that govern and determine how to plan and respond to disasters and crises, thus the human and social assets become a key focus, and a safety valve for the society to insure against imminent risks and lurking parties, and to prevent slipping and fragmentation and reduce losses paid for by the present and subsequent generations, thus forming the cornerstone of the ability of local communities of endurance and enables them to respond adequately in a civilized way.

This study is one of the earliest studies focusing on the role of human and social capital in strengthening the resilience of the State and society against the threats and challenges posed by epidemics, and it aims to inform current policies and practices of the importance of human and social capital in promoting resilience and flexibility in

local communities. The importance of this study came from the following data:

1-Despite the growing local and international interest in resilience and its relationship to human development, but the key and important role of human and social capital in promoting resilience and stability has been until recently neglected. Therefore, this concept needs to be given a wider scope and visibility in development plans, policies and programs in the post-recovery stages, while it needs to be embedded in sustainable human development literature as one of the driving tools for empowering individuals and enhancing their opportunities for participation.

2-For decades, Iraq has been subjected to ongoing crises with devastating structural effects on agriculture and livestock. Despite active formal and informal efforts to address these impacts, these efforts have been limited in their focus, depth, and the nature of addressing the most important and hindering problems and in trying to explore their depths. Those efforts have continued to be scattered, focusing primarily on response, while crisis mitigation and risk prevention plans have shown clear weakness in rising

to the challenge. The response of local communities to their development roles has declined and these efforts are still limited and suffer from weak coordination and integration with national and international efforts.

3-There is no doubt that information is of fundamental value at the beginning of the crisis, especially when information is shared with the active actors and forces involved in risk mitigation, and this enhances the activities and abilities of the High Central Committees that manage the crisis. However, when this system is fragmented and cracked, the official and alternative channels of communication replace this system, and human and social capital becomes the main tool and medium of communication.

4-Partnerships within the risk prevention and trauma mitigation system and between non-State actors in society and senior central leadership are often based on informal-personal relationships and friendships. This indicates the strength of social capital in the community. However, sometimes partnerships that prevent the local risk, disaster and pandemic prevention system from acting consistently and coherently in order to increase resilience

and strengthen community resilience are formed in a sudden and unplanned way.

5-Close links in the community often support activities and events related to volunteer work. We see during the displacement crisis (2014) and the corona pandemic in Iraq, where community capabilities are a major source of these activities, whether measured or not. Security caveats are often a direct impediment to volunteer activities and reduce opportunities for service delivered by them.

6-Organizations and bodies for trauma mitigation and risk prevention in crisis situations often ignore the needs of vulnerable groups (elderly/disabled/orphans/breadwinning women..) Despite the presence of these segments in the agendas prepared by these bodies, this requires exceptional effort and sustained follow-up, especially in times of crisis that require evictions.

7-when the work of national and local bodies is integrated, coordinated and transparent, providing information at the right time to citizens and decision makers, faith in key actors is strengthened and enhanced at the institutional level, it also helps in the processes of enhancing the

mobilization of citizens -especially when the crisis is worsening- and contributes to raising the level of solidarity and cooperation in the social system.

8-As local social relations and associations blend and fuse in a positive and constructive interaction, this enables them to increase capacities to deal with and cope and deal with crises, and to prevent the risk of shocks. On the other hand, when the system is inactive and does not perform its basic functions successfully, the value of personal connections, relationship networks and citizen initiatives is more effective and clear in their early response to bridge the gap between the system's late responses.

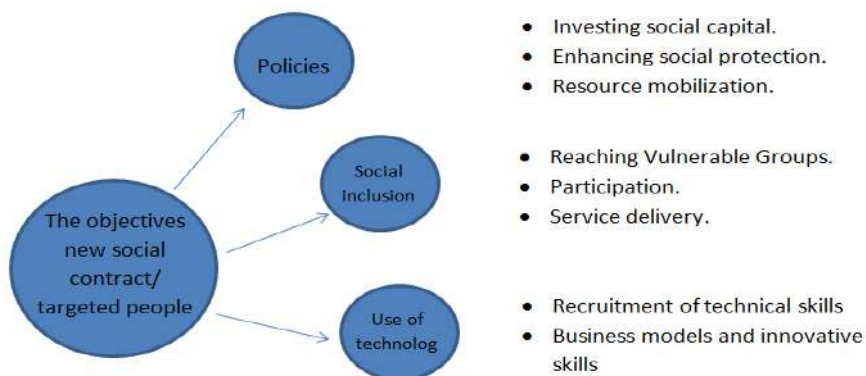
Third: the objectives.

- To stimulate public participation by solidifying the convictions of all partners with the great potential to bring the desired change within their area of intervention in epidemic-affected areas.
- To convince people of the power and importance of human and social capital in decision-making and local participation and to dispel mistrust between citizens and

local authorities and their organs in reforms, treatments and healing pathways.

- To teach people ways and mechanisms to identify needs according to community priorities and community accountability.
- To raise awareness of the effectiveness of monitoring, surveillance and social accountability to solve problems specific to communities affected by epidemics.
- To empower partners through integration of local leadership with central support (Support Leading from Local level from the center).

Figure (1) showing response to epidemic disaster crisis threats



Forth: Societal structures and the challenges of epidemics.

Social science has paid considerable attention to health and disease issues. Many theories and scientific studies have focused on the relationship of society with disease. They have examined the relationship of disease and the spread of epidemics with the dynamics of society, the sociology of individuals and groups, social relations, social solidarity and collective panic, and the reflection of that on the structure, functions and operations of society, particularly intervening effects of epidemics on the general community. Perhaps among the most prominent contemporary scholars who has dealt with this relationship is the German sociologist Ulrich Beck in his book *Risk Society*, in which He pointed out that the third millennium will carry a lot of risks resulting from those practices carried out by some of the major industrial countries such as radiation and pollution from nuclear reactors, and viruses that kill humanity which bears the same destructive power traits of war itself, affecting both the rich and the poor, with severe and uncontrollable consequences. The modern British sociologist Anthony Giddens warned of the dangers facing our world today, because of what he called the "runaway world" and the

grave consequences and implications for the human security of society.

In this context, the French sociologist Alain Turin feels the imminent threat to modern human societies therefore he says: The lives of societies, even the richest, most complex and most immune, remain threatened by fear, violence and war, and caution over trust should therefore be given priority. And that's where the virus becomes like terrorism everywhere.

Today's world is faced with a global wave of viral terrorism, whose activity spans all continents. A wave proclaims a challenge for everyone. This invisible ghost, which is not seen with the naked eye, lurks around everyone. It does not distinguish between young or old, rich or poor, white or black. This invisible ghost crosses borders that lack sovereignty, exploiting human preoccupations and neglecting governments to spread the most terrible terror. It crosses borders that lack sovereignty, exploiting human preoccupations and neglecting governments to spread the most terrible terror.

This is when States and societies realized that there was no value in power, money, influence, weapons, nuclear

missiles, nor ships and aircraft carriers. This pandemic has targeted the well-established credibility in the realization of the Western and Eastern societies of the efficiency of their health systems, security precautions and future prospects.

The manifestations of the coronavirus pandemic in the first months of 2020 have been a dangerous historical station, full of health, economic and social collapses and repercussions that the world has not seen in a long time, Most of the world's countries have been swept away by it in a short period of time and it became the main concern of all the world's inhabitants.

The effects of this pandemic will overshadow the development landscape in general and the social in particular, because of the associated conditions of quarantine, isolation and changes in people's patterns of behavior and thinking, as well as the economic effects of life disruption, In addition to the psychological-social effects, for example rumors spreading, propaganda, fear and panic, which are expected to constitute an interval time from before, leaving significant structural effects that reformulate human relationships, economic variables and

community concerns in the service sectors (health, nutrition, water, education, etc.).

The most vulnerable segments of society against the epidemic are:

Older people are vulnerable groups, and these older people not only struggle to address the health risks of infection, but are also less able to support themselves when placed in isolated places.

Homeless people, who cannot provide a safe health and psychological shelter, are constantly at high risk of the virus.

Persons with disabilities may be infected without being provided with vital support due to social distancing.

Persons in prisons, migrants in detention centers or in mental health institutions may face a higher risk of contracting the virus due to their presence in dense places and the confined nature of buildings.

Attention to the issue of building endurance and resilience in societies affected by conflict or disasters and epidemics has been divided between multiple sciences and concerns,

a matter that lies at the heart of the concerns of many people, specialists and non-specialists, social scientists, economics, politics, journalism, religious advocates, community activists, policy makers and decision makers, putting everyone before fateful challenges and historical responsibilities.

The Corona virus has hit developing countries hard in the past weeks, with the confirmation that the number of cases is steadily increasing, particularly in the Middle East region. The main problem lies in the health-care systems of the developing world, where they are already underfunded and understaffed and are essentially unprepared to deal with the high flow of patients. The World Health Organization (WHO) reported that 40% of the world's population lacks access to basic hand-washing facilities (soap and water), the vast majority of which are located in developing countries.

A lot of people are unable to provide hand sanitizers. In Iraq, the most vulnerable populations appear to be the internally displaced people and refugees. These people have no safe places to go, and are often stuck in camps or areas where human security conditions are available.

With travel being restricted due to circumstances of the crisis, NGOs and international organizations, such as UNHCR, are finding it increasingly difficult to reach them in order to secure the delivery of food and essential supplies, let alone to address the emerging Coronavirus outbreak.

The effects of the spread of the virus throughout the developing world were severe, exceeding when calculated the already significant loss threatening the human life. Along with the general public, policymakers and decision-makers, all were concerned about the serious impact of the virus on their fragile health-care systems.

Many countries around the world, including those in the Middle East, have also taken strong action, adopting a curfew and declaring a long-term state of emergency to protect their citizens, despite their slowing economic growth.

The spread of the virus has further complicated the peace process in already unstable countries such as Iraq, Afghanistan, Syria and Yemen. The wider spread of the virus in the world has been accompanied by the collapse of oil prices, as well as the cessation of industrial and agricultural activities affecting local and international

economies, primarily their food supplies, considering the close interdependence between economies and the movement of capital, and the impact on the human security of society.

Fifth: the Chinese experience in facing the epidemic: "Health Silk Road"

China is a major producer of breathing devices, masks, test kits and packages of hazardous materials needed by countries during crises; it sells and provides these supplies on the basis of foreign assistance and public diplomacy. At the same time, China is slowly developing a "health silk road" and has then begun to deepen global relations, including with the United States, and the European Union.

It is surprising to note that there has been little solidarity in the international arena in the fight against the emerging coronavirus; that's why many countries have turned to China. Italy found direct help and solidarity from China in the fight against the virus, and Chinese officials arrived in Rome with essential supplies on March 12, carrying breathing devices, masks and medicines.

As China claims to have stopped the spread of the virus at home, Italy is desperate for insights into how to achieve it. The Serbian President received a shipment of medical supplies from his “brother and friend” President Xi. Along this path, the participation of non-governmental and international organizations, especially those that assist displaced persons and refugees, must be increased.

The World Food Program (WFP) will help transition between countries as the virus spreads. Therefore, friendly countries could increase funding for the World Food Program, which provides assistance in IDP camps. This is the right path to take, because most countries in the developing world have fragile health-care systems that are less prepared to deal with the spread of epidemics. Intervention is therefore necessary to save millions of lives.

It also represents an opportunity for health diplomacy that can have an immediate and positive impact on public opinion. At a time when the coronary virus could lead to increased migration from developing countries if economies collapse, then the emerging virus raging in the

developing world could have indirect effects on developed industrialized countries.

Sixth: Indicators of reality in Iraq.

Next we present the reality of the private sector in its various sectors and the situation is presented in the light of the cessation of business and activities, as well as the situation of the poor, their food security and their basic needs, and in this context, the indicators and statistics on work, family spending, the social protection network and the poor and comprehensiveness of the ration card.

1- Population and employment:

- The population (15) years of age and above is 23.450 million (56 %) of the total population.
- Economically active people (working or looking for work) represent about (42.8 %) equal to 10 million.
- The unemployment rate is 13.8%, according to 2018 estimations.

- Underemployment (working less than 35 hours per week) of the total number of employees (28 %).
 - The number of officially established private sector workers (4.5 million), possibly more than 5-6 million.
 - Private/informal workers (40%).
 - The number of employees for others from the private sector, works for others (3.15) million and represent (70 %) of the earnings.
 - Those who work for themselves such as (owner of a stall, taxi, small shop, solo craft, they are estimated about (700) thousand people.
 - The private sector represents (33%) of the total economic activities of the country and (99%) is in agriculture, (57%) is in manufacturing, (97%) is in construction, (90%) is in trade and hotel, and (93%) is in transport, communications and storage
- 2- Information related to spending (family).
- The rate of Iraqi family expenses is about (1.5) million dinars per month.

- (32%) of these expenses are food and drinks.
- (24%) of these expenses are electricity, fuel, residency, water.

Below is an estimated table of expenses for poor and non-poor families. Food and beverages are in thousands of dinars

category	Poor family	Non-poor family
food and drinks	375	502
electricity, fuel, residency	196	385
health	35	106

3- Social protection.

- Number of families covered is (1.113) million families in 2018.
- Number of families covered is (1.261) million families in 2019.

- In 2018, about (413) thousand families with no income, (252) thousands of incapable families, (206) widows and 125 thousand with disabilities were included.

4- Food Security: The 2016 Food Security Survey showed that the percentage of people who are food insecure is (2.5%) while the percentage of Fragile Families is 53%, which means that crises can quickly affect them to make them poor.

5- Poverty:

- The percentage of material poverty is about (20.5 %) as the rate for all Iraq across different provinces.
- The percentage of multidimensional poverty is (31.5%) as the rate for all Iraq across different provinces.
- It is noted that the large percentage calculated (not materially poor) is not far from the poverty line (i.e., crises can quickly affect them into poverty).
- There is a clear disparity in the distribution of poverty related to different provinces. The addition of population percentages must be considered.

- On 6 July, the Minister of Planning reported that Iraq's poverty rate had risen to 31.7%, compared with 20% in 2018, while the number of poor after this rise reached 11 million and 400 thousand individuals.

6- The ration card which currently covers between (90-95 %) of the total population of Iraq without clear guidance for a specific category.

From the above, we may point out the following:

- (2.5%) of the population about (1) million citizens, equivalent to (200) thousand families need a quick intervention to provide food supplies. (part of them may represent the displaced families) that have not returned yet, ranging in number from (1.5-1.7) million according to available statistics and may represent part of (450) thousand families covered by the social protection network of those with no income, covered by a maximum amount of approximately 75 million dinars, assuming that 375 thousand dinars is the cost of food and drink expenses for the poor family per month, and can be reduced to 40 billion as a food basket for critical basic needs by 200,000 dinars per month for the family.

- Assuming that the percentage of material poverty is (20 %), we're going to need about (320) billion with state intervention in the medium term, which corresponds to 8 million citizens representing the poverty line, considering the interruption of jobs for at least 3.5 million private workers who work for others for daily wages or for themselves.
- Over the coming months, the continued cessation of work or prohibition for health purposes requires support for about. 3.5 million Families of private sector workers with a support rate of at least (350) thousand dinars (200) thousand as food basket (+ 100,000 expenses of energy and accommodation services) It is equivalent to the minimum wage and for a total amount of 1225 billion Dinars (about \$1 billion).

Seventh: Dealing with the crisis: human and social capital and the construction of prevention.

What is the role and potential of human and social capital in building society's resilience to natural disasters and epidemics in Iraq? How do human and social capital

engines act as disaster risk mitigation in society? By asking these questions, we try to establish in this study a direct link between human and social capital and resilience and the principles of disaster risk reduction in local communities. The importance of capital is reflected in building resilience for communities affected by disasters and epidemics through:

- Contact role
- partnerships and coordination,
- Solidarity through the promotion of volunteering,
- Humanitarian assistance,
- Social integration and trust.

Based on the facts of reality, we try to highlight the process of communication and exchange of information through four phases of disaster risks reduction through prevention, being ready and response through to recovery. Here, the local emergency force plays a central role in diagnosing, containing and promoting communication with citizens in their communities,

through traditional media channels and information. Opportunities for sharing information among citizens are also promoted, as well as the use of social media, alternative methods of communication and the use of verbal messages to paint the image and manifestations of reality.

Data on the ground demonstrate the importance of partnerships in promoting community resilience. Partnerships between the Centre's national institutions and local committees for trauma mitigation and risk prevention, and between various non-State actors, civil society organizations, the private sector and citizens, focusing on citizen involvement, volunteering, community investment and self-regulation in the moments of crisis interaction, where evaluation and briefing are carried out, as well as solidarity through the effectiveness of voluntary action.

Response to the pandemic and resilience-building options

Development workers agree in principle that the empowerment of people in societies affected by crises and

epidemics takes advantage of opportunities for progress in human development, which requires detailed data on many landmarks such as region, gender, social capital, socio-economic status and others. However, they do not agree on the availability of such data. It may be difficult to identify the details necessary to detect inequalities in certain dimensions without being fully aware of the nature of the exclusion and marginalization processes to which the populations of crisis areas are subjected. Political, social and cultural practices can deepen exclusion and deprivation.

Like investment in human capital, investment in social capital serves as a lever for the development and societal resilience of various States, particularly in developing countries, including Iraq. It is also an essential element in the resilience of these communities at the local and national levels, through the positive interaction between human and social capital, the latter enables the community to improve its abilities and invest its energies, develop its skills and margin initiatives, thereby enhancing the added creative value, which helps it to mobilize the highest resources, increase its immunity, improve its

performance, expand its options and consolidate its systems.

In the divisive circumstances of Iraq, increased investment in intervention and rehabilitation and enhanced reintegration efforts in problem areas are required to ensure a long-term response through flexible and inclusive investments at the individual, community and institutional levels in anticipation of a backlash from vulnerable, excluded, marginalized and poor groups.

What is the role of human and social capital in its various forms in building the capacity of local communities to cope with crises and disasters in Iraq? What are the most visible manifestations of human and social capital as a major resource for mitigating shocks and reducing disaster risks in society? When asked, this focus clearly demonstrates a direct link between social capital, flexibility, having an option and the principles of crisis risk reduction, particularly in provinces and districts that have experienced displacement and forced displacement. It undoubtedly demonstrates the importance of human and social capital for strengthening the capacity of local communities, as presented by the results of many

research and studies on the role of communication, partnerships coordination, and solidarity through volunteerism and humanitarian assistance, social inclusion and confidence-building.

a- Resilience: Moving from shock mitigation to human development.

No matter how prepared and ready a country may be, and adopting an effective policy framework, the imperative of crises and shocks often has very devastating effects. When partial recovery processes are disjointed and do not enhance resilience and flexibility, the effects of the disaster can be long-term and have continuing implications for the present and subsequent generations. Although the definitions of resilience and resilience building are not new, they have seen increasing global attention in recent times, particularly following the escalation of the risks caused by natural disasters in general and the problems and risks associated with international and societal transformations in particular. There are many factors that contribute to the promotion and strengthening of prevention-building opportunities, primarily:

-
- The ability to be flexible and to have choices, through enhanced opportunities for tolerance and dialogue, and between internal societal forces that allow people to continue to adapt and rebuild their lives.
 - Everyone's strong commitment to self-reliance.
 - a strong role for traditional forces (cultural references in shaping national identity, and the need to restore that identity).
 - The need to restore the infrastructure destroyed by the conditions of the terrorist, economic and Corona crises.
 - It must be assured that the Government alone cannot provide what is needed, without the active participation of civil society and private sector development partners.

It must be admitted that, despite the persistence of traditional structures and the continued interaction and cohesion between them and the modernist configurations of the transformed society, the response of social capital is still slow to emerge, largely in response to market forces. Plus, opportunities for vertical and horizontal integration

and social integration to form a cohesive society continue to pose a real challenge to human security, including health security. It is clear that future milestones include strengthening interaction and integration with development partners, opening up large spaces for dialogue between the State and civil society, moving forwards toward an increasing trend of community participation, transparent rule of law and encouraging local elections, so that participatory development paths are more inclusive and sustainable. Communication and exchange of information take place through four phases to reduce the risks of crisis: (prevention, readiness, response and recovery). This provides an analytical view of the development role of local governments and development partners in enhancing communication with citizens in their communities, through traditional media and an early warning system. The exchange of information between citizens and the role of social media, and alternative ways of communication constitute an important station in the field of confrontation.

b- options for resilience and building resilience in the face of epidemics :

1- Position assessment: Effective epidemic control and risk prevention tool

There is no doubt that the CORONA epidemic and the respiratory infections that it causes, which vary in severity and speed of transmission, have brought society into a dangerous phase after the outbreak in all Iraqi governorates, and it could double every 3 to 5 days. The need for hospitalization must therefore grow very quickly, to the point where it can overwhelm the national health care system. On average, 20% of infected people show severe or critical symptoms with mortality rates likely to reach more than 1% , and increase much higher when it's older people and people with mainly special conditions (chronically ill). It must be recognized that the speed, magnitude and severity of the cases diagnosed, as well as the anxiety and social and economic disruption, were already dramatic and could be more dangerous in poor areas.

Here, the system of risk assessment and response plans is one of the key roles in reducing the risk of local crises and disasters by adopting criteria to correct local vulnerability to disasters, crises and epidemics. Risk reduction

assessments also represent response and recovery mechanisms at the grass-roots level. Risk assessments also provide information on people's vulnerabilities, livelihoods, economic conditions and services, and the capacities of different populations to deal with risks, assist in early response and secure life support opportunities. In summary, the assessment of levels of fragility by indicating the vulnerability and fragmentation of the population of a certain community, while defining the actions and paths laid down by risk management. Such assessments must be bound by effective legislations that reduce the risk of epidemics, starting with levels of sober performance from central authority to local government.

2- Partnerships: Interconnection engine to access resources and invest competencies

Countries face different pandemic response scenarios, requiring a special response design depending on the capabilities of society and the durability of its economic, health and institutional structures; or according to transitional societal conditions. Many countries continue to act decisively by imposing bans or effective physical dispersion, including quarries, isolation and even

lockdown, testing and tracking of communication processes to reduce the escalation of prevalence levels, and to curb the potential for rapid and uncontrolled transmission of the coronavirus. These contexts must be the highest priority for all regions of the country. It's the most effective way to save lives and protect society, the economy and institutions. However, many countries do not have the same resources to prepare against the risks to human security and against the consequences of the crisis. The starting point is through a deep understanding of society, its strengths and threats to its unity, the precise identification of positive values that drive people to create, cooperate and work, the modification of the educational curricula to focus on the values of cooperation and synergy and developing them, how to create effective social relations, the expansion of positive interaction with others, meaning that the school curricula develop the spirit of community, participation, work and self-development, and makes healing and the transition to sustainable development the greatest issue in society, but rather their existence, thereby empowering individuals scientifically and technologically to become producers interacting positively with their creations and those of

their peers, transforming them into goods and services that promote their well-being, and informing them of their responsibilities towards themselves, their families, their society and their environment.

The desired participation means that people contribute effectively to the human, social, cultural, and political processes affecting their affairs. Everyone should have consistent and codified access to the decision-making process and its mechanisms. In this case, participation becomes necessary to achieve stability by enhancing opportunities for social solidarity, especially in large, densely populated and diverse societies.

3- Volunteering: The Real Power to Move Society

Decisive, urgent and coordinated action by all leaders of the formal and informal community, companies and finance remains an urgent necessity to pre-empt reactions and absorb trauma, curb the catastrophic spread of the virus as soon as possible and stop the epidemic. Perhaps at the forefront of actions are preparedness and readiness, especially in the most vulnerable areas and the areas where sporadic cases appear, testing and trying to detect all suspected cases as quickly as possible. This is vital to

ensure that the transmission of the epidemic can be curbed and life-saving actions can be improved. In societies prone to disasters and epidemics, the exchange, development and distribution of knowledge, new diagnoses, medicines and vaccines is important. Learning from the experiences of other countries is also crucial at this stage, followed by constant evaluation and Regular updating of national strategies and new knowledge guidelines to explore the subject and prepare for everything new.

Here, full account must be taken of the cumulative effects on certain segments of the population, particularly vulnerable groups, the attempt to integrate disadvantaged groups and adhere to the highest standards of human rights, and the preservation of the benefits of health systems, including polio eradication and immunization rates to prevent measles, polio and other transitional diseases.

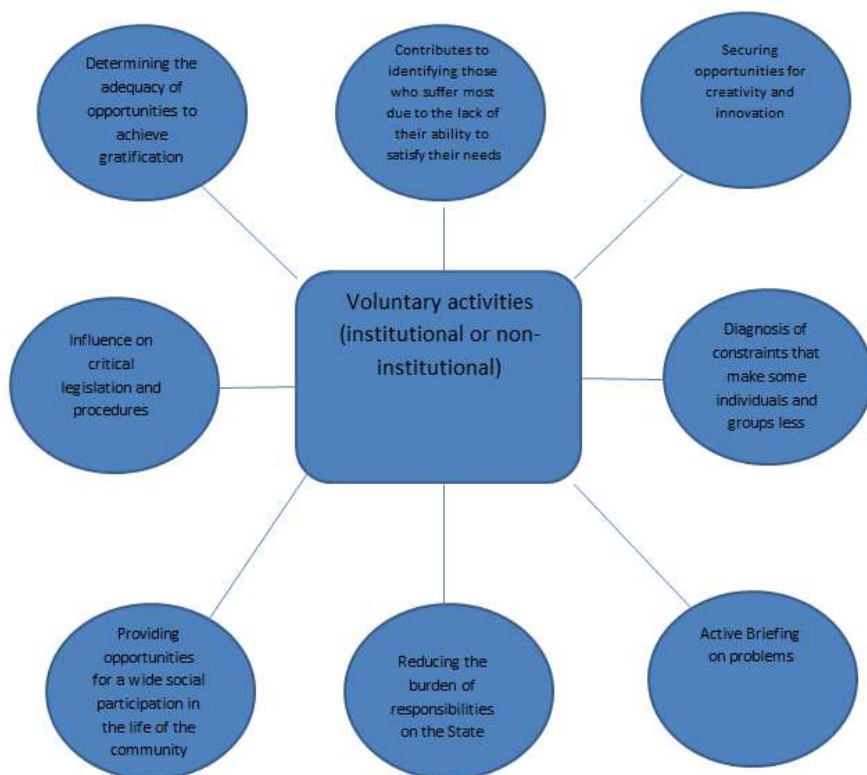
One of the most important societal responses to threats is active civic engagement in interconnected volunteer forms. Volunteerism, as it is known, is the " unpaid work, which includes time, energy, skills and / or specific abilities

granted to the community generously and without charge. Volunteering is often strongly associated with participation in all kinds of civic activities and events that characterize organized community life. However, volunteering also emerges as a result of the organized self-efforts of community members who work in the common interest in an interdependent and supportive world, an act that demonstrates levels of solidarity and support in times of crisis.

Risk prevention and preparedness is achieved through the participation of volunteers in risk mitigation and preparedness for the worst. Despite the numbers by local and national authorities to develop a Disaster Risk Reduction System, it is rarely used as a disaster prevention tool. Involvement in civic rescue networks is a form of voluntary participation by citizens under their local leadership. In general, some members of civil society organizations are constantly undergoing theoretical and practical training to be highly skilled in their community or at the national level. The municipality is another example of best practices with a functional methodology that promotes risk prevention and resilience through active civil protection networks, having undergone numerous

training courses, as well as for volunteers to conduct training workshops; it also includes visits to educational institutions, student and teacher training institutions and staff on the basic principles of civil protection.

Figure (2): shows the mechanisms of impact of voluntary activities (institutional and non-institutional) on community structures



The response to threats and recovery through voluntary action in crisis situations is experiencing a dramatic rise in the levels of volunteer participation during crises, as was the case during the floods and earthquake of 2010 in Kraljevo, Serbia, or in some Iraqi provinces after their occupation by ISIS after June 2014, during the years of liberation from terrorist groups and during the growing role of volunteering in the face of coronavirus epidemic in all regions of Iraq. There have been effective activities and follow-ups in the voluntary work arena, starting with healing at an early time in the crisis and at the same levels of performance. For this reason, voluntary participation cannot be carefully analyzed by separating one phase from another, since risk prevention from disasters and epidemics shows the same characteristics during response and early recovery phases. The last page of healing and recovery usually does not include spontaneous volunteer work. During the response and early recovery phases, volunteers participate through their official and institutional membership or affiliation with civil society - by accelerating disaster risk mitigation through local structures and civil society organizations - informally, self-organization and community-based organizations play a

role in supporting those threatened, those of neighbors, friends, families and other members of the community. After the liberation of usurped areas from ISIS in Iraq, field reports state the magnitude of the threat to farming, individuals, families and neighbours. Everyone needs help. The prolonged crisis has had a structural impact on the movement and balance of society. After the social pyramid turned around, many families were severely impoverished by the loss of jobs and property, as well as the children and young people losing their opportunities for education and employment.

In the Serbian experience, for example, informal institutions participated in relief and recovery operations through volunteers who came in large numbers to participate in risk prevention, and were willing to assist in any way possible. Many people contributed at the right time, having come from villages with buses provided by local administrations. Volunteering was primarily aimed at providing and supporting manual labor, distributing humanitarian aid, and providing first aid, as expressed by those present in the field. The Chinese experience in Wuhan also shows extensive activity to address the risks of epidemics that hit the community in early 2020. The basic

purpose of voluntary programs remains to promote opportunities for participation in decision-making at the community and body levels in order to give citizens greater authority to make decisions that affect their lives. This path often raises the following questions: do policies and programs lead to choices in line with their preferences? Do opportunities for enhanced participation increase social cohesion? Will it produce more flexible local institutions? Does it contribute to reducing acquisition, hegemony and corruption?

4- Vulnerable groups: the priority of care and the necessities of solidarity

Vulnerable groups are the most vulnerable in the face of this crisis they are constantly at risk : those who are trapped in marginalization and exclusion; those who already live in very dense and underserved areas; and those whose lives have already been turned away for other reasons and who lack access to services, social and political protection or other support systems. Densely populated areas and large informal sectors are particularly vulnerable. When the disease takes a deep foothold in fragile environments, poor urban areas and densely

populated slums, as these areas are unable to achieve self-isolation, everyone is at risk and the epidemic continues to spread across different parts of the city where it is a fertile environment for the spread.

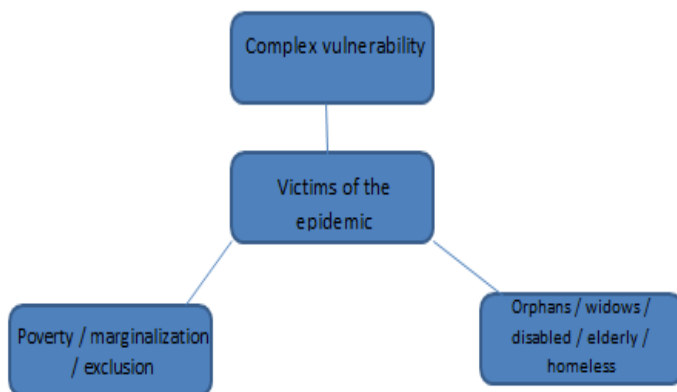
In this direction, key actors seek to mitigate the risks of local crises and epidemics that are entrusted with the taking care of vulnerable groups in the planning, preparation, response and recovery of local crisis management cells in cooperation with its actors. Members of duty stations, social services, health services and facilities provide information on vulnerable groups and are key actors when the crisis emerges. The most prominent of these are the offices and branches of the Red Cross as important actors, particularly in the evacuation phase and taking into account the subsequent situation of populations in need.

One of the main tasks of shock mitigation and risk prevention systems is to contribute to reducing the vulnerabilities and fragility of communities in response to disasters and pandemics. Vulnerabilities and fragility often point to the concerns and marginalization of vulnerable populations (children, persons with disabilities, the elderly,

poor families... etc.) who are unable to cope with risks and their limited response.

However, as can be seen from international and local research and experience, as noted earlier, there is a general lack of rectification of local vulnerability levels in the face of crises and disasters. It remains to be stressed that local disaster risk reduction systems generally lack detailed equipment, reports and information on vulnerable populations, in terms of location, special needs and provision of health infrastructure. As a result, plans and procedures for engaging and caring for vulnerable groups with preparedness and readiness remain missing, except for the general priority of attention to women, children, the elderly and the disabled. The humanitarian situation and concerns are even greater, especially when the proportion of the population at risk and those without access to social protection is high. The population of many regions suffers from poor living conditions and increased challenges, especially those with complex fragility, which means the overlapping of the characteristics of vulnerable individuals or families (disabled persons / orphans / breadwinner women / the elderly) with the harsh conditions of displacement.

Figure (3) Complex vulnerability of social groups



The situation regarding the integration of vulnerable groups such as the elderly, children and ethnic minorities through risk prevention, preparedness and readiness activities; it actually reflects an atmosphere of genuine concern. There is a lack of information on vulnerable groups. There is a lack of information on vulnerable groups, which are a solid basis for planning on how to face risks and for determining the appropriate level of preparedness and response. The lack of adequate risk preparedness shows beyond doubt that the fragility of society is unexpected and has not been assessed. This

requires standardizing preparedness plans and risk preparedness.

5-Trust: Foundation for building resilience and sustainable development

Remove obstacles, allow immediate access to research results and ensure that vaccines and medicines are safe and accessible to all. The world urgently needs a common vision and plan of action to take advantage of the latest developments in scientific research, emerging technologies and new sources of biodiversity in the fight against the Corona pandemic. Here, trust and leadership play a central role in guiding the course of scientific and cognitive confrontation that is necessary to defeat the epidemic and mitigate its potential effects - the chances of achieving Sustainable Development Goals 2030. There is also an urgent need for new open science frameworks and regulatory contexts that work through interacting agencies to remove obstacles to vaccine development and clinical trials of treatments. In "Foreign Affairs," the American thinker Francis E. Jr. "Francis Fukuyama" in his article "Epidemic and Political System" A scientific analysis of the response of risk countries to the pandemic, wondering

why some countries have succeeded in achieving an immediate and successful response to the challenges of the disease while others have failed to achieve the same results, asserting that the issue is not one of (Regime Type), where some democratic systems have achieved good results, while others have not.

The same applies to autocratic systems. In his view, the factors responsible for successful pandemic response have been state capacity, social trust, and leadership. States comprising the three attributes - institutions of a competent and accomplished State; a Government trusted and listened to by citizens; And active leaders - they performed admirably, with minimal damage.

The concept of trust refers to the willingness and desire to believe that the initiatives and behavior of one person or institution and their consequences represent appropriate actions that communicate in a reinforcing and mutually supportive behavior. The distinction between forms of trust can be:

On the basis of granting trust to a particular person, after the development of general abilities includes unknown

people. Trust in the formal system, represents a form of political trust.

Accordingly, the concept of trust reflects a comprehensive indication of how social capital is reflected in society. The way, in which information and partnerships are shared, voluntary work is done and social integration is promoted. Trust, along with rules of support and reciprocity, is the core of social networks and the resulting processes and interactions. As such, trust affects the vitality, resilience and flexibility of society to different types of risk. Trust is a real test of the level of well-being of society. High levels of trust show that informal relationships between family, neighbors and friends are effective and sometimes trigger an immediate reaction to the crisis on the basis of information exchange, cooperation and the promotion of volunteerism, as well as the care they provide to fragile members of society. Finally, recovery processes in situations of crisis, disaster and epidemics require maintaining levels of trust among the components of social capital between family, friends and neighbors in society. At the level of local experiences, levels of confidence at the local official level are often reduced by widespread corruption, particularly with regard to the

transparency of recovery and relief operations and the equitable distribution of aid to those affected by the disaster. The Iraqi experience offers us many examples of failures that have accompanied the processes of transformation and similar missed opportunities for healing and development. Specialized studies have also shown weak confidence in legislative, judicial and governmental bodies and institutions owing to the continued dominance of sub-allegiances and the control of corruption systems in the guts and knuckles of the State.

6-Social responsibility and initiatives: Key Pillars for Curbing the Epidemic and Healing the Wounds

Contemporary countries need to work together to develop a collaborative approach based on specialization and scientific knowledge and to invest scarce resources on a collective basis with a vision based primarily on an accurate assessment of public health needs. Otherwise, the key to harnessing resources is weak and unable to secure the recruitment process where it is available at critical moments (where and when). That puts everyone at risk. Here, personal, formal and informal initiatives and social responsibility at the community and institutional

levels play a key role in meeting the challenges, helping to reach the shore of safety, assigning and supporting the health system and responding to its requirements. Government pharmaceutical companies are also working to increase testing capacity, while manufacturers are offering to convert or add new production lines to manufacture masks and essential supplies. At the same time companies are offering digital technologies and tools to overcome social isolation, promote social cohesion and raise awareness about health and safety guidelines to address the epidemic. Innovation in the private sector can also contribute significantly to the immediate response, reducing the duration of the pandemic and enhancing flexibility and long-term resilience. In particular, use should be made of available data, make use of artificial intelligence to make digital tools and put the available potential into practice, while attempting to develop predictive insights and scenarios through which the pathways of the epidemic and new scientific and human developments can be determined, and where health care and other public services are located within a close framework of social responsibility. At the same time, the spread of phobia and the potential for misinformation

must be tracked and countered. On the other hand, efforts continue to measure the effects and consequences of the crisis on vulnerable populations, as well as to secure targeting and communication opportunities for risk prevention, financial assistance and regulation of intervention policies. While investing private sector efforts through industries and strengthening partnerships to narrow information gaps, many countries will need investment and technical support to strengthen their capacity in analysis in this area.

Levels of social responsibility and initiative present greater opportunities for building the human and social head. Civil society can increase its roles in the context of social responsibility, which is often severe and protectionist, especially in situations of crisis and epidemic, where trust is at stake. Instead, there are greater opportunities to have interwoven, outward-looking, developmental or social-initiative-oriented relationships, as in times of peace and stability. These two aspects of capital may differ in their interaction with crisis conditions, the quality of civil society, and the role of the State and actors. Within this path, the study emphasizes social responsibility and civil society initiatives as a combination of two types of capital

that may substitute or complement the roles and functions of the State and the market, revealing the degree of social cohesion - the intersection between the State and the market as a vertical engine or linking human and social capital and civil society as a horizontal engine.

Eighth: the conclusion

It is clear from the above that the current Iraqi crisis in the face of the corona epidemic has three paths:

- One that is linked the ongoing transformations and crises that Iraq has witnessed on various fronts at a time when it was not prepared for them.
- One that represented the economic, political, social and demographic changes to which Iraqi society has been subjected to in recent decades.
- One that is represented by the nature of the direct threats to human security (health security) represented by the pandemic.

On this basis, Iraqi policies, through the integration of local leadership (actors in the protection system), have tended

to mobilize the energies of society and build an integrated and manageable fabric. Voluntary action has become an essential entry point in this direction to modify the prevailing civil society structures and adapt them to "modern" standards that make them a developmental path that ranges from attraction to the lights of the modern, with a margin of awareness of their local and national historical and cultural status and extension.

The circumstances of the crisis have revealed the nature of the outlets that have opened up, in a way in which civil society became searching alongside with the development partners for realistic solutions and remedies within their sphere of existence, thus revealing the nature of the transformation of social, economic and even cultural structures.

This study includes a call for action and immediate health response needed to curb virus transmission in order to end the epidemic; and addressing the many social and economic dimensions of the crisis. It is above all a call to focus on people, women, young people, low-wage workers, small and medium-sized enterprises, the informal sector and vulnerable groups that are already at risk.

One issue to point out is that some of the failures of civil society at the local level are due to the situation in which social groups living in the geographical vicinity are unable to work collectively to achieve a meaningful and preferred outcome. Failure primarily involves a major inability to undertake coordinated and efficient - or effective - actions.

Moreover, a development policy that uses the needs of participatory processes must be aware of the accurate diagnosis of potential failures of civil society, so that policy makers can be fully aware of potential preferences when moving decisions to the community level and can identify possible ways of repairing such failures.

This crisis requires the alertness of the collective mobilization of civil society sectors and organizations and their involvement in the activities included in the State vision (consolidation, confidence-building, support for protection and treatment of the epidemic).

In this section, we are trying to make recommendations after important steps planned by the Iraqi State in the face of the epidemic, with expectations for the population to make further progress and stability by overcoming

development gaps. "Unbalanced and equitable conditions of development, increasing people's demands and aspirations for a better life" It is the main challenge facing the Iraqi leadership to bridge these gaps and to meet the demands of democracy, the rule of law, justice and equity, with better conditions for security, the environment and the maintenance of stable economic growth, supported by high-quality public services, thereby enhancing the choices available to people to achieve sustainable, comprehensive and coordinated human, health, educational and living development.

1- In order to respond to pandemic crises, to meet the needs of accelerated population growth and to care for and meet the needs of vulnerable groups and people with special needs, a diverse and rational health system is essential. This requires attention to coverage levels and improved care without relying solely on the Government. This requires concerted efforts and effective cooperation between the Government, the private sector and society. This path requires the Iraqi government to improve the policy environment and encourage the business

community and social organizations to participate in the delivery of high-quality care services according to secure work and active public-private partnership

2- Addressing multidimensional poverty requires strengthening self-motivation to reduce it, and establishing a sustainable poverty alleviation mechanism, focused on helping to empower children to build their knowledge capacities independently and reduce leakage. To achieve this, priority needs to be given to developing education and empowering students through education, so that poor populations can increase human capital and strengthen their capacity for self-development. And to recruit students in targeted, poverty-stricken and epidemic areas to play developmental roles through volunteer work and encourage individual and collective initiatives that enhance the chances of healing.

3- Developing mechanisms to deal with social variables: the Sustainable Development Goals considered the building of the human being and the expansion of available options as the basic goals for the happiness of society and the sustainability of its well-being and stability, Hence, the main focus in the post-recovery phase is on the

human security of society. This requires the Government to shift its focus towards "expanding the well-being of the people," and to promote comprehensive human development options to achieve overall social progress towards "shared prosperity."

It can achieve a better understanding of the needs of the public by respecting and appreciating the opportunities to take advantage of the active role of local governments in providing goods and services that reflect real public needs.

4- Expanding opportunities to include the poor population in the social protection system. During the crises caused by pandemics, the government must strengthen the options for supporting rural populations, raise standard relief levels, and ensure that relief payments are provided on time.

The Government must continue to accelerate the construction of a unified medical insurance system for urban and rural residents to ensure that critical treatment is provided to the lack of care problem, and to take concrete measures to address the issues of high medical expenses in order to prevent more people from falling into poverty or returning to it because of disease. It also

requires the Government to give great importance to urban poverty, care for slum dwellers, and the belts and pockets of poverty in low-income urban areas with inappropriate housing conditions, by directing them to social protection systems, retraining them for employment opportunities or adopting them into small enterprises. The demographic changes experienced by the population in Iraq will require greater efforts and endeavors to ensure that young people have access to decent work, while ensuring that older persons have access to adequate pensions that can protect them from poverty in rural and urban areas.

5- Forming voluntary local councils (community actors) that have nothing to do with the district and formal councils), which are supposed to include (Chosen, imams of mosques, Husseinis, clerics, zonal masters, medical professionals, youth volunteers, district or local security personnel, school administrators and teachers) that participate in awareness-raising, follow-up of residential needs, monitoring of emergency illnesses, provision of solidarity to vulnerable groups within the locality and other feasible tasks.

6- Make optimal use of civil society organizations (large numbers) and make their voluntary contribution to this crisis by participating in the various tasks as a criterion for their continuity and level of reliance on it according to the services provided.

7- Taking advantage of opportunities for urgent development support to strengthen weak health systems: the most vulnerable populations against this crisis are those who are at real risk, those who have been caught up in armed conflict or those fleeing war and injustice; those already living in densely populated and underserved areas; those whose lives have already been turned upside down for other reasons and lack access to basic socio-political protection, or to any support systems that dilute them.

8- Taking care of urban and spatial development: In countries with large size and high population density, the area of particularly fragile informal sectors is expanding. The danger is that the disease could take a deep foothold in fragile environments in poor and densely populated urban areas (belts and pockets of poverty and slums). These poor neighborhoods put people at risk, especially as they are unable to self-isolate and enjoy green spaces and

an area, leaving everyone at risk as the virus continues to spread around the world.

9- To mobilize and direct the international effort through a central committee setting priorities and distributing tasks in the form of the Ministry of Finance, Planning, Health, Advisers, General Secretariat, Council of Ministers, Labour and Social Affairs). The Ministry of Planning is currently working with the World Bank and UNICEF to read the rapid, medium- and long-term impact of the crisis on the social and economic sectors of society, particularly vulnerable and poor groups, as well as its impact on the private sector.

All human societies are called upon to stand firmly before the ferocity of the new viral enemy. And that all public, private and civil sectors cooperate from the very first moments when being threatened. Bearing in mind that action at the national level may not be in conformity with procedures and standards at the global level and the complexity of the crisis. These moments require innovative, coordinated and decisive procedural policies reinforced by financial and technical support for the poor

and the most vulnerable and fragile, who are expected to take the most damage. Accordingly, it is based on:

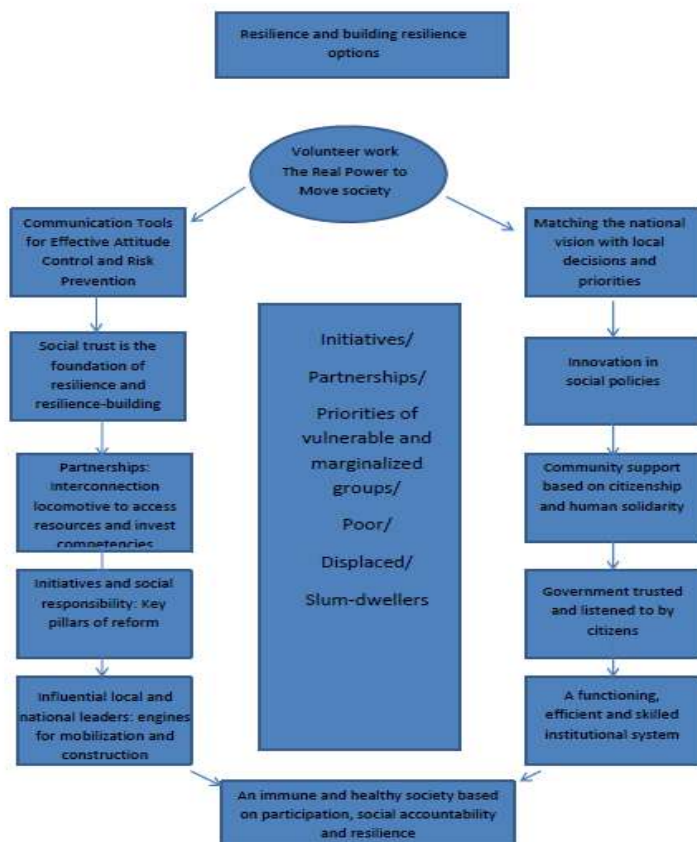
- The first step of confrontation is to build a strong, coordinated and collaborative health response. Taking into account increased spending on the health system to meet urgent needs and high levels of laboratory spending, responding to expanded treatment, adequate medical supplies and with more health-care workers; and strengthening the health preparedness system as a systematic response to unexpected symptoms and problems.
- The second step is to do everything possible to mitigate the effects of the pandemic on millions of people and the threats on their livelihoods and their real economy. This means providing direct resources to support workers and families, particularly in the informal sector, providing health support and unemployment insurance, expanding social protection, and supporting companies to prevent bankruptcy and widespread job losses. That also means designing financial and monetary responses to emphasize that the burden is not on States that are least able to bear it.

- The third step is lessons, lessons and morals from this crisis to review health, institutional and social systems for better reconstruction. If more progress had been made in achieving the goals of sustainable development, we would have been better able to meet this challenge - with stronger health systems, fewer people living in harsh levels of poverty, fewer gender gaps, a cleaner and healthier natural environment and more resilient societies. In this context, we must seize the opportunity of the crisis to strengthen our commitment to the implementation of sustainable development agenda 2030 and its 17goals. By making progress on our road map, for a more comprehensive, stable and sustainable future, enabling us to respond in a better way to future crises.

Finally, this crisis has often exposed the interactive human spirit, the relative level of solidarity and the new unity of purpose that has diminished in the twenty-first century - within countries and societies and across our diverse world. What we need in the post-Corona world is for this spirit and vital energy to be strengthened and moved forward, to become a symbol of the zeitgeist. Not because it favors unilateralism or isolationism, but it represents the only way in which we can survive together in this world - a

safe, free, healthy, prosperous environment in harmony with the aspirations of human communities on the planet.

Figure (4) dynamics of resilience building in communities affected by epidemics



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(16) Social responsibility is seen as the ability of society to play an active developmental role as a mechanism for self-defense and society as a whole, and to provide comprehensive protection to people who need protection or social care when society is threatened by such risks as health crises, illiteracy, unemployment, and lack of access to education, geographical isolation, conflict and others. This capacity is influenced by the nature of cultural diversity within society and the quality of actors in society. The social initiative represents the participation of civil society in ongoing efforts to promote economic growth and development. These potentials vary according to the diversity and potential of actors, local factors, and normative obstacles. Local factors are enhanced by confidence and belief in the capabilities of the community along with physical opportunities, communication, transport, infrastructure, education, banking, health and knowledge capital (qualified personnel with specific skills). Normative obstacles include factors of a formal or legal nature, substantive organizational, bureaucratic, social and cultural, or factors of a political nature. Social initiative

is defined as specific qualitative actions by civil society; oriented towards economic development. In this regard, civil society, rather than other entities, is the largest or smallest social initiator on its development path.

Corona pandemic and the construction of resilience in Iraq

Lessons and opportunities



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