Prolonged insecurity and conflict, along with slow and rapid onset disasters such as droughts and floods, have led to massive population displacement, high needs for humanitarian assistance and a destabilized healthcare system in Somalia.

For 29 years, International Medical Corps has worked in Somalia, providing services that build local capacity and offer emergency relief in health, nutrition, protection, and water, sanitation and hygiene for vulnerable and marginalized populations.
In Somalia, an estimated 2.6 million people are internally displaced due to conflict and climate-related conditions.

As a result of drought and floods, vulnerable communities are predisposed to food crises and disease outbreaks, such as acute watery diarrhea, cholera and acute malnutrition. Of the 5.2 million people in the country in need of humanitarian assistance, more than 2.4 million require lifesaving essential healthcare and nutrition services. Over several decades, International Medical Corps has leveraged robust working relationships with local communities and authorities to offer relief to extremely vulnerable populations across Somalia.

HEALTH CARE

In Somalia’s conflict-affected areas, access to basic healthcare remains a challenge. Through 32 health facilities, International Medical Corps provides primary and secondary healthcare services to more than 500,000 beneficiaries in four Somali regions: Mudug, Middle Shabelle, Bay and Banadir. We also work with five mobile teams across Somalia to ensure that the health needs of those in especially hard-to-reach areas are met.

International Medical Corps offers the following healthcare services in Somalia:

▸ Outpatient and inpatient consultations for common morbidities
▸ Routine immunization for children under five years old and for pregnant women
▸ Antenatal and postnatal care, including nutrition screening and referral for pregnant and lactating women

▸ Promotion of birth spacing and provision of modern family planning methods
▸ Clinical management of rape, including psychosocial support for survivors
▸ Comprehensive and basic emergency obstetric and neonatal care
▸ Health education and promotion at the facility and community levels through community health workers
▸ Response to emergency outbreaks, including acute watery diarrhea, measles and population displacements
▸ Referral services

In addition, International Medical Corps participates in research projects aimed at reducing Somalia’s morbidity and mortality rates, increasing community engagement and improving health monitoring and evaluation. Drawing on our vast experience in providing lifesaving healthcare services in the country, we consistently share lessons learned and best practices with partners and key stakeholders.
NUTRITION
International Medical Corps implements nutrition programs in three regions in South Central Somalia: Galmudug, Middle Shabelle and Bay. We work toward a common goal of reducing malnutrition in children under five years of age, as well as in pregnant and lactating women. In addition to providing direct nutrition service delivery, we focus on building capacity on nutrition, changing social behavior and conducting advocacy. Nutrition services provided by International Medical Corps in Somalia include:

- Nutrition screening and growth monitoring for children under five years old
- Inpatient and outpatient management of severe acute malnutrition, integrated with health, WASH and protection services
- Maternal, infant and young-child nutrition (MIYCN) counseling
- Health and nutrition education and promotion at facility and community levels

WATER, SANITATION AND HYGIENE (WASH)
Poor sanitation and hygiene practices, as well as a lack of access to safe water, can lead to disease outbreaks. International Medical Corps conducts hygiene promotion activities, household visits and mass awareness-raising sessions in four regions in Somalia to sensitize local communities on their role in the prevention of waterborne and hygiene-related diseases. We educate each community on critical handwashing practices, hygienic latrine usage, safe water chains and solid waste disposal. In addition, we distribute hygiene kits for internally displaced populations and host communities to ensure that hygiene and health standards are maintained.

International Medical Corps also strives to ensure that local communities have access to safe and clean water, and to improved sanitation facilities. We routinely construct ventilated improved pit latrines to serve internally displaced persons (IDPs), and have introduced a "community-led total sanitation" approach in six riverine villages in Jowhar to eradicate open defecation. Further, we rehabilitate shallow wells and pipeline connections in IDP camps and health facilities to provide safe drinking water to communities. Finally, we actively advocate for the formation of hygiene clubs in schools, local WASH committees and solid-waste management volunteers who can serve as advocates for change in their communities.

PROTECTION
International Medical Corps’ protection programs aim to help communities improve mental and psychosocial wellbeing and rebuild social structures as part of recovery from disaster.

Our psychosocial programming provides accessible, non-stigmatizing assistance through focused individual interventions, as well as community-based approaches delivered at women and girl safe spaces (WGSS). Our WGSS in Jowhar, Baidoa and Mogadishu districts provide women and girls from displaced families and other vulnerable communities with the coping mechanisms and skills they need to rebuild self-sufficiency, as they work toward recovering from emotionally distressing experiences. Our approach focuses on building strong linkages between community-based psychosocial support and comprehensive mental health case management at health facilities.

Our gender-based violence (GBV) program makes comprehensive clinical and non-clinical case management available to survivors at our health facilities in Baidoa, Mogadishu and Jowhar. We provide survivors of rape, intimate partner violence, forced marriage, female genital mutilation and other forms of physical violence with access to safe, confidential management of injuries, along with psychosocial support and follow-up care.

Through community outreach protection teams, International Medical Corps is working with communities in Somalia to address social stigma and change attitudes towards GBV and psychosocial support needs. These teams help to raise awareness on GBV risk factors and access to GBV services, while supporting communities to identify and adopt community protection strategies.
CAPACITY BUILDING

Within Somalia, International Medical Corps has built extensive experience in training and building the capacity of local health professionals in clinical and non-clinical issues to provide more specialized services. We are committed to supporting the Somalia Ministry of Health (MoH) through training and on-the-job mentoring of MoH staff conducted in line with Somali national curriculum and internationally accredited guidelines, including recommendations from the World Health Organization (WHO). Topics of our training include:

- Case management
- Surgery
- Infection prevention and control (IPC)
- Community health programming
- Integrated management of acute malnutrition (IMAM)
- Mental health and psychosocial support services (MHPSS)
- Gender-based violence (GBV) prevention and response
- Community-led total sanitation (CLTS)

By training and working with community organizations—such as health center committees, WASH committees and mother-to-mother support groups—International Medical Corps is strengthening local capacity to respond to emergency public health needs across Somalia. We are also especially building the capacity of female health workers to provide preventative education and follow up with households on existing health issues. Our goal is to ensure that local communities have the capacity to take care of basic health issues on their own.