International Medical Corps was among the first international nonprofit organizations to establish lifesaving humanitarian programs in Iraq in the aftermath of the 2003 war. Since then, we have been assisting people in need across the country’s 18 governorates. Since 2014, our efforts have focused on meeting the needs of Syrian refugees and conflict-affected Iraqis in northern and central Iraq who experience ongoing violence and insecurity. We incorporate primary healthcare and community health outreach, gender-based violence (GBV) prevention and response, and mental health and psychosocial support (MHPSS) services into our relief programs in Iraq.
International Medical Corps’ long history of supporting Iraqis has enabled us to build trusted, valuable relationships with local government authorities, as well as with United Nations agencies and local and international non-governmental organizations. Our approach to integrated services in Iraq enables service providers to work hand-in-hand with our MHPSS, GBV and child protection (CP) teams when needed.

Our teams serve vulnerable populations, such as GBV survivors and conflict-affected children and youth. In addition to displaced populations, we support communities that host them—a group that often faces tremendous hardships.

To respond to the specific needs of women and girls, International Medical Corps has established five community centers in Dohuk and Erbil. To respond to the complex needs of displaced women and girls—including GBV survivors and those returning to their homes after fleeing war and persecution—each center provides a range of essential services and conducts outreach activities.

**EMERGENCY RESPONSE**

Though many years have passed since the war in 2003, Iraq continues to experience a large-scale humanitarian crisis, as government authorities struggle to restore basic amenities. To support those caught up in ongoing violence, International Medical Corps responds quickly to emergencies anywhere in the country, using prepositioned stocks of essential supplies and an active roster of technical staff who can be rapidly mobilized.

Our community workers (CWs) play a vital role in connecting beneficiaries with project services by conducting regular door-to-door visits.

To ensure that our outreach efforts are practical, we conduct regular needs assessments to help identify community needs and challenges. This enables us to tailor our messages and services to better meet these needs and ensure that our efforts reach those most in need.

We provide services through established static centers, and reach women and girls in remote areas through mobile GBV teams.

Because we believe that community members and local actors can prevent, mitigate and address protection issues, we improve CP response by building the capacity of frontline service providers and strengthening coordination among different protection sectors.

We prioritize integrated MHPSS programs for refugees, internally displaced persons (IDPs) and host communities. In addition, we offer integrated mental health services—including case management, community outreach and specialized clinic and community consultations—to fill significant gaps in services.
COMMUNITY OUTREACH
Our CWs play a vital role in connecting beneficiaries with project services by conducting regular door-to-door visits and delivering tailored messages about reproductive health, CP, GBV and MHPSS to target communities. Our CWs also identify people most at risk and refer them to available services.
In addition, our team conducts weekly educational activities to engage communities and facilitate in-depth discussions on various topics, contributing to community awareness and helping to address issues around health and well-being.
Our staff receive comprehensive training that covers communication skills, GBV prevention and protection mainstreaming, reproductive health, child rights, psychological first aid (PFA), and identification and referral. They also receive training in community mobilization, including the use of social media and other communication channels to disseminate messages and engage with the community.
To ensure that our outreach efforts are effective, we conduct regular needs assessments that help identify the community’s needs and challenges. This enables us to tailor our messages and services to meet each community’s needs better and target our outreach efforts to those most in need.
We work closely with local community leaders and organizations to ensure that our outreach efforts are culturally sensitive and appropriate, and that we are working in partnership with the community.

GENDER-BASED VIOLENCE (GBV)
International Medical Corps is a leader in implementing GBV prevention and response programs in Iraq. We provide survivor-centered GBV case management, risk mitigation and prevention, as well as empowerment and psychosocial services in safe spaces. Our GBV referral system is linked to the CP and MHPSS networks, ensuring integrated care. We provide services through static centers, and reach women and girls in remote areas through mobile GBV teams.
We promote behavior change, prevent GBV and provide a safer environment for women and girls by engaging men—such as traditional male leaders and local stakeholders—through effective communication strategies that challenge harmful gender norms.
We implement programming for adolescent girls that teaches them new skills, empowering them and helping to mitigate the risks they face on a daily basis.
In combatting GBV, our experience has shown that community-led initiatives are vital. They help develop meaningful messaging for the local population and are key to engaging with and building the support needed from government and community leaders to achieve a lasting impact. We provide mentoring to those interested in actively supporting GBV prevention and response. Our GBV outreach workers run community-based prevention and response campaigns, identify vulnerable women and girls, inform them of available services and, if needed, make referrals.

CHILD PROTECTION (CP)
Because we understand the role that community members and local actors play in preventing, mitigating and responding to protection issues and concerns, we aim to enhance CP response, mitigation and prevention by building the capacity of frontline service providers and strengthening coordination among different protection sectors. We also engage with government institutions by building their capacity and improving their knowledge about CP rights and concerns.
Mental Health and Psychosocial Support (MHPSS)

International Medical Corps prioritizes integrated MHPSS services for refugees, IDPs and host communities. We provide mental health case management, community outreach and specialized consultations at the community and clinic levels. We train local stakeholders on brief psychological interventions, such as PFA, Problem Management Plus, mental health case management and the WHO Mental Health Gap Action Programme. We are helping the Ministry of Health develop and implement its national MHPSS strategy, which includes supporting 20 psychosocial units within primary and secondary health facilities across the country.

Capacity Building

We provide training and capacity development for partners, to strengthen local capacity and ensure that they are able to provide high-quality services. Because of the lack of trained mental health professionals in Iraq, we help governmental and non-governmental institutes build mental health and psychosocial well-being capacity. We train case managers and frontline workers on how to identify and manage simple cases and refer severe cases to specialists.