

Iraq



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, mental health and psychosocial support (MHPSS), and capacity building for child protection (CP) services into our relief programs in Iraq.



International Medical Corps' long history of supporting Iraqis has enabled us to build trusted relationships with local government authorities, United Nations agencies, and other international and local NGOs. Our integrated approach enables service providers to effectively collaborate with our MHPSS, GBV and CP teams.

We focus on vulnerable populations, such as GBV survivors and conflict-affected children and youth. We support displaced populations as well as the communities that host them—a group that often faces tremendous hardships.

To address the specific needs of women and girls, International Medical Corps has established two women's and girls' safe spaces (WGSS) in Dohuk and plans to deploy mobile teams in Erbil. These centers offer essential services and outreach activities to support GBV survivors, as well as vulnerable refugees, internally displaced persons (IDPs) and returnees.

EMERGENCY RESPONSE

Though many years have passed since the 2003 war, 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 health workers (CHW) 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 CHWs play a vital role in connecting beneficiaries with project services by conducting regular door-to-door visits and delivering tailored messages about CP, GBV and MHPSS to target communities. They identify the most at-risk people 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 addressing issues around health and well-being.

Our staff receive comprehensive training that covers communication skills, GBV prevention and protection mainstreaming, positive parenting, child rights, psychological first aid (PFA) identification and referral, and community mobilization. The latter includes the use of social media and other communication channels to disseminate messages and engage with the community.

To ensure our outreach efforts are effective, we conduct regular assessments to identify the community's specific needs and challenges. This enables us to tailor our messages and services to better meet each community's requirements and target those most in need.

We work closely with local community leaders and organizations to ensure our outreach efforts are culturally sensitive and appropriate.

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 response and prevention, and empowerment and psychosocial services, skills building and recreational activities in safe spaces. Our GBV referral system is linked to our CP and MHPSS networks, ensuring integrated care. We provide GBV services through static WGSS and reach women and girls in remote areas through mobile teams.

To prevent GBV and provide a safer environment for women and girls, we engage men—including traditional male leaders and local stakeholders—through effective communication



strategies that challenge harmful gender norms and promote behavior change.

Our programming for adolescent girls teaches them new skills, empowering them and helping mitigate the risks they face daily.

Our experience has shown that community-led initiatives are vital in combatting GBV. These initiatives, which involve meaningful messaging for local populations, 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 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 delivers integrated MHPSS services to refugees, IDPs and host communities through mental health case management, community outreach and specialized consultations at both the community and clinical levels. We train local stakeholders in providing brief psychological interventions, such as PFA, mental health case management, and the World Health Organization's Problem Management Plus and Mental Health Gap Action Programme. We helped the Ministry of Health develop and implement its national MHPSS strategy, which included supporting many psychosocial units within health

facilities. We are currently supporting the reactivation of six psychosocial units within primary healthcare centers, and the establishment of two mental health service users associations.

CAPACITY BUILDING

To address the lack of trained mental health professionals in Iraq, we provide training to help partners strengthen national and local capacity, ensuring that stakeholders can respond to protection and MHPSS needs efficiently. After training, participants receive continued supervision to enhance their learning and ensure that they are applying skills appropriately.



During emergencies, the percentage of common mental disorders can double, while those with pre-existing mental illnesses often lose access to care.



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A pre-eminent first responder since 1984, International Medical Corps delivers emergency medical and related services to those affected by conflict, disaster and disease, no matter where they are, no matter what the conditions. We also train people in their communities, providing them with the skills they need to recover, chart their own path to self-reliance and become effective first responders themselves.

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