





# CARE INTERNATIONAL IN IRAQ





**Country Snapshot** 

Population:

Life expectancy at birth:

Access to improved water source: GDP per capita:

Infant mortality rate: Maternal mortality rate:

HIV prevalence:

**Number of Internally Displaced** 

34.8 million

69.4 years

86.6%

US\$ 14,471 (2011 PPP \$) 28 per 1,000 live births

50 per 100,000 live births

3.1 million

Sources: http://hdr.undp.org/en/countries/profiles/IRC http://data.worldbank.org/country/iraq?view=chan http://iraadtm.iom.int/DtmReports.asp

BRIEF HISTORY OF CARE IN IRAQ: CARE International (CI) was first established in Iraq after the first Gulf War in 1991. From 1991 to 2004 CI worked throughout Iraq, from the Kurdistan Region to central and southern Iraq and Baghdad during the second gulf war. CARE's programs during this time period included food aid and security, livelihoods, logistics, support to healthcare facilities, reconstruction and relief. In October 2004, CI terminated all activity following the kidnapping and murder of the CI Country Director. From 2004 to 2014, CARE had no operations in Iraq, but maintained contacts and continued to monitor the situation.

In 2014, a military offensive by extremist armed groups in Ninewa displaced hundreds of thousands of people into the Kurdish Region of Iraq (KRI), and CI took the decision to reopen programming in Iraq. From the inception of humanitarian operations in KRI in November 2014, CARE International focused on setting up small-scale, high-quality interventions implemented through local partners. In 2016, CI reached 52,900 beneficiaries.

## **Presence**

CARE International currently maintains its main office in Dohuk in KR-I. It has a regular presence in Erbil for coordination purposes, as well as a representational office in Baghdad. CARE International is registered with the Kurdistan Regional Government and is currently in the process of reopening registration with the Iraqi Federal Government.

# Cl's 2016-2018 Strategy in Iraq

CARE International seeks to expand our humanitarian response in Iraq to save lives and meet the urgent humanitarian needs of women, men, boys and girls affected by sectarian violence in Iraq and Syria. Through our humanitarian initiatives, CARE will promote the empowerment of women and inclusive governance in the communities we support, and increase the resilience of displaced and host communities.

CI's target is to meet the needs of 250,000 people in need by 2018; this is approximately 8% of the estimated 3.2 million people currently displaced in Iraq.

## **Primary Objectives 2016-2018**

- Improved WASH access for women, men, girls and boys in camp, off camp (including host communities) and returnees in accessible parts of northern Iraq.
- Improved access to emergency shelter and essential non-food items for women, men, girls and boys in camp, off camp (including host communities) and returnees in accessible parts of northern Irag.
- Improved access to high quality SRH services through capacitated clinics and health facilities and local health professionals, engaging both men and women in targeted communities, with women engaged as active stakeholders in planning and delivering services.
- Affected populations in the target areas are supported to sustain and eventually recover their livelihoods.
- Improved protection for women, men, boys and girls in camp, off camp (including host communities), and returnees in accessible parts of northern Iraq.

#### **Ongoing Programs**

- Water, Sanitation and Hygiene Promotion, Shelter, and Protection in IDP Camps in Northern Iraq: Construction and ongoing repair and maintenance of WASH infrastructure (latrines, bathrooms, laundries), including desludging of septic tanks; garbage collection and waste management; construction of tent slabs; distribution of hygiene kits and solar lighting in the camps of Bersive 1, Darkar, Chamisku, and Sheikhan, and Darkar and Bersive villages.
- Maternal Health in the Zummar area of Northern Iraq: Improved maternal and child health in returnee areas in Northern Iraq; activities include the rehabilitation and equipment of 3 Primary Health Centres (PHC) in Rabiya, Bardiyaa and one to be identified; training of Traditional Birth Attendants (midwives); family planning; provision of micronutrients for women and babies, and baby kits for new mothers.
- **Mosul:** CARE has prepositioned WASH and Shelter/ NFI<sup>1</sup> materials for 2,500 families in its warehouse in preparation to assist people displaced by the ongoing Mosul Offensive. CI in Iraq is currently working with its

local partner REACH to carry out assessments for a planned intervention in newly accessible areas to the North and East of Mosul.

#### **Partners**

- **Harikar** NGO is an Iraqi-Kurdish Non-Governmental Organization founded in 2004. Harikar is headquartered in Dohuk and works with a number of INGO partners as well as UN agencies;
- **REACH** (Organization of Rehabilitation, Education and Community Health) is an Iraqi-Kurdish NGO founded in 1995. REACH is headquartered in Suleimaniyah and works with a number of INGO partners as well as UN agencies.

#### **Donors**

CARE's ongoing programs are funded by the German Ministry of Foreign Affairs, Global Affairs Canada (GAC), Luxembourg Ministry of Foreign Affairs, the Dutch Relief Alliance, BMZ - Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung, and the United Nations Iraq Humanitarian Pooled Fund (UNIHPF).

## **Specific Areas of Focus**

- **Gender and Protection:** In Iraq CI is building on its global capacity in this sector to strengthen and improve our positioning in gender in emergencies. CARE is carrying out rapid gender analyses in current and future programming areas, to ensure that our programming is built on accurate assessments of the needs of women, girls, boys and men.
- Cash Programming: CI in Iraq is committed to using cash a mode of assistance, recognizing that unconditional multi-purpose cash grants allow people to make their own decisions about how the assistance provided can help them meet their immediate needs
- Accountability to affected Populations. CI in Iraq is committed to ensuring accountability to the people we serve by instituting access to functional, safe, and confidential complaint and reporting mechanisms.







<sup>&</sup>lt;sup>1</sup> NFI = Non-Food-Items



### **CARE's intentions in 2017**

- Mosul Offensive and Returns: The Mosul offensive has not yet resulted in the massive outflow of IDPs originally anticipated by the humanitarian community, and the conflict will likely continue throughout 2017. CI in Iraq will draw on its pre-positioned emergency stocks and wherever possible, deliver humanitarian aid in newly accessible areas. Concurrently, CI in Iraq will seek to support returnees to these newly cleared areas in the sectors of WASH, Shelter, Livelihoods and Protection.
- **Zummar Area:** The Zummar area suffered enormous devastation in 2014 and significant efforts are required to ensure that basic services are in place for the returning population. CI in Iraq will seek to expand its current maternal health programming and incorporate new programming especially focusing on social cohesion and protection/gender issues.
- Current caseload of IDPs and Refugees in Northern Iraq: The ongoing Mosul offensive and multiple humanitarian crises around the world have somewhat detracted from the support given to the 300,000+ people currently living in camps in Northern Iraq. CARE will continue to advocate and seek funding to ensure that people in these camps, as well as the surrounding host communities, have their basic needs met within the sectors of WASH, Shelter and Protection.

CARE Iraq

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