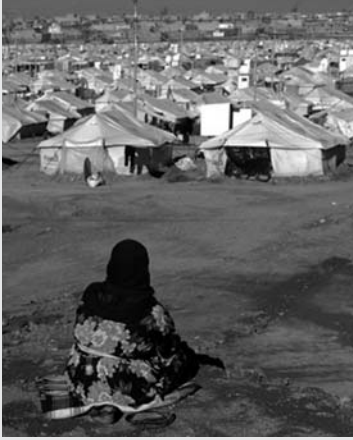


Broken Lives:
Violence against Syrian refugee women
and girls in the Kurdistan Region of Iraq



Cover photo:

Erbil, Iraq: An elderly woman sits on a hillside overlooking the tents at the Kawergosk Syrian Refugee Camp, December 2013.

© Babak Sedighi/Panos Pictures

© Ceasefire Centre for Civilian Rights and Asuda, March 2018.

This report has been produced with the financial assistance of the UN Trust Fund to End Violence against Women. The contents of this report are the sole responsibility of the publishers and can under no circumstances be regarded as reflecting the position of the UN Trust Fund to End Violence against Women.



Ceasefire Centre for Civilian Rights

The Ceasefire Centre for Civilian Rights is a new initiative to develop ‘civilian-led monitoring’ of violations of international humanitarian law or human rights, to pursue legal and political accountability for those responsible for such violations, and to develop the practice of civilian rights. The Ceasefire Centre for Civilian Rights is registered as a charity and a company limited by guarantee under English law; charity no: 1160083, company no: 9069133.

Asuda

Asuda is a non-governmental, non-profit organization established on 21 August 2000. Asuda’s vision is a world where women enjoy dignity and equal rights and access to resources and opportunities, where all forms of discrimination and marginalisation against women have been eliminated, where violence plays no part in women’s lives. Asuda seeks the attainment of a safe environment for women, free from all forms of violence, where they enjoy their rights, fulfill their responsibilities, experience equality before the law, benefit from the provision of legal services, raise their awareness and advocate for their rights, and lead development programs that benefit their communities.

Written by Miriam Puttick.

Report designed by Staša Sukic.

Material from this publication may be reproduced for teaching or other non-commercial purposes, with appropriate attribution. No part of it may be reproduced in any form for commercial purposes without the prior express permission of the copyright holders. Published March 2018. Printed in the UK on recycled paper.

Table of contents

1	Introduction	4
2	Background on Syrian refugees in the KR-I	7
3	Patterns of violence against Syrian refugee women and girls in the KR-I	9
4	Institutional and official response to gender-based violence	15
5	Conclusion and recommendations	18

1

Introduction

Conflict and displacement crises around the world are associated with an increase in gender-based violence (GBV), including intimate partner violence, conflict-related sexual violence, child marriage, sexual harassment, trafficking, and other forms of violence.

According to the World Health Organization, on the global level, one in three women have experienced gender-based violence.¹ While all regions of the world are affected by GBV, conflict situations in particular often lead to an exacerbation of existing patterns of violence.²

The eruption of conflict in Syria since 2011 has led to the biggest humanitarian and refugee crisis in current times.³ As of February 2018, more than 6.1 million Syrians are internally displaced and an additional 5.6 million have sought refuge outside the country.⁴ The vast majority of Syrian refugees are being hosted in five countries in the region: Turkey, Lebanon, Jordan, Egypt and Iraq. According to a UNHCR report on GBV in refugee situations in the Middle East and North Africa, ‘refugees—and women and girls in particular—face increasing risks of violence, abuse and exploitation as their displacement becomes more protracted.’⁵

Iraq is currently hosting 247,057 Syrian refugees, the majority of whom are in the Kurdistan Region of Iraq (KR-I). The reception that Syrian refugees received in the KR-I is sometimes seen as a positive example for the region. The Kurdish Regional Government (KRG) granted Syrian refugees residency status, allowing them to work and access public healthcare and education. Many Syrian refugees found jobs

in the local economy, their participation facilitated by a common language and culture shared with Iraqi Kurds. Despite these positive initiatives, however, GBV has been a pervasive concern for Syrian women and girls in the KR-I since the beginning of the refugee crisis. Early studies found that many Syrian women and girls felt insecure due to high levels of sexual harassment and exploitation, rising intimate partner violence, and the pervasiveness of transactional sex and forced marriage in the camps.⁶

Since 2014, there have been dramatic changes to the economic, political and security situation in the KR-I. The ISIS takeover of large parts of Iraq in 2014 led to an influx of approximately 1.5 million internally displaced persons (IDPs) into the KR-I. At the same time, the KR-I economy was hard-hit by the impacts of fiscal disputes with Baghdad, a drop in oil prices, and declining foreign investment. Both government and humanitarian actors struggled to respond to the immediate needs of both IDPs and refugees in a context of limited resources. This has had negative repercussions for the livelihoods of the Syrian refugee population as a whole, and by extension, the well-being of women and girls.

This report investigates current patterns of violence affecting Syrian women and girls in the KR-I. It finds that the

pressures associated with displacement, combined with the deteriorating economic situation of refugees in the KR-I, have led to rising levels of domestic violence within Syrian families. In particular, intimate partner violence is on the rise, although other forms of violence within the family are also common. In addition, sexual harassment and early marriage remain major issues of concern.

Despite the fact that organizations and authorities working in refugee communities in the KR-I are increasingly incorporating GBV prevention into their programming, this report finds that the majority of Syrian women and girls facing violence do not report their experiences or seek assistance from any organization or authority. This shows that there is a major discrepancy between the stated aims and methods of GBV prevention programming, and the actual reality of survivors of violence.

This report's findings rely primarily on experiences related by Syrian women and girls themselves. In addition to identifying and analyzing the main patterns of violence experienced by Syrian women and girls, the report also seeks to identify gaps and shortcomings in the services and remedies currently available to survivors, and present recommendations for improvement.

Methodology

This research is part of a two-year project carried out by Asuda and the Ceasefire Centre for Civilian Rights, supported by the UN Trust Fund to End Violence against Women. The project aims at improving the well-being of Syrian refugee women and girls in the KR-I who have been subjected to sexual and gender-based violence, through a combination of research, advocacy, awareness-raising and support service activities.

This report is a mixed-methods study relying on both primary and secondary data collection methods. Primary data collection took place over a four-month period, between September 2017 and January 2018. A team of six female researchers trained by Asuda conducted in-depth interviews with 92 Syrian women and girls who had experienced violence since their arrival to the KR-I. Interviews took place in the three governorates of Erbil, Sulaymaniyah and Dohuk. Unlike much existing research, which relies heavily on data collected in camp settings, the interviews for this report were conducted in both camp and non-camp settings, the latter being where most Syrian refugees are located.

Asuda's researchers used a variety of strategies to identify and locate survivors of violence. Outside of camp settings, the researchers worked with local community leaders (mokhtars) to gain their trust, promote understanding of the project, and ensure access to the community. In many cases, Syrian women interviewed were able to refer the researchers to other women in the community who had experienced violence. In other cases, women who had approached Asuda's offices or listening centres seeking legal aid and other forms of assistance were identified for inclusion in the study. The names of all women and girls interviewed for this report have been changed for their protection.

Secondary data collection undertaken for this report included a review of available demographic and socio-economic data relevant to Syrian refugees in the KR-I. In addition, materials published by governmental, intergovernmental and non-governmental sources containing information on GBV prevention strategies and programming being implemented in the KR-I were also consulted. The report also refers to the findings of previous research conducted on gender-based violence against Syrian women and girls in the KR-I.



Challenges and limitations

Conducting research on GBV presents many challenges due to the complexities and sensitivities of the subject matter. Some of the challenges that affected data collection for this report include:

- **Taboos and stigma:** many women were unwilling to speak openly about experiences of GBV, and particularly experiences of sexual violence. Researchers respected the right of participants to divulge or not divulge as many details as they wished. Consequently, the relatively low incidence of sexual violence reported by interviewees should not be taken as an indication that such violence is not occurring, nor should the GBV issues raised in this report be considered exhaustive.
- **Participant exhaustion:** Some Syrian women and girls felt that organizations were undertaking a lot of data collection, but that they rarely saw any positive outcomes. As a result, although researchers explained the purpose of the research to all potential participants and provided information about other support services available to them, some did not feel that participating in the interview would bring any benefit.
- **Economic vulnerability:** Many Syrian refugees are in desperate economic situations, and extremely preoccupied with their daily survival needs. As a result, some women and girls were unwilling to participate in the research unless compensation was provided. (For ethical reasons, no material incentives were offered to any participants in the research.)
- **Presence of male relatives:** Due to high unemployment rates, many Syrian men spend most of their time at home. As a result, it was often difficult to find opportunities to interview survivors of violence at a time when male relatives were not present, particularly in non-camp settings. This problem was mitigated by providing women with a dedicated number for the research team that they could call when they were alone, and by using a private space for interviews in camp settings.

2

Background on Syrian refugees in the KR-I

Syrian refugees first started arriving in Iraq in 2012, with the largest waves of displacement occurring in 2013 and 2014. The majority of Syrian refugees in Iraq are Kurds from Al-Hasakeh governorate in northeastern Syria, although there are also significant populations from Damascus and Aleppo governorates.

According to UNHCR figures from December 2017, there are currently 247,057 registered Syrian refugees in Iraq (53.5 per cent male, 46.5 per cent female). Of this total, 238,947 (97 per cent) are living in the KR-I. Approximately 63 per cent of Syrian refugees are living outside of camps in urban, peri-urban and rural settings. The remaining 37 per cent are housed in ten different refugee camps: Domiz 1 & 2, Darashakran, Kawergosk, Gawilian, Arbat, Qushtapa, Basirma, Akre and Gawilian.

The initial entry of Syrian refugees occurred at a time of relative economic stability and prosperity in the KR-I, and refugees were given a largely positive reception by the government and host community. The Kurdish authorities granted residency status to the majority of Syrians, which allowed them to work.⁷ Many Syrian men were able to find jobs in the construction, retail and hospitality sectors and were sometimes even sought out by employers for their skills and work ethic.⁸ Others set up and run small businesses inside the camps.⁹ Refugees, however, were not permitted to own land or property or to register their own businesses outside of the camps.¹⁰

The Kurdish authorities also granted Syrian refugees the right to access public healthcare and education. However, a

variety of factors including the distance to facilities and discretionary fees served to circumscribe many refugees' ability to access healthcare.¹¹ Attending school presented similar obstacles, with many parents unable to afford the cost of transportation to far-off schools.¹² Language is another barrier; refugee children, even if they speak Kurdish at home, would have received their education in Arabic in Syria, but schools in the KR-I teach in the Kurdish language.¹³

In 2014, the situation in the KR-I changed dramatically. First, the KR-I's 17 per cent share of the Iraqi budget was withheld by Baghdad due to a political dispute. The holdback of this share, equivalent to \$12 billion a year or 80 per cent of the Kurdistan Regional Government's budget revenues, led to a paralysis in public spending.¹⁴ Second, the ISIS takeover of Mosul and advance into many other parts of Iraq led to an influx of approximately 1.5 million internally displaced persons (IDPs) into the KR-I, increasing its population by 30 per cent.¹⁵ Finally, a world drop in oil prices, disruption to supply routes caused by the conflict with ISIS, and declining foreign investment led to further negative impacts on the economy.¹⁶ In connection with the crisis, GDP growth dropped from 8 per cent to 3 per cent between 2013 and 2014.¹⁷ Poverty levels rose from 3.5 per cent in 2012 to 8.1 per cent in 2014.¹⁸

The above developments have had severe consequences for the livelihoods of Syrian refugees. The ISIS advance led to much donor attention and funding being directed towards accommodating the newly arrived Iraqi IDPs, and competition for resources and jobs increased between IDPs and refugees.¹⁹ Rents, food and commodities increased dramatically in price.²⁰ The construction sector, where many Syrian refugees work, was particu-

larly hard-hit by the crisis, with many small companies declaring bankruptcy.²¹ Demand for labour also decreased in the service sector and other sectors.²² In a 2014 assessment conducted across Syrian refugee camps in the KR-I, 47 per cent of respondents reported no source of cash or income for their household in the preceding 30 days, while 65 per cent of households reported their income was insufficient to fulfill all of their basic needs.²³ In a 2015 assessment of Syrian refugees living in non-camp settings, 12 per cent of households reported lack of food in the preceding seven days.²⁴ Despite all of this, the livelihoods sector is the most under-funded sector in the refugee response in the KR-I, with only 3 per cent of required funding received as of June 2017.²⁵

Women and girls are disadvantaged in specific ways as a result of the persistently poor socioeconomic situation in the KR-I. Despite the income of male breadwinners being insufficient to meet household needs in many cases, social norms prevent the majority of women from seeking employment. Only 6% of Syrian women living in camps are active in the labour market.²⁶ Women have also reported fear for their personal safety as a reason preventing them from seeking employment outside the camps. Lack of childcare services also acts as a barrier to women's employment, especially considering that more than half of school-age refugee children in the KR-I are out of school.²⁷ This is a particular challenge for female-headed households, which represent 25% of Syrian refugee households in the KR-I.²⁸ Humanitarian actors have reported a rise in negative coping strategies such as child marriage and survival sex among refugee women as a response to restricted livelihoods options.²⁹

Table 1: Syrian refugee settlements by governorate

Location	No. of residents
Erbil Governorate	
Darashakran camp	11,608
Qushtapa camp	7,900
Kawergosk camp	7,951
Basrima camp	3,112
Total camp:	30,571
Total non-camp:	90,126
TOTAL:	120,697
Dohuk Governorate	
Domiz 1 camp	32,592
Domiz 2 camp	9,895
Akre camp	1,173
Gawilian camp	8,607
Total camp:	52,267
Total non-camp:	34,367
TOTAL:	86,634
Dohuk Governorate	
Arbat Camp	8,722
Total camp:	8,722
Total non-camp:	22,894
TOTAL:	31,616

Source: UNHCR, December 2017

3

Patterns of violence against Syrian refugee women and girls in the KR-I

The data in this section is drawn from a series of 92 interviews with Syrian women and girls who had experienced violence, conducted in the three Kurdish governorates of Erbil, Suleymania, and Dohuk. Although the majority of Syrian refugees living in the KR-I are of Kurdish ethnicity, the interviews for this report included women and girls of both Arab and Kurdish ethnicity.

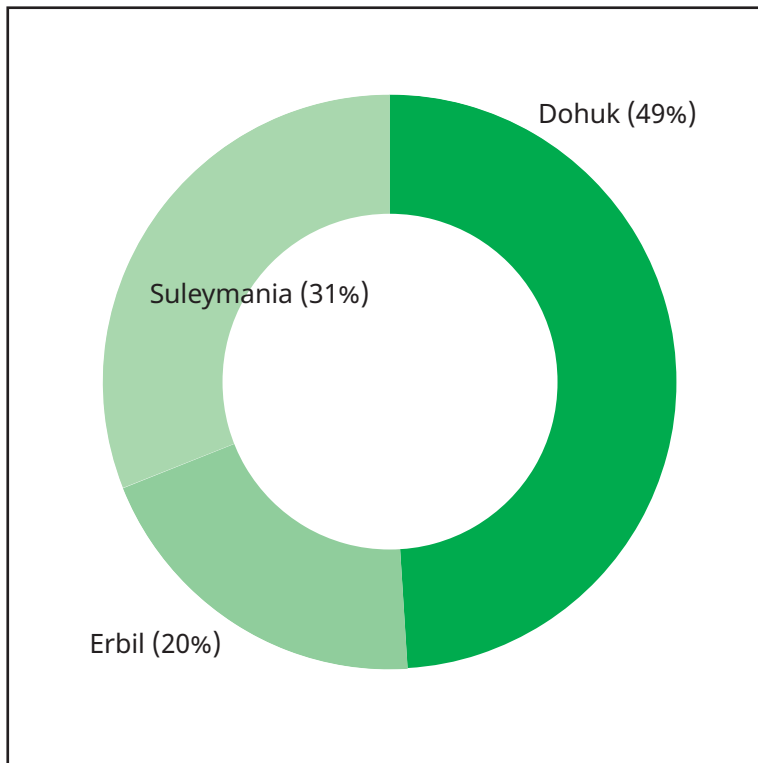
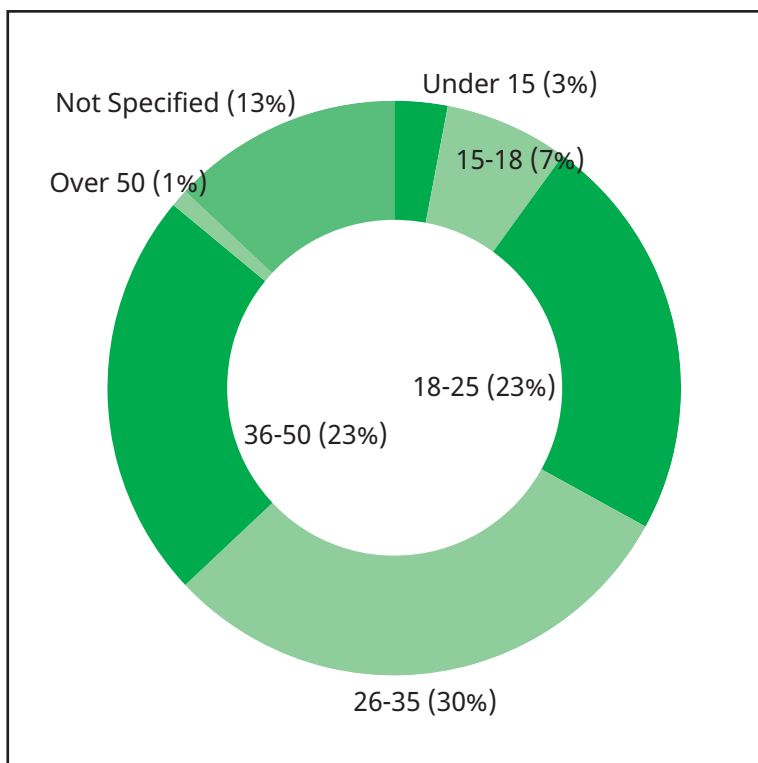
The distribution of interviews across the three governorates was 20 per cent, 31 per cent and 49 per cent respectively (Figure 1). Unlike much existing GBV research and programming conducted within the Syrian refugee community, this report did not rely exclusively on data collected within camp settings. Instead, efforts were made to ensure representation and inclusion of Syrian women and girls living in both camp settings and non-camp settings (49 per cent and 51 per cent of interviews, respectively). It was important to ensure coverage of both camp and non-camp settings for a number of important reasons. First of all, non-camp settings are where the majority of Syrian refugees in the KR-I live. Secondly, there are key differences between camp and non-camp settings that play a role in women and girls' well-being – such as the availability of employment and ease of access to support services.

Among the women interviewed for this report, married women of reproductive age formed the main demographic group facing violence. The vast majority of survivors interviewed (76 per cent) were between the ages of 18 and 50. Within this bracket, women between the ages of 26-35 con-

stituted the largest share (30 per cent of all cases). In addition, 65 per cent of the total number of women interviewed for this report were married.

The most common form of violence reported by women was emotional or psychological violence, followed by physical violence. Other forms of violence reported included sexual violence, economic violence, harassment, and early marriage. A large number of women reported experiencing multiple forms of violence. For example, physical violence was nearly always accompanied by emotional or psychological violence, and sometimes sexual violence.

In the majority of cases (66 per cent), the perpetrator of violence was the woman's husband. Other perpetrators included the community (12 per cent), parents (7 per cent), the husband's family (4 per cent), romantic partners (2 per cent) and brothers (2 per cent). In many cases, women reported multiple forms of violence by different perpetrators. For example, some women experienced domestic violence from their husbands as well as sexual harassment from members of the community.

Figure 1: Breakdown of interviews by governorate**Figure 2:** Breakdown of cases by age of victim

Intimate partner violence

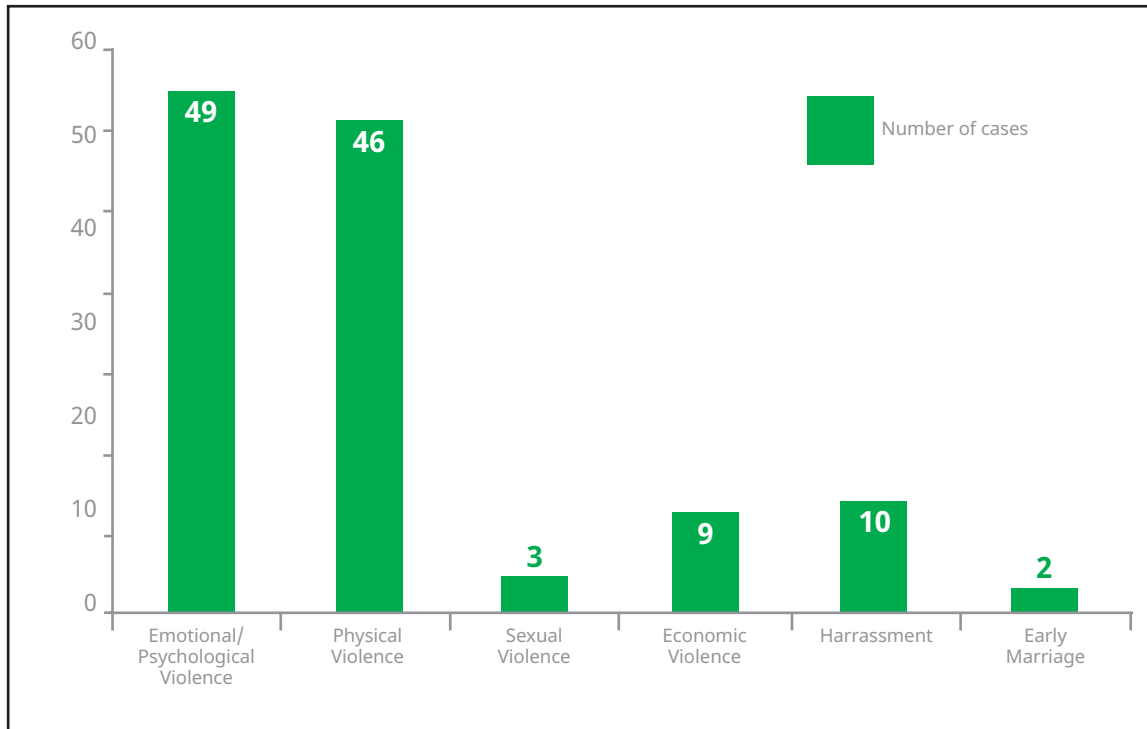
(A) was divorced when she came to the KR-I from Syria, but then got remarried to another Syrian refugee. From the time they moved to the camp, she experienced severe beatings from her husband. She was reluctant to report it to the authorities because she was afraid that he would leave her to live alone in the camp. She became pregnant, and after giving birth in one of Dohuk's hospitals, her child was stolen from her. She believes her husband's family was responsible, since her husband threatened her and also did not inform the authorities about the incident. Her husband later divorced her and travelled to Turkey with his family.

Intimate partner violence – whether emotional, physical, sexual, economic or a combination – was the most common problem reported by Syrian women and girls. Women experiencing intimate partner violence fell into two categories. Some had been experiencing problems in their marriages even when they were living in Syria, which then became worse after fleeing to Iraq. Others reported that problems only began after their arrival in Iraq. In both cases, displacement and related pressures were associated with an increase in violence inside the home.

(B) came to the KR-I with her family in 2014 after the outbreak of armed conflict in their area in Syria. She was married for a period of two years, during which time she experienced physical violence and emotional abuse from her husband, who was schizophrenic. She attempted suicide multiple times, and is in a poor emotional state.

Most women attributed the violence they were experiencing in their relationships to the difficult financial conditions they were living under as refugees. The inability of many households to make enough income to meet their basic needs was a major cause of stress and frustration in the home, which often translated into violence. The fact that many husbands were unemployed and at home all the time led to frequent arguments and tension.

(C) comes from Qamishlo, Syria. After she and her husband were displaced several times, they finally ended up in Erbil. (C) is suffering from frequent

Figure 3: Breakdown of cases by form of violence

physical abuse by her husband. He beats her over and over again, and sometimes people intervene to try and stop him, but to no avail. (C) says that her husband is unable to find a job, and this affects him a lot, so he takes out his anger out on her. She wishes an organization would help her and her husband to find work, because this might help improve their relationship. She is adamantly against getting a divorce, because she has a child and is living away from her family.

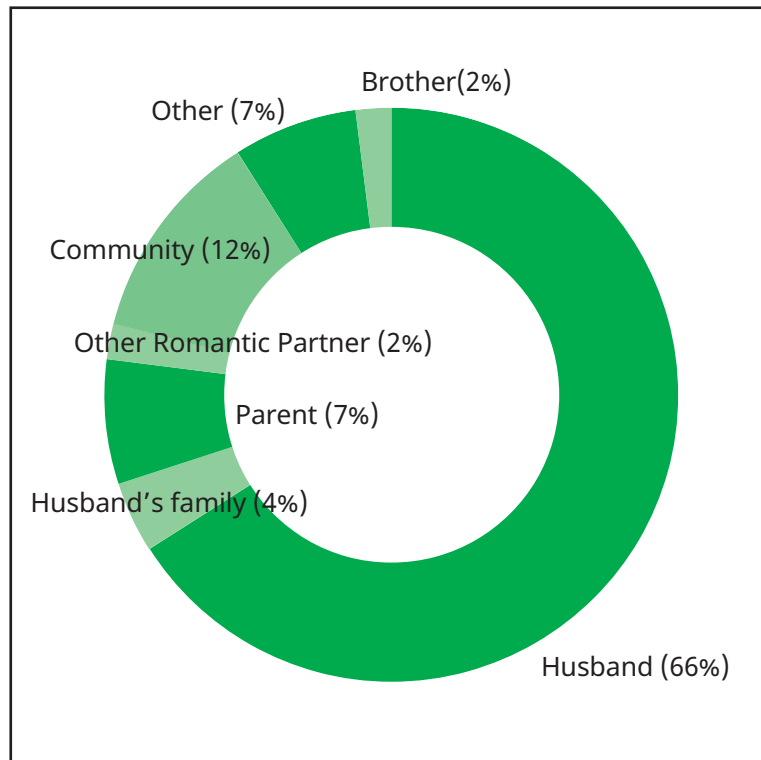
(D) had an arranged marriage to a carpenter back in Syria, and they came to the KR-I in 2013. The husband has had a hard time making enough income from his profession. They have been struggling to pay the rent and purchase supplies for their children. Whenever the husband is working, everything seems fine, but the times when he is at home and doesn't have work, he becomes angry at his wife and screams at her.

Many of the women interviewed were living in small quarters with multiple children. This was clearly another major source of stress in the family, and many households were struggling to meet their children's basic needs with their limited income. In one camp visited during the course of the research, project staff were told that a baby boom had occurred during 2017 – likely connected to the rise of

unemployment and the fact that both spouses were at home all the time in many households.

(E) arrived in the KR-I in 2011. She has five children: four girls and a boy, one of whom is a newborn. Her husband is a social worker who has been struggling to find work. Due to financial issues, they struggle to afford the simplest of necessities such as milk and diapers for the children. She is constantly losing her temper at her husband because he sits around at home. He replies that there is hardly any work for him to do. They fight in front of the children and sometimes he threatens that he will beat her, and sometimes he actually beats her.

It was evident that most refugee women either did not have access to birth control, or were unwilling to use it for religious or cultural reasons. Many women attached high importance to having children, regardless of their difficult circumstances. One researcher was told the story of woman who became pregnant against the advice of her family and friends, who were concerned about the absence of any hospital close to their camp. Both the mother and child died mid-way through the pregnancy. The lack of affordable and accessible maternal healthcare services therefore adds to the stress experienced by many expectant parents.

Figure 4: Breakdown of cases by perpetrator

(F) arrived in the KR-I in 2011 with her husband. She has a history of miscarriages. Since their firstborn, she has had five miscarriages due to chromosomal abnormalities in the fetus. Recently, she became pregnant again. The doctor said that the child would have birth defects and suggested an abortion, which the couple refused. Now, (F) is in her ninth month of pregnancy and fears that they will not be able to afford the new baby's expenses and hospital bills, especially as they have been told the baby will need to stay in the intensive care unit. This has put the couple under constant stress. The father feels he cannot provide for his unborn child's survival, and the mother is in a state of unrest and always fights with her husband for the simplest reasons. When the husband gets angry, he yells at her and tells her that 'the problem is with you, you cannot have a healthy child,' and threatens to leave and marry another woman.

Although most of the married women interviewed were married to other Syrian refugees, a few had entered into marriages with men of Iraqi nationality after arriving in the KR-I from Syria. Some of these marriages opened women to distinct forms of abuse:

(G) got married outside of the court to a man of Iraqi nationality. She experienced physical, sexual and emotional violence from her husband and his family on a daily basis. He also threatened her because her marriage was not legally recognized, so she was afraid of the problems she might face if her husband left without authenticating the marriage. Then, her husband left with another woman and travelled outside of Iraq, stealing her gold jewellery. Now, she is suffering from financial, legal and emotional problems as a result.

(H) came to the KR-I in 2012 with her family, and the following year she fell in love with a man from Suleymania. They got married and she moved in with her husband's family. At first, they were happily married, although they often had arguments due to cultural differences. As time went by, her husband's parents and sisters started to put pressure on him, saying that a real man wouldn't allow his woman to talk back at him. (H)'s husband would become angry and yell at her, insulting her and her family for being Syrian. Eventually, he started beating her, sometimes leaving bruises on her face and body. At home, his sisters and mother would give her a lot of strenuous housework because she is a Syrian and is a stranger to them. (H) kept her suffering a secret from her family and did not reach out to anyone for assistance.

Economic violence

Prevailing social norms among most of the Syrian refugees in the KR-I mean that the male head of household is expected to provide for the rest of the family. Only 7 of the 92 women and girls interviewed were employed and earning an income. Although dependence on the male breadwinner was accepted by many women as natural, it also put some in a vulnerable position, in some cases opening them to economic abuse:

(I) was forced to get married at a very early age due to her family's financial situation, and she says she was not ready to be in a relationship. She was also forced to leave school. Her husband refuses to spend on her and her two children, and hits and insults her on a continuous basis.

(J) has two children and suffers from psychological issues. Her mental disorder started after they

escaped from Syria as a result of civil war. Now she doesn't talk to anyone, but her husband still prevents her from receiving medical and psychological treatment.

In one case, a woman's husband refused to allow her to work even when their household had no other source of income.

(K) fled to the KR-I with her husband and two children after ISIS took control of her city. Their financial situation is very poor. Her husband is unemployed and does not accept the idea of his wife working, which has affected her mindset and emotional state in general.

In another case, a woman was the sole breadwinner for a household of seven people, due to her husband's unemployment. However, the husband exerted control over spending of the woman's income.

(L) has six children. Her 56-year-old husband doesn't work. She works and earns money for the family, but her husband takes it to buy alcohol.

Women's economic dependence on men also acted as a strong deterrent to divorce. This was especially true for women with multiple children, who feared they would not be able to provide for them in the event of a separation. As a result, even women experiencing multiple types of abuse preferred staying in their marriages to divorce.

(M) is married with six children. Her husband doesn't spend on her at all, despite the fact that he has been working in the KR-I for more than a year and a half. She is suffering from several physical illnesses and has no income except for the aid provided by international and local organizations and the camp administration. She and her children also suffer from continuous beatings by the husband. She has not reported this because she is afraid he will divorce her and then there will be no one with them in the camp. He has also threatened that he will send her back to Syria and marry another woman.

In a number of cases, women were left in a financially vulnerable situation after the departure of their husbands. It is common for Syrian refugee men to travel onwards to Europe or other destinations, in order to seek out opportunities or ensure

that the passage is safe before bringing their families. However, this often leaves women in a state of flux and uncertainty, forcing them to find alternative ways to provide for their households in the husband's absence.

(N) came to the KR-I in 2014 and has three children. She used to experience physical violence and emotional abuse from her husband, but he left and travelled abroad. The family is suffering from many financial problems due to the husband's absence and the fact that the wife is the only provider.

(O) came to the KR-I with her husband and two children due to the conflict with ISIS. She started to experience many problems with her husband in the KR-I. He would get angry and abuse her verbally and physically. Then, he left her with the two children and went to Europe, and no one has heard anything from him.

(P) married another Syrian refugee inside the camp shortly after her arrival in the KR-I. After getting married, they travelled to Greece with their child, where they stayed for 11 months. There, her husband would force her to contact organizations and beg for assistance, even if that meant she would face sexual exploitation, but she refused. Her husband then left her and travelled to Germany. At this point, she returned to the KR-I and started working for an NGO in order to repay the loans that she took before travelling abroad, and to support her mother and child. The conditions inside the camp have led to her being in a poor emotional state, and she doesn't know how to get out of it.

In other cases, the husband's departure was due to another reason: a second marriage. This often led to a cut-off of spending for the first wife and children, even if divorce did not occur.

(Q) was married for 15 years. She and her husband often argued and rarely got along. In 2014, her husband abandoned her and their daughter, and got married to another woman. He then proceeded to kick (Q) and their daughter out of their house. (Q) has now rented a room for her daughter and herself, and works as a janitor in a factory to put food on the table. The husband has cut all contacts with them and lives with the new wife.

Just after arriving in the KR-I, (R)'s husband married another woman. Since then, she has been suffering from physical and verbal abuse from him. He doesn't cover the costs of the family. Although she is living in a miserable condition, she still cannot ask for divorce because of her children.

Other forms of domestic violence

Other perpetrators of domestic violence reported by the women interviewed were parents (7 per cent), the husband's family (4 per cent) and brothers (2 per cent).

(S) got married to a Syrian man after arriving to the KR-I. In their first year of marriage, they were very happy. Then, problems started gradually. She tried to conceive for years but was unsuccessful. Her husband and her mother-in-law blamed her for not being able to conceive. They would always hurt her with heart-breaking words and threaten her that the husband would marry a second wife. She is living a stressful life, psychologically depressed and broken.

(T) came to the KR-I in 2014 and has three children. Her husband left her and travelled abroad. Now, she lives with her family and experiences physical violence and emotional abuse from her brother. Her economic situation is very poor and it is difficult to find unemployment as a displaced person.

Harassment

Harassment from the community was another commonly reported problem among the women and girls interviewed. Unmarried and divorced women in particular seemed to be particularly targeted for harassment.

(U) came to the KR-I in 2014. She experienced physical violence from her family and sexual harassment from the community because she is unmarried and a refugee.

(V) is experiencing problems with her neighbors. They treat her very badly and sometimes beat her child. She is scared to the extent that she doesn't feel comfortable going out anymore. Nevertheless, she doesn't want the police or anyone else to assist her.

In some cases, women whose husbands were unwell were forced to take up a larger share of responsibilities outside the house, which led to an increased exposure to harassment.

(W) has three children and her husband is unable to work due to having recently undergone open heart surgery. As a result, their economic situation is poor. She has experienced exploitation and harassment from others because she is forced to perform chores inside and outside the house due to her husband being unable to do so.

Finally, one divorced woman working as a teacher reported being sexually harassed by her employer, the director of a school in one of the camps.

(X) is divorced and has been living in the KR-I since 2014. She experienced sexual harassment from the director of the school in which she was working. She was then moved to another school far away from her house, and has to leave very early in the morning to go to work. She is afraid of facing violence again and fears for her daughter's safety as well. She feels as if the entire community sees her as a prostitute because she is divorced.

4

Institutional and official response to gender-based violence

In the KR-I, the government, UN agencies, and non-governmental organizations have all incorporated protection from GBV into their programming targeting Syrian refugees. Despite support services becoming increasingly available, however, the majority of GBV survivors do not appear to be benefiting.

None of the 92 women and girls interviewed had reported their experience of violence to the authorities or any organization – with the exception of a handful already receiving support from Asuda. While the reasons behind this are complex, they boil down to two main sets of factors: barriers to reporting within the refugee community itself, and gaps or inefficiencies in the delivery of support services.

Barriers to reporting

A first barrier to reporting is related to cultural norms and taboos around GBV. Many Syrian refugee women consider it shameful or dishonourable to speak openly about their experiences of GBV, and to bring outside attention to problems within their families. This is particularly pronounced in the case of sexual violence.

A second barrier to reporting is the refugees' own minimization and normalization of the violence they were experiencing in light of larger concerns. Most of the women interviewed were extremely preoccupied with their poor economic situation as refugees. Finding enough income to meet their basic needs was their overriding daily concern, leading them to downplay the significance of any violence they might have been facing. Moreover, many women ex-

periencing intimate partner violence attributed the violence they were facing to their spouses' economic frustrations, and felt that if this issue were resolved, the violence would also decrease.

A third barrier to reporting is women's fear of the response that this could provoke from their husbands. Many women are of the view that reporting could simply cause their problems to get worse, or could even culminate in divorce. Several of the survivors interviewed were unwavering in refusal to consider divorce. Part of the reason for this was cultural, as the women stated that divorced women are looked down upon in their community. However, another part was practical. Since many women were living away from their families as a result of leaving Syria, they knew they would not have anywhere to go if they got divorced and would have to provide for themselves – and their children – alone.

(Y) lost all contact with her family when she fled from Syria with her husband. Now, she is not sleeping or eating enough due to the physical and verbal abuse she is experiencing from her husband. She adds that her husband always reprimands her for the simplest reasons, and if she tries to defend herself, he beats her with anything that falls into his hands.

Despite this, she has not told the authorities or any organization about this matter because she is afraid of her husband and of living alone.

(Z) and her husband married out of love and used to live happily together with their children in Aleppo, Syria. After their arrival in the KR-I, however, her husband's brother decided to take a second wife. Upon seeing this, (Z)'s husband did the same thing and got married to the sister of his brother's second wife. He then began ignoring his first wife and children and refused to pay for their expenses. (Z) did not find this acceptable and left the house with her children. She now earns whatever income she can by working in factories or knitting to provide for them. When asked why she did not end her marriage, she said that in her culture, it is considered a shame to be divorced and she would much rather live like this.

A fourth barrier to reporting is lack of trust in the authorities. Some women felt that authorities would not be able to solve their problem, or felt that services available were not applicable to them.

Measures taken by the Kurdish Regional Government

The KRG considers gender-based violence to be an issue of concern, both among the host community and in its response to the refugee and IDP crisis. Unlike the rest of Iraq, in the KR-I domestic violence is criminalized under the Domestic Violence Act no. 8 of 2011. The law defines domestic violence as 'any act, statement, threat or omission committed on the basis of gender by one member of the family against another member up to the fourth degree that results in physical, psychological, sexual or economic harm or deprivation of rights'. The law also establishes specialized courts for domestic violence cases, as well as a separate police division staffed principally by women. The Ministry of Labour and Social Affairs is mandated to oversee shelter arrangements for victims of domestic violence.³⁰

There are several other government bodies responsible for addressing gender-based violence and promoting women's rights more generally.

The General Directorate to Combat Violence against Women (GDCVAW), a division of the Ministry of the Interior, has sub-directorates in each governorate responsible for receiving complaints and collecting data about violence against women. It also runs emergency hotlines in each governorate for women facing violence.³¹ The General Directorate is also named as 'the competent authority to follow up on domestic violence issues' under the Domestic Violence Act. It coordinates mobile teams that provide SGBV prevention and response services in refugee camps, IDP camps and urban areas.³²

The High Council for Women's Affairs, headed by the Prime Minister and formed of six ministers and seven experts on women and civil society, is responsible for guiding policy and devising national strategies to promote women's rights.³³ In addition, each governorate has a High Committee for Combating Violence against Women and Family, formed of senior government and judicial representatives.³⁴ Finally, the responsibilities of the Ministry of Endowment and Religious Affairs include 'to mobilise religious efforts to combat gender-based violence.'³⁵

However, seven years after the passing of the Domestic Violence Act, implementation has been criticized as incomplete and ineffective by many civil society groups specialized in women's issues. A series of amendments to the law drafted by civil society organizations and think tanks have been presented to parliament, but have yet to be passed.³⁶ In addition, the influx of IDPs since 2014, including many victims of sexual violence and other serious violations, has stretched the ability of the government to respond to all victims of gender-based violence.

For example, although some Syrian women have reportedly been able to access government-run shelters, the system as a whole is an imperfect solution for women facing violence. Admission to the government shelters requires a judicial order, which means that a victim of violence needs to initiate formal legal proceedings against the perpetrator. This is not only impractical in emergency situations, but also a route many women are unwilling to take. The shelters have also been hard-hit by the crisis affecting the public sector, and lack even basic utilities. Making matters worse,

most hotels in the KR-I will not allow single women to stay alone. As a result, there are few viable options where women fleeing violence from their partners or families can stay.

Measures taken by international and non-governmental organizations

International and non-governmental organizations are in many cases the first providers of support to refugee women and girls experiencing gender-based violence, whether in camp or non-camp settings. The UN agencies that oversee the KRG's 10 Syrian refugee camps have programmes aiming to target SGBV and promote SGBV mainstreaming in their operations. For example, UNHCR states that 'preventing SGBV, and supporting survivors to access quality services, achieve empowerment and self-realization is a critical priority of UNHCR Iraq's operation.' In 2017, it states that it provided SGBV services to 25,352 people and trained 4,275 people on protection (figures as of November 2017).³⁷ There are also elected women's committees in every camp, which act as a liaison between refugee women and the camp administration.

The UN agencies also coordinate efforts with local and international NGOs providing services to GBV survivors through the Protection Cluster and GBV Sub-cluster. Some of the programmes and services provided by NGOs include: awareness-raising sessions and lectures on GBV; workshops for men and boys on preventing GBV; case management, including referrals to psychosocial and legal support; safe spaces for women; and vocational training for women and girls. All organizations working with GBV survivors record details of all cases encountered in the Gender-Based Violence Information Management System (GBVIMS). However, this data is not made available outside of the participating organizations.

Nevertheless, the programmes mentioned above are not addressing the needs of all GBV survivors. Many Syrian women and girls interviewed appeared completely unaware of the services offered by NGOs, including some who had been living in the camps for five years. Some were aware that programmes existed, but were under the impression that these programmes were intended only for a specific demographic and therefore not applicable to them. Others felt that organizations working on GBV were interested only in data collection, and were not providing any real assistance in return for GBV survivors.

5

Conclusion and recommendations

As ongoing conflict continues to limit the possibility of return to Syria, the KR-I will likely remain a host region for refugees for the foreseeable future. Consequently, humanitarian actors must continue to plan for the long-term needs of the Syrian refugee community as part of their response to the crisis. Crucially, this involves devoting attention and resources to addressing the specific needs of refugee women and girls.

This report has found that GBV remains a pervasive problem among Syrian refugee women and girls living in the KR-I. Based on the narratives of women and girls themselves, instances of GBV usually began or increased in severity after the refugees' arrival in the KR-I, showing that the problem is intimately connected with their experiences of displacement. Moreover, there are indications that the problem may have worsened in recent years as a consequence of the economic, political and security crises affecting the KR-I since 2014.

Despite the fact that an increasing number of government bodies, international agencies and non-governmental organizations are realizing the importance of incorporating GBV prevention into their refugee response programming, this report has also found that there continue to be major gaps in addressing the needs of GBV survivors. A majority of women and girls interviewed felt that services were either lacking completely, only available for certain groups, or irrelevant to their needs.

An important conclusion of this report is that protection from GBV cannot be separated from the larger needs of the Syrian refugee community. Isolated measures to address GBV will be ineffective if the basic needs of refugees – from shelter and livelihoods to healthcare and education – are not being met and services to meet such needs do not reflect the views and active participation of refugee women. It is clear that refugees themselves view GBV interventions that do not address their most urgent material needs to be insensitive and misdirected. As a result, while scale-up and improvement of existing GBV services is undoubtedly needed, this should be accomplished alongside similar increases in support across other sectors.

Recommendations

- **Increase international funding to the Syrian refugee response.** Every year, the amount raised for the refugee response appeal in the KR-I falls vastly short of the identified level of funding (in 2017, only 53 per cent of funding was secured).³⁸ Persistent

under-funding limits the capacity of humanitarian actors to address the needs of vulnerable refugees, including women and girls, across sectors.

- **In particular, allocate more resources towards livelihoods programmes.** The livelihoods sector is currently the most under-funded sector in Iraq, and the negative consequences extend to other sectors. In addition to job creation and vocational training, emergency forms of livelihood assistance such as unconditional cash transfers should be continued, as they have been shown elsewhere to be effective in reducing intimate partner violence.³⁹
- **Provide more educational and childcare facilities in refugee communities.** Lack of safe and appropriate childcare options is currently limiting women's ability to seek employment, engage in the community, and access needed support services.
- **Ensure that women and girls have access to family planning.** This should include both educational services about family planning methods and access to contraception, to ensure that women have the resources needed to make informed choices regarding reproduction
- **Mainstream GBV prevention across sectors.** An effective response to GBV requires multiple points of intervention across humanitarian sectors, including the health and education sectors.
- **Scale up the provision of psychosocial and legal support for GBV survivors.** While many organizations are providing much-needed assistance to survivors, more work is needed to ensure that all Syrian refugee women and girls are aware of such services and able to access them, whether in camp or non-camp settings.
- **Offer GBV support services together with other types of services for women in one location.** This will make it easier for women to access needed support discreetly and without stigmatization from the family and community.
- **Include men and boys in combating GBV.** Including men and boys as a key target of awareness-raising and advocacy campaigns can encourage them to reject violence and intervene when it occurs in their families and communities.
- **Investigate other culturally appropriate interventions for GBV survivors.** In direct consultation with Syrian women and girls, service providers should continue to look for solutions that could be effective in reducing GBV while respecting cultural values.
- **Promote shifts in cultural attitudes towards GBV.** This can be done by engaging authority figures and influencers in the community, such as religious and community leaders, who can be partners in the effort to eliminate stigma and end cultural acceptance of violence.



Endnotes

- 1 World Health Organization, 'Violence against Women' Factsheet, November 2017, accessed 2 February 2018, <http://www.who.int/media/centre/factsheets/fs239/en/>. While the WHO statistic only includes women who have experienced physical or sexual violence, the present report relies on a broader conception of gender-based violence that includes physical, psychological, sexual, economic and other forms of violence.
- 2 *Ibid.*
- 3 UNHCR, 'Syria conflict at 5 years: the biggest refugee and displacement crisis of our time demands a huge surge in solidarity,' 15 March 2016, accessed 2 February 2018, <http://www.unhcr.org/afr/news/press/2016/3/56e6e3249/syria-conflict-5-years-biggest-refugee-displacement-crisis-time-demands.html>.
- 4 OCHA, 'Syrian Arab Republic,' February 2018, accessed 7 March 2018, <http://www.unocha.org/syrian-arab-republic>.
- 5 UNHCR, *Sexual and Gender-based Violence Prevention and Response in Refugee Situations in the Middle East and North Africa*, 2015, p. 2.
- 6 UN Women, *We Just Keep Silent: Gender-based violence amongst Syrian refugees in the Kurdistan Region of Iraq*, April 2014, p. 4.
- 7 Sood, A. and Seferis, L., 'Syrians contributing to Kurdish economic growth,' *Forced Migration Review*, vol. 47, September 2014, p. 15.
- 8 Danish Refugee Council, 'A study of the opportunities in labour markets for IDPs and Refugees in KRI: Construction Labour and Service-sector Labour Market Systems (Executive Summary),' December 2014, p. 7.
- 9 Higel, L., Mohammed, A., Singh, N. and Guiu, R., *Pathways to Resilience: Transforming Syrian Refugee Camps into Self-Sustaining Settlements (Qualitative Assessment: Focus Group Discussions)*, Middle East Research Institute, June 2015, p. 10.
- 10 *Ibid.*, p. 5.
- 11 World Bank, *The Kurdistan Region of Iraq: Assessing the Economic and Social Impact of the Syrian Conflict and ISIS*, Washington, DC, 2015, p. 51.
- 12 Islamic Relief, *Invisible Lives: How the international community is failing Syrian women refugees*, 2016, p. 5.
- 13 World Bank, *op. cit.*, p. 60.
- 14 *Ibid.*, p. 5.
- 15 Lake, E., 'Crisis Looms for Refugees Taken In by Iraq's Kurds,' *Bloomberg*, 30 September 2015.
- 16 Guiu, R., Higel, L. and Singh, N., *Pathways to Resilience: Transforming Syrian Refugee Camps into Self-Sustaining Settlements (Desk Review)*, Middle East Research Institute, April 2015.
- 17 World Bank, *op. cit.*, p. 2.
- 18 *Ibid.*, p. 3.
- 19 United Nations Development Programme, Syria Response - Iraq, 2014, <http://www.undp.org/content/dam/rbas/doc/SyriaResponse/Iraq%20143-151.pdf>, p. 140.
- 20 Sood and Seferis, *op. cit.*, p. 14.
- 21 World Bank, *op. cit.*, p. 5.
- 22 Higel *et. al.*, *op. cit.*, p. 8-9.
- 23 REACH and UNHCR, *Economic Survey of Syrian Refugees - Refugee Camps, Kurdistan Region of Iraq*, April 2014, p. 12.
- 24 UNHCHR, *3RP Regional Refugee & Resilience Plan 2016-2017 - Iraq*, January 2016, p. 10.
- 25 UNHCR, *3RP Regional Refugee & Resilience Plan 2017 Progress Report*, October 2017, p. 42.
- 26 Guiu *et. al.*, *op. cit.*, p. 41.
- 27 UNHCR, *Multi-Sector Needs Assessment of Syrian Refugees Residing in Host Communities: Iraq Assessment Report*, April 2015, p. 1-2.
- 28 Women for Women International, 'Our Work in the Kurdistan Region of Iraq,' accessed 15 February 2018, <https://www.womenforwomen.org.uk/what-we-do/where-we-work/country-profile-kri>.
- 29 UNHCR, '3RP Regional Refugee & Resilience Plan Iraq Monthly Update - Protection Dashboard,' June 2017.
- 30 The Act of Combating Domestic Violence in Kurdistan Region - Iraq, Act no. 8, 2011, available at http://www.ekrg.org/files/pdf/combating_domestic_violence_english.pdf.
- 31 'Women's Rights,' Kurdistan Regional Government, accessed 15 February 2018, <http://cabinet.gov.krd/p/page.aspx?l=12&s=000000&r=407&p=400&h=1&t=405>.
- 32 UNHCR, '3RP Regional Refugee & Resilience Plan Iraq Monthly Update - Protection Dashboard,' May 2017.
- 33 Kurdistan Regional Government, 'KRG High Council of Women's Affairs,' available at http://www.ekrg.org/files/pdf/High_Council_Womens_%20Affairs_English.pdf.
- 34 The By-law of High Committee of Combating Violence against Women and Family in Kurdistan Region Governorates of Iraq, no. 4516, 15 May 2013, available at http://www.ekrg.org/files/pdf/by-law_highcommittee_combat_violence_against_women_English.pdf.

- 35 'Women's Rights,' Kurdistan Regional Government, accessed 15 February 2018, <http://cabinet.gov.krd/p/page.aspx?l=12&s=000000&r=407&p=400&h=1&t=405>.
- 36 For proposed amendments to the law (in Kurdish), see Middle East Research Institute, 'Amending the Law to Combat Domestic Violence in Kurdistan Region,' 11 January 2015, accessed 2 February 2018, <http://www.meri-k.org/amending-the-law-to-combat-domestic-violence-in-kurdistan-region/>.
- 37 UNHCR, '3RP Regional Refugee & Resilience Plan Iraq Monthly Update - Protection Dashboard,' November 2017.
- 38 Figure as of 5 December 2017. UNHCR, 'Syrian Regional Refugee Response - Iraq,' accessed 2 February 2018, <http://data.unhcr.org/syrian-refugees/regional.php>.
- 39 Hidrobo, M., Peterman, A., and Heise, L., 'The effect of cash, vouchers and food transfers on intimate partner violence: evidence from a randomized experiment in Northern Ecuador,' *American Economic Journal: Applied Economics*, vol. 8, no. 3, July 2016, pp. 284-303.



Broken Lives: Violence against Syrian refugee women and girls in the Kurdistan Region of Iraq

In brief

Conflict and displacement crises around the world are associated with an increase in gender-based violence (GBV). As a result of ongoing armed conflict in Syria since 2011, more than 6.1 million Syrians are internally displaced and an additional 5.6 million have sought refuge outside the country – most of them in Turkey, Lebanon, Jordan, Egypt and Iraq. The vulnerability of Syrian women and girls to GBV has been a pervasive concern across the region since the beginning of the refugee crisis.

Iraq is currently hosting 247,057 Syrian refugees, the majority of whom are in the Kurdistan Region of Iraq (KR-I). Although the initial entry of Syrian refugees occurred at a time of relative stability and prosperity, since 2014 there have been dramatic changes to the economic, political and security situation in the KR-I. This has jeopardized the ability of many refugee households to meet their basic survival needs, with dire consequences for the well-being of women and girls.

This report finds that Syrian refugee women and girls in the KR-I are facing increasing levels of violence inside the home, especially intimate partner violence. Instances of GBV usually began or increased in severity after the refugees' arrival in the KR-I, showing that the problem is closely connected with their experiences of displacement and related pressures. Moreover, there are indications that the problem may have worsened in recent years as a consequence of the crises affecting the KR-I since 2014.

Despite the fact that government bodies, international agencies and non-governmental organizations working with refugees in the KR-I are increasingly incorporating GBV prevention into their programming, there continue to be major gaps in addressing the needs of GBV survivors. The majority of Syrian women and girls facing vio-

lence do not report their experiences or seek assistance from any organization or authority. This shows that there is a major discrepancy between the stated aims and methods of GBV prevention programming, and the actual reality of survivors of violence.

This report is based on 92 interviews with Syrian women and girls conducted in both camp and non-camp settings in the KR-I. In addition to identifying and analyzing the main patterns of violence experienced by Syrian women and girls, the report also identifies gaps and shortcomings in the services and remedies currently available to survivors, and presents strategies for improvement.

This report recommends:

- Scaling up the provision of psychosocial and legal support for GBV survivors so that all Syrian refugee women and girls are aware of such services and able to access them, whether in camp or non-camp settings.
- Offering GBV support services together with other types of services for women in one location, to make it easier for women to access needed support discreetly and without stigmatization from the family and community.
- Promoting shifts in cultural attitudes towards GBV by engaging men and boys, religious leaders, and other community figures in awareness-raising and advocacy campaigns against GBV.
- Allocating more international resources to address the funding gap in livelihoods assistance to Syrian refugees, since violence in the home is intimately linked to the inability of many households to meet their basic economic needs.

Ceasefire Centre for Civilian Rights

54 Commercial Street, London E1 6LT, United Kingdom
www.ceasefire.org

ISBN: 978-1-907919-96-1

This report has been produced with the financial assistance of the UN Trust Fund to End Violence against Women. The contents of this report are the sole responsibility of the publishers and can under no circumstances be regarded as reflecting the position of the UN Trust Fund to End Violence against Women.