Background & Methodology

While Iraq continues to steadily recover from years of conflict, thousands of vulnerable families across the country remain displaced and in acute need of protection and assistance. As of 31 August 2021, 248,721 Syrian refugees (61% urban, 39% camp) and 37,798 refugees of other nationalities resided across Iraq, with over 98% of Syrian refugees located in the Kurdistan Region (KRI).

In line with UNHCR’s Age, Gender, and Diversity Policy (2018) and Tool for Participatory Assessment in Operations (2006), UNHCR undertook a Participatory Assessment (PA) across six offices/ten governorates (Erbil, Dohuk, Sulaymaniyah, Kirkuk, Nineawa, Baghdad, Basra, Anbar, Diyala, Kerbala, Salahaldeen) in July and August 2021 to ensure meaningful participation through structured dialogue. This PA represents the first in Iraq since 2017 and following COVID-19 disruptions. From 2017-2021, gaps in a countrywide PA were filled at field level by desk review and participatory inquiry (focus group discussions (FGDs), key informant interviews, household visits, and discussions with outreach volunteers and committees). In 2020, remote protection monitoring of 4,650 households was led countrywide from August to December.

The 2021 PA centers on five thematic areas: Registration & Documentation, Child Protection (including education) & Gender-based Violence, Livelihoods, Self-Reliance, and Mental Health. Participants were asked to identify key protection risks and causes, capacities within the community, and possible solutions. 219 FGDs were held with Syrian refugees and refugees of other nationalities.

Refugee Population in Iraq

**Demographics of FGDs**

<table>
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<tr>
<th>Site Type</th>
<th>Population</th>
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<tbody>
<tr>
<td>55% urban</td>
<td>74% Syrian</td>
</tr>
<tr>
<td>45% camp (incl</td>
<td>26% Other</td>
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<tr>
<td>collective centers)</td>
<td>nationalities</td>
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**Gender**

- 52% Male
- 48% Female

**Age**

- 21% 0-18
- 67% 18-59
- 12% 60+

**Location of FGDs**

- Erbil
- C&S
- Duhok
- Suly
- Ninewa
- Kirkuk

Center & South (C&S) includes Baghdad, Anbar, Basra, and Salahaldeen governorates

**Documentation & Registration**

COVID restrictions, limited staffing, and security concerns (particularly outside KRI) have led to delays or suspension of UNHCR registration and government processing since 2020. Refugees repeatedly stressed challenges accessing documentation (registration, residency, birth and marriage certificates) leading to risks of serious protection concerns.

**Top Documentation and Registration challenges**

1. Transport costs to sites (urban, intra-governorate (C&S))
2. Long waits at sites and delays in overall processing
3. Difficulties scheduling with the Iraq Information Center
4. Denial of marriage and birth registration for mixed couples (refugee/host community) and their children
5. Limited or inconsistent information

**Contributing Partners:** ACTED, Al-Mesalla, Democracy and Human Rights Development Center, Harikar, Heartland Alliance, International Rescue Committee, INTERSOS, Legal Clinic Network, Norwegian Refugee Council, STEP, SWEDO, Terre des Hommes-Italy, Un Ponte Per
Impacts of delays or missing documents

- Legal jeopardy
- Physical jeopardy
- Other barriers/denial of access

Recommendations from the Community

→ Expand UNHCR capacity (staff/hours), schedule renewal prior to expiry, and issue temporary documents attesting that registration renewal is in process
→ Expand remote verification/updating of information
→ Advocate for simplified procedures with authorities and recognition of UNHCR certificates at checkpoints

**Education**

Even pre-COVID, low enrolment of refugee children into a KRI parallel education system was a standing concern. From February 2020, in-person learning closed due to COVID, resulting in rollout of e-learning. Nevertheless, at-home learning added further pressure on families. Refugees repeatedly stressed concerns about out-of-school children.

**Top Barriers: Access, Quality, & Competing Motivations**

1. Financial constraints: transport costs and supplies
2. Equalization requirements and lack of documentation
3. Limited available schools (particularly secondary)
4. Poor quality teachers and facilities
5. Limited perceived value of education given lack of jobs

**AGD-specific barriers**

- Children with Disabilities: Bullying (emotional, physical) and limited accessibility
- Adolescent Girls: Family concerns of harassment, mixed-gender learning, cultural pressure
- Adolescent Boys: Pressure to enter the labor market

**Recommendations from the Community**

→ Expand non-formal learning and spaces to encourage children & parents to reengage in learning
→ Increase awareness raising for parents and communities on the importance of education and risks of alternatives
→ Improve infrastructure and quality of teaching (upgrade classrooms/materials, monitor teachers)

**Child Protection**

Closely linked with education concerns and COVID impacts, refugees highlight a set of interlinked child protection issues, notably child labor and child marriage. In parallel, refugees link concerns about children’s mental health during COVID to an increase in bullying (particularly against children with disabilities) and need for child-friendly/recreational spaces.

**Key Drivers of Child Labor & Child Marriage**

1. Family financial constraints
2. Loss of a parent/single-parent household
3. Parents unable to support or encourage education
4. Traditional customs and clan systems

**Recommendations from the Community**

→ Engage school administrators and Parent-Teacher Associations to liaise with families on alternatives to school withdrawal, child labor, and child marriage
→ Advocate with the government to enforce child labor laws and prevent informal marriage contracts
→ Increase recreational/green spaces, including using existing host community spaces in urban areas

**Gender-Based Violence & Identity**

Despite reports of increasing GBV incidents, COVID restrictions impacted UNHCR and partner ability to provide GBV services to meet the expanding needs. Refugees link to the compounding effects of COVID (financial strain, lack of livelihood opportunities) to a deterioration in men’s mental health, which they identify as a driver of increased GBV.
LGBTIQ+ identity remains a highly sensitive topic. Refugees generally expressed resentment or full denial of the specific needs of this vulnerable group.

Top GBV Concerns and Perceptions
1. Increased domestic violence and denial of resources
2. Verbal harassment of women and girls in public places
3. Limited awareness of services
4. Lack of trust/fear of reaching out for services
5. Lack of safe shelter, or movement restrictions in government-run shelters

Recommendations from the Community
→ Organize trainings on dispute resolution and anger management for couples and individuals.
→ Increase field-based female staff and availability of safe shelters to reduce hesitancy to seek support
→ Raise awareness on GBV and public harassment for men and boys, and separately girls and women

Livelihood Opportunities
Prior to COVID, income vulnerability was already high, with associated pressures of debt, rent, and access to food and resources. Monitoring and PA findings indicate a continuing negative impact of COVID on financial and food security, access to services, and wellbeing. Lack of livelihood was a constant refrain and linked to critical protection risks.

Top Livelihood Concerns and Perceptions
1. Limited opportunities (poor economy, COVID impact, missing documents, lack of specialized skills, nepotism)
2. Lack of clarity on eligibility criteria for cash assistance
3. Risks of exploitation, violence/harassment at work (particularly women and girls)
4. For women: lack of reliable and safe childcare
5. For persons with disabilities: discrimination, limited accessibility and accommodation

Recommendations from the Community
→ Establish community spaces (camp/urban) with diverse activities & transportation for women, children/adolescents, older persons, persons with disabilities
→ Support community cohesion in urban areas by establishing representation committees and improve oversight of existing committees/outreach structures
→ Raise awareness on the importance of complaint & feedback, available mechanisms, and confidentiality

Self-Reliance
Negative impacts of reduced community-based activities due to COVID were reflected across discussions. The criticality of community spaces and community-based response was a common refrain, notably a need for safe spaces to gather for leisure, recreation, skills and vocational programming; to strengthen community self-management; and to support vulnerable or isolated community members.

Top Community-Based Concerns and Perceptions
1. Urban dispersion resulting in isolation from services, information, programmes, community spaces, and community-based coordination and representation
2. Need for community spaces with diverse services
3. Reduced community engagement and social cohesion activities restricting positive community dynamics
4. Lack of confidence in the effectiveness/confidentiality of complaint and feedback mechanisms
5. Sense of neglect and discrimination among persons with disabilities, older persons, and among refugees of nationalities other than Syrians

Recommendations from the Community
→ Expand vocational trainings and at-home projects for women; advocate with employers for refugee inclusion
→ Revise cash assistance targeting to identify the most vulnerable
→ Facilitate transportation from camps to urban areas (including women-only transport)
Mental Health & Psychosocial Support

MHPSs services are available in nine of 10 refugee camps in KRI. Given diverging COVID responses across governorates, service continuity differed under adapted modalities, with very limited services available in urban areas. Refugees link impacts of COVID—increased isolation, loss of livelihood, and poverty—to a set of negative mental health challenges.

Top MHPSS Associated Concerns and Perceptions

1. Perceived increase in self-harm, suicidal ideation and attempts
2. Anxiety and fear among men linked to violence against family and those in their care (i.e. older persons)
3. Increased feelings of isolation, instability, anxiety among children/adolescents due to school closures
4. Ongoing discrimination/stigma about mental illness
5. Limited awareness of services/limited availability

Recommendations from the Community

→ Organize trainings on stress management and anxiety reduction techniques
→ Increase community and MHPSS services with female staff for women and persons with disabilities
→ Expand MHPSS services to areas with limited service, and remote MHPSS support (telecounseling)
→ Raise awareness on MHPSS to dispel myths

Other Resources

2021 Multi Sector Needs Assessment (dashboard):
http://impactinitiativesweb.jcloud.ik-server.com/

2021 Participatory Assessment (IDPs/IDP Returnees):
https://data2.unhcr.org/en/situations/syria/location/5
(All Documents)

Impact of COVID-19 on Daily Wage Work (March 2021):

2020 Protection Monitoring Summary (Dec 2020):

3RP Country Chapter Report (2021-2022)
https://reliefweb.int/report/iraq/3rp-iraq-country-chapter-2021-2022

Protection-related information for refugees and asylum-seekers in Iraq (Arabic, English, Sorani and Badini Kurdish)
help.unhcr.org/iraq