Supporting the Reintegration and Recovery of Female Survivors of ISIS in Kurdistan, Iraq

SEED Foundation

seed foundation
Social Educational Economic Development

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ABOUT SEED FOUNDATION

SEED Foundation (SEED) is a registered charity organization in Erbil, Kurdistan Region of Iraq (KRI), whose mission is to protect, empower, and support the recovery of survivors of violence and others at risk. SEED takes a comprehensive approach to recovery, integrating case management, mental health, and legal services with a range of psychosocial support services to reduce symptoms of trauma, empower and protect survivors, and improve individual and family well-being. SEED also works to improve the skills of local case managers, psychologists, and other service providers through education, training, and supervision programs to better equip them to help individuals and communities heal. SEED works with local institutions and others to promote laws, policies, and procedures that promote human rights and the protection of the most vulnerable. SEED supports the protection and recovery of survivors of trafficking, including through SEED's shelter for victims of trafficking and those at risk, after care services, and prevention work to reduce the risk of trafficking through public awareness, technical assistance, and advocacy for legal, regulatory, policy, process, and institutional changes. SEED is committed to delivering quality and holistic approaches, combining international and local expertise to achieve results for the people of Iraq and Kurdistan.

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Please note, this paper does not necessarily reflect the opinions of the agencies or individuals listed here.

GLOSSARY OF TERMS

Child refers to any person below the age of 18 years.[1]

Children born of war refers to children born as a result of non-consensual relationships between females (both adults and minors) and their male captors.

Complex trauma refers to "exposure to multiple traumatic events — often of an invasive, interpersonal nature — and the wide-ranging, long-term effects of this exposure."[2]

Human trafficking refers to the "recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation." [3]

Internally displaced person refers to a person who is forced to leave his or her home but resides within his or her country of nationality.

Kurdistan Region of Iraq refers to the semi-autonomous region of northern Iraq, including Duhok, Erbil, and Sulaimania governorates.

Resettlement refers to the selection and transfer of refugees or internally displaced persons from a state in which they have sought protection to a state which has agreed to admit them.[4]

Reintegration refers to a process by which a migrant or a refugee reestablishes him/herself in the society of his/her country of origin or habitual residence following displacement.[5]

Sexual and gender-based violence refers to "any act that is perpetrated against a person's will and is based on gender norms and unequal power relationships. It includes physical, emotional or psychological and sexual violence, and denial of resources or access to services. Violence includes threats of violence and coercion." [6]

ACRONYMS

EMDR:	Eye Movement Desensitization and Reprocessing
FGD:	Focus Group Discussion
GOI:	Government of Iraq
IDP:	Internally Displaced Person
IPC:	Iraqi Penal Code
ISIS:	Islamic State of Iraq and Syria
KII:	Key Informant Interview
KRG:	Kurdistan Regional Government
KRI:	Kurdistan Region of Iraq
MHPSS:	Mental Health and Psychosocial Support
M&E:	Monitoring and Evaluation
NGO:	Non-Governmental Organization
PSS:	Psychosocial Support
TSR:	Traumatic Stress Relief
UN:	United Nations

CONTENTS

EXECUTIVE SUMMARY 7

BACKGROUND 9

METHODOLOGY 10

Desk Review 10

Focus Group Discussions 10

Key Informant Interviews 10

Ethical Considerations 10

Limitations 10

FINDINGS 11

Survivors' Needs Upon Return 11

Key Challenges in the Reintegration of Survivors 13

Access to Necessary Services 13

Implications of Culture, Religion, and Captivity 15

Lack of Government Protections and Services 18

Promising Practices in Supporting Reintegration of Survivors 20

RECOMMENDATIONS 22

CONCLUSION 24

REFERENCES 25

EXECUTIVE SUMMARY

Over 6,000 Yezidi women and children were taken by ISIS in 2014. Thousands survived ISIS captivity and horrific violence, and reunited with their families in Kurdistan. But they returned to a changed world and face critical challenges.

In early 2014, the Islamic State of Iraq and Syria (ISIS), often referred to as Daesh, launched an offensive covering large parts of Syria and Iraq using extreme violence, including rape and slavery as weapons of domination, genocide, and ethnic cleansing. During their reign, ISIS terrorized minority communities throughout the region including Shi'ites, Turkmen, Kaka'i, Shabaks, Alawites, and Christians. Among those most impacted was the Yezidi community, a small, conservative ethnoreligious group with less than 1.5 million members living mainly in Iraq, Syria, Turkey, and Armenia.

As ISIS ravaged northern Iraq, men and boys were killed, and some boys were captured, taken either with their mothers or separated to be trained as child soldiers. Over 6,000 Yezidi women and children were taken by ISIS in 2014. Women and girls were subjected to extreme physical and sexual violence; as a result, they gave birth to unknown numbers of children born of war while in captivity and upon return. An estimated 2,889 Yezidis remain missing.

From 2014 to the present, survivors escaped captivity, their families paid a ransom, or they were freed by military forces, allowing them to return to their living family members largely in the Kurdistan Region of Iraq (KRI). However, they returned to a very different life. With their homes and villages destroyed or otherwise unsafe, they returned to camps or informal settlements with family members missing or dead, forcing them to reintegrate into a new reality while processing the traumatic experiences and physical consequences from their time in captivity. Returning women and girls have survived human trafficking including sexual enslavement, torture, starvation, and assault on their cultural identity. The level of devastation committed by ISIS was extreme and created lasting impacts - one survivor shared: " We all wish we had died and not lost our dignity and honor." The question remains how to best support these survivors as they return and reintegrate to an environment already struggling to support its own citizens in the wake of an economic crisis, war with ISIS, and exceptionally large numbers of refugees and internally displaced persons (IDPs).

This report aims to identify and highlight ways to strengthen the reintegration and recovery of survivors by examining: 1) survivors' priority needs upon return; 2) key challenges in reintegration; 3) promising practices in supporting survivors in successful reintegration; and 4) opportunities for government actors, community and religious leaders, NGOs, and the donor community to better support the reintegration of survivors returning from ISIS captivity. Throughout this report, the term "survivor" refers to women and girls who experienced sexual and other forms of violence during their captivity with ISIS. This assessment utilized focus group discussions (FGDs), key informant interviews (KIIs), and an extended literature review to gather information from survivors, community members from areas of return, professional service providers, and government officials.

Approximately 3,530 individuals have survived ISIS captivity and reunited with their family in the KRI following ISIS captivity; of these, 1,197 are women and 1,038 are girls.

Upon return, survivors face a variety of challenges including significant physical and mental health needs, lack of access to safe and private housing, missing identification and legal documents, poverty, stigma, unwanted pregnancies, and denial of the right to parent children born of war. While findings showed that many survivors are interested in working, they lack access to work. As a result, the majority of survivors are dependent on male family members or have insufficient income to meet their basic needs. One survivor reported: "My husband earns 250,000 IQD [approximately $210 USD] monthly and supports all ten family members in the home." Despite significant efforts from various non-governmental organizations (NGOs), United Nations (UN) agencies, and the Kurdistan Regional Government (KRG), survivors' needs remain extensive, complex, and multi-layered, and available services are often inadequate to provide sustainable solutions and/or insufficient to meet existing needs.

At this stage in the response, the KRG and Government of Iraq (GOI), community leaders, and organizations can greatly benefit from listening to survivors, service providers, communities of return, and frontline government officials and learning about promising practices in programming that have tangibly helped survivors and their families meet their needs and achieve positive outcomes long-term. Additionally, there are specific actions that government actors, community and religious leaders, NGOs, and the donor community can take to meet survivors' needs.

Key Recommendations

- *Government actors*
  - » Develop and implement a national action plan, embedded in a comprehensive strategy, to respond to the needs of survivors.
  - » Consider legal reforms, such as issuing regulations around the issuance of ID cards for children born of war that allow mothers to select the religion indicated on the ID.
  - » Pass the Yezidi Female Survivors Bill or other such legislation that provides reparations to the survivors of ISIS captivity.
  - » Ensure that prosecutions are in line with the law of crimes committed by ISIS, and implement mechanisms to update survivors on the outcomes of court proceedings. Establish an ad hoc national court with UN observers to try ISIS perpetrators.

- *Community and religious leaders*
  - » Empower survivors to fully participate in social activities and community events by ensuring that these spaces are safe and welcoming to survivors and their families.
  - » Participate in the recovery and reintegration of survivors by listening to and incorporating survivors' views and needs into leadership, advocacy efforts, and policies.
  - » Work to destigmatize children born of war and actively support their acceptance within the community.

- *NGOs and International Community*
  - » Invest in integrated, comprehensive, and long-term services that will allow survivors to access a variety of services in one location or through effective referral pathways.
  - » Increase the number of effective livelihood programs that recognize the realities of survivors' lives and result in a sustainable income.
  - » Empower vulnerable survivors to utilize resettlement programs, when necessary.

- *Donors*
  - » Ensure NGOs deliver high quality services in accordance with international standards by requiring robust monitoring and evaluation mechanisms and reporting.
  - » Fund comprehensive service delivery that includes medical, livelihood, and cash assistance programs.

BACKGROUND

In April 2013, the Islamic State of Iraq and Syria (ISIS) first appeared, and by early 2014, ISIS had launched a full offensive in western Iraq and eastern Syria. Instilling fear through mass propaganda and extreme acts of violence, ISIS gained significant territorial areas in Iraq. While a number of minority groups faced violence from ISIS including Shi'ites, Turkmen, Kaka'i, Shabaks, Alawites, and Christians, ISIS most severely targeted the Yezidi community in their offensive. Yezidis are a small ethnoreligious group with less than 1.5 million members living mainly in Iraq, Syria, Turkey, and Armenia who practice an ancient religion with elements of Zoroastrianism, Judaism, Christianity, and Islam.[7] Yezidis have been subject to repeated discrimination and violence, having been the target of 74 unique genocides throughout history.[8]

> *Yezidis have been subject to repeated discrimination and violence, having been the target of 74 unique genocides throughout history.*

The targeted attacks against Yezidis by ISIS resulted in the execution of thousands of men and boys, while over 6,000 women, girls, and boys were taken into captivity, forced into various forms of slavery, and subjected to physical and sexual violence. In captivity, women and girls bore countless children, suffering unintentional pregnancies at the hands of their captors. Many were forced to learn a new language and practice a different religion, striking at the very heart of their identity. Coordinated national and international military efforts ultimately led to ISIS's decline and the pronouncement of its territorial defeat in November 2017, although ISIS held a small number of territories until March 2019. However, the cruel and devastating marks left by ISIS remain on the land, in communities, and in the hearts and on the bodies of survivors and their families.

> *As many as 3,530 individuals have survived ISIS captivity and reunited with their family in the KRI*

More than 300,000 Yezidis fled from ISIS's attacks to the Kurdistan Region of Iraq (KRI) where they now reside.[9] It is estimated that 2,889 Yezidis remain missing.[10] As many as 3,530 individuals have survived ISIS captivity and reunited with their family in the KRI, of whom, 1,197 are women and 1,038 are girls.[11] Throughout this report, the term "survivor" refers to women and girls who experienced sexual and other forms of violence during their captivity with ISIS. These survivors returned to a changed world - their families displaced with members dead or missing, their homes destroyed, and children left behind. Many returnees face stigma from their community following the sexual violence they endured in captivity. Moreover, many have been unable to access sufficient support upon return to address their significant needs.

Unless provided the necessary support and protections, survivors will be unable to heal and play a full role in the rebuilding of their communities, risking further insecurity in the region. Thus, the successful reintegration of survivors continues to be critically important not only to the wellbeing of the survivor and her family, but also her local community, and the KRI as a whole. This report aims to 1) provide insight into survivors' priority needs; 2) highlight key challenges in reintegration; 3) present promising practices in supporting survivors' successful reintegration; and 4) identify opportunities for government actors, community and religious leaders, NGOs, and the donor community to better support the reintegration of survivors returning from ISIS captivity.

The successful reintegration of survivors continues to be critically important not only to the wellbeing of the survivor and her family, but also her local community, and the KRI as a whole.

METHODOLOGY

The information included in this report was derived from a desk review, six focus group discussions (FGDs), and 33 key informant interviews (KIIs).

Desk Review

A desk review was conducted to gain an understanding of the existing data, information, and services available regarding the reintegration of survivors in the KRI and response mechanisms in place for survivors. Research papers, newspaper articles, interviews, and reports were reviewed to gain a comprehensive understanding of the topic.

Focus Group Discussions

FGDs took place with targeted groups to further understand the experiences of survivors of ISIS captivity and their families. Interview questions centered on the following key themes of the reintegration experience: survivor needs; availability and effectiveness of services; acceptance/ rejection by family and other community members, including religious groups; and government laws and policies affording protection and/or assistance. The FGDs were conducted with two primary target groups: 1) service providers working within mental health and psychosocial support (MHPSS), legal, and protection spheres from civil society and government entities and 2) community volunteers from camps for internally displaced persons (IDPs). All discussions were conducted in the KRI over a period of five months between September 2019 and January 2020. FGDs were conducted in Kurdish and English.

Key Informant Interviews

In-depth KIIs with structured, standardized questions were utilized with: 1) survivors; 2) professionals/ service providers with first-hand knowledge of the obstacles survivors face in the KRI; 3) community and spiritual leaders from affected communities; and 4) government officials. Participants were identified within SEED's existing network and then asked to recommend others who could share knowledge on the topic. A total of 33 interviews were completed in the KRI, primarily in Duhok where the majority of IDPs reside in camp and non-camp locations. Interview questions centered on the following topics: needs of survivors; services available in the KRI; rights and policies impacting survivors; and barriers and supports to successful reintegration. Discussions were conducted over a period of five months between September 2019 and January 2020; interviews were conducted in Kurdish and English.

Ethical Considerations

SEED staff conducting KIIs and FGDs for this report upheld ethical principles of informed consent, confidentiality, and transparency for participants. Further, SEED staff took additional measures to ensure ethical interviews by following key guidelines on interviewing survivors of sexual violence. Incorporating survivors' views was an important aspect of this paper in order to reflect survivors' perspectives on their own needs, challenges in accessing resources and services, and what is most helpful to them as they reintegrate and recover from their experiences. This information is critical to making relevant recommendations and guiding SEED's programming.

The following steps were taken to ensure safety and support for survivors who participated in KIIs: 1) ensured survivors interviewed had completed services or were in a position to give informed consent; 2) ensured survivors asked to participate would not be at-risk due to participation; 3) obtained informed consent from all participants; 4) ensured survivors knew their participation would not impact current or future services provided by SEED; 5) explained and maintained confidentiality; 6) allowed survivors to choose a safe space and approve the interviewer to ensure safety; 7) ensured that survivors knew that they could stop the interview anytime; and 8) ensured support was offered during and after the interview.

Limitations

There are a number of limitations to the findings of this report. First, a limited number of survivors were interviewed - eight in total - due to SEED's ethical considerations for interviewing survivors of sexual violence. Further, interviewers noted that survivors appeared to struggle at times to share their full opinions during interviews, likely due to concerns for confidentiality (although confidentiality was kept for all participants). Interviewers noted survivors appeared to have some difficulty making statements that did not align with their families' and/or cultural and religious communities' beliefs. SEED further relied on the knowledge staff has learned through their years working directly with survivors.

Additionally, the legal analysis on government protections afforded to survivors included here is not comprehensive, but is limited to those policies and laws which were highlighted by participants in FGDs and KIIs. Also, the presentation of "promising practices" in this paper is limited due to a lack of research conducted on programs implemented with this population in the KRI. Promising practices presented here reflect lessons

learned from programming that appear to promote positive outcomes for survivors. Lastly, the majority of those interviewed reside and/or work in the Duhok governorate; while this is where the majority of survivors return, survivors returning to other areas may have different experiences not represented here.

FINDINGS

The findings of this report focus on three areas: 1) survivors' needs; 2) key challenges in the successful reintegration of survivors; and 3) promising practices in supporting survivors in successful reintegration.

Survivors' Needs

Understanding the immediate and long-term services required to meet survivors' needs effectively is critical to ensure relevant programs. It has been nearly six years since survivors first began returning from captivity, and many have never been able to access or have had limited access to the services they needed upon return, thus significant needs remain for survivors who returned in 2014 and since, including those who have returned more recently. Survivors and their families have a variety of needs upon return including: 1) medical care; 2) mental health services; 3) shelter; 4) livelihoods and financial assistance; 5) legal support; and 6) education.

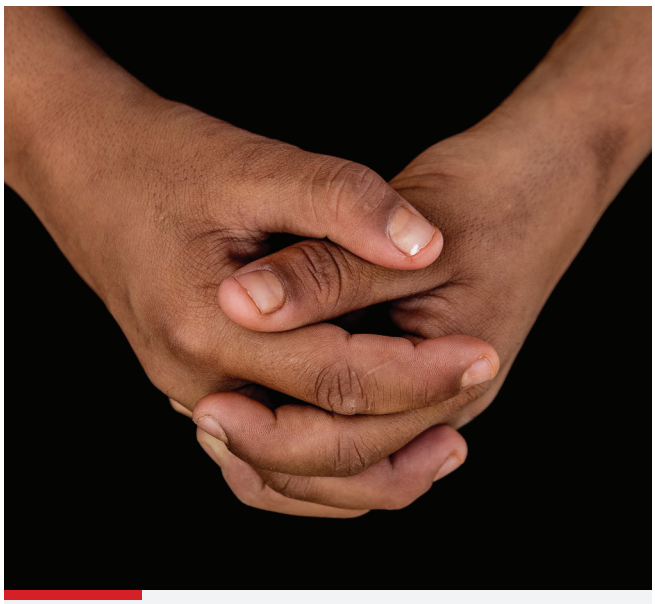
> *Due to harsh conditions in captivity along with being forced to live in war zones, survivors often developed health conditions and endured significant injuries.*

Medical Care

Among the highest priority needs for survivors immediately upon return is medical care. Due to harsh conditions in captivity along with being forced to live in war zones, survivors often developed health conditions and endured significant injuries. Common medical issues cited include kidney issues including kidney stones, musculoskeletal pain, skin infections, dental issues, as well as gynecological problems including sexually transmitted disease and fistula. As with all medical needs, some survivors experience acute needs, requiring treatment and/or medications for a limited amount of time, while other conditions are chronic, requiring long-term intervention and care.

Mental Health Services

Survivors commonly experience significant psychological challenges which require specialized mental health services from skilled professionals as a result of the complex trauma they endured under ISIS captivity. Survivors often experience Post-traumatic Stress Disorder, depression, and anxiety disorders and report a variety of symptoms including fainting, nightmares, insomnia, difficulty eating, extreme anger, guilt, shame, and debilitating anxiety. Many survivors battle suicidal ideations as they struggle to make sense of their experiences, cope with their symptoms, and reintegrate into their community. Further, at times, family members, service providers, and others in close proximity to survivors experience vicarious trauma upon hearing the stories of survivors and experiencing their symptoms, resulting in development of their own symptoms and mental health needs. This vicarious trauma in family members can make it more difficult to fully support survivors in their healing process. Managing complex trauma of this magnitude requires comprehensive, long-term, and quality mental health treatment from skilled providers to help survivors and their families cope and heal.



> ***For many survivors, living conditions increase stress and decrease safety at a time when safety and stability is critical for recovery from the trauma they experienced.***

Shelter and Basic Needs

Upon release from captivity, many survivors are prevented from returning to their homes of origin because of poor living conditions and security concerns. The city of Shingal [Sinjar], where many survivors are from, is considered unstable by many due to its disputed status, political conflicts, lack of services, poor infrastructure, and the existence of multiple

armed groups. Only a small number of survivors and their families have returned to their areas of origin. Left without homes to return to, most survivors live in camps or informal settlements where they share small, crowded spaces. One survivor compared life in the camp to that of a prison.

Some survivors are left to live on their own with parents, husbands, children, and other family members missing or dead as a result of ISIS; culturally, this is very difficult and can make the survivor vulnerable to further violence and exploitation. Most return to live with extended family members - large numbers of people in small quarters - which can also be difficult, depending on the relationships. Oftentimes, male relatives take responsibility for and control over survivors' choices, once again limiting survivors' ability to practice agency. Some experience abuse and violence within their homes, as family members struggle to cope with survivors' symptoms while trying to manage their own traumas - this in addition to the general stresses IDPs and refugees face. Findings indicate that survivors and their families often lack clothing; safe, private spaces; food items; kerosene for heating; hygiene items; as well as other general household items. For many survivors, living conditions increase stress and decrease safety at a time when safety and stability is critical for recovery from the trauma they experienced.

Livelihoods and Financial Assistance

In order for survivors to successfully reintegrate, they require access to sustainable livelihoods and income - for themselves and for family members. However, employment opportunities throughout the KRI are limited and often require specific skills and/or education that survivors do not have as many never went to school or lost years of education while in captivity. Work opportunities available to IDPs are often low-paying and, in some cases, exploitative, requiring long hours for very little pay in unsafe conditions. Opportunities for work within camps are extremely limited, yet it is difficult for most IDPs to work outside of the camps where they live due to the cost of transportation. Further, most women are responsible for the majority of household work and childcare making sustaining a job extremely challenging. Lastly, poor physical and mental health can impact survivors' ability to obtain and sustain work.

> *"My husband earns 250,000 IQD [approximately $210 USD] monthly and supports all ten family members in the home."*

In addition to the need for regular income, findings indicate a connection between meaningful livelihoods and general wellbeing. While findings showed that many survivors are interested in working, they lack access to work. As a result, the majority of survivors are dependent on male family members. One survivor reported: "My husband earns 250,000 IQD [approximately $210 USD] monthly and supports all ten family members in the home." This lack of income makes it very difficult to afford basic living items and nearly impossible to manage any additional critical needs such as medical treatment, medications, or legal support to obtain crucial documentation. This further indicates the importance of additional, effective livelihood opportunities for all IDPs - not solely survivors - to ensure survivors who are supported by relatives have access to the sustainable income their families need to survive.

Further, many families paid intermediaries thousands of dollars to rescue survivors from captivity, resulting in significant debts. Some nefarious smugglers even took personal possessions from survivors as further rewards for themselves. This debt combined with the lack of job opportunities and income has resulted in high rates of poverty and child labor as families struggle to provide for their basic needs. While awaiting livelihood opportunities, completion of training and earning of income, survivors and their families need financial assistance to sustain their basic needs. It is important that financial assistance programs consider methods of distribution that protect survivors' access to the funds as male leaders within the family are often given control over the funds and may or may not use it for the benefit of the entire family for whom it was intended.

Legal Support

Survivors have extensive legal needs upon return as well, having left or lost legal documentation in the process of their captivity. The majority of survivors do not have the necessary legal documentation or identification (ID) required to access certain services such as resettlement opportunities and registration in local schools. Additionally, many survivors do not know what their basic rights are due to lack of education, illiteracy, and a general lack of awareness about the available services, leaving them exceptionally vulnerable. One NGO staff member reported that "some of them [survivors] think that their husbands have the right to beat them." There is a need for legal support to educate survivors regarding their rights under the law and how to assert them, and help to represent survivors when others abuse or exploit them. Further, survivors require legal support in accessing government benefits they are entitled to, seeking justice for themselves, regaining

custody of children born of war from whom they have been separated, and obtaining compensation for the significant harm caused by ISIS.

Education

Due to the duration of survivors' time in captivity, many girls missed years of education, which has subsequently hindered their ability to register in local schools. Survivors can experience shame as they attempt to go back to school, as many are proportionally older than their classmates, and some continue to feel stigma associated with the experience of ISIS captivity. Further, many can not afford transportation to get to school, which particularly impacts children in camps who are in high school. While UN agencies and NGOs have worked to establish a number of schools in collaboration with the KRG's Ministry of Education and some NGOs have provided financial aid for transportation to schools, there are still limited opportunities, particularly for remedial and accelerated educational programs for children in camps. And while child-friendly spaces have been established in the camps to provide informal education and skill building classes, these do not replace formal education and certificates gained through a formal curriculum which could lead to better job prospects for survivors and their children. Further, teachers lack training necessary to best support survivors and other children who have experienced trauma, which can be counterproductive to the education process.

> *"We wished we had died in our place. We all wish we had died and not lost our dignity and honor."*

Key Challenges in the Reintegration of Survivors

The level of devastation committed by ISIS was extreme and created lasting impacts; one survivor shared: "We wished we had died in our place. We all wish we had died and not lost our dignity and honor." This kind of harm is not overcome without adequate support; however, findings indicate that even after the military defeat of ISIS and release from captivity, survivors face significant challenges that impede their ability to recover and reintegrate. These challenges include: 1) access to necessary services to meet identified needs; 2) implications of culture, religion, and captivity; and 3) lack of government protections and services.

Access to Necessary Services

Survivors often face barriers to accessing services necessary to meet their needs due to a 1) lack of quality, long-term services available in an accessible location; 2) lack of cash assistance; 3) lack of transportation; and 4) stigma and lack of family support. These challenges make it difficult and, at times, impossible, for survivors to meet their needs.

Lack of Quality, Long-term Services in an Accessible Location

Be it for medical care, mental health treatment, livelihood training, legal support, or educational opportunities, survivors have limitations in what they can access and the quality of accessible services. Due to their locations in camps and informal settlements away from major cities where resources are more prevalent, required services are often out of reach for survivors and their families. When services are available, they often lack the quality necessary to actually meet survivors' needs long-term. For example, many survivors struggle to access basic medical or dental care, much less the specialized services, surgeries, or medication that many require. While medical care is available through the public system in the KRI and Iraq, accessing the expertise required to address survivors' complex needs can be challenging. Generally, there is a lack of medical specialists in the region, and, even more so, a limited number of specialists working in the camps.

Due to their locations in camps and informal settlements away from major cities where resources are more prevalent, required services are often out of reach for survivors and their families. When services are available, they often lack the quality necessary to actually meet survivors' needs long-term.

Even when the specific treatment needed is available in Iraq there is often a waiting list of six months or more for affordable public treatment, while private treatment is inaccessible due to cost. Medications are often expensive, resulting in survivors' needs remaining unmet. Further, some services and medications, particularly for psychiatric needs, are simply not available in the KRI or Iraq. In such cases, survivors are dependent on resource-limited NGOs to support them in attempting to access the care required. As a result, survivors are often left to manage extremely painful, debilitating, and even life-threatening health issues without proper care and treatment.

Additionally, while mental health services are a well-established part of the response to survivors, some providers lack the training and qualifications to appropriately and safely practice. This is a result of a shortage of qualified professionals and a lack of professional practice guidelines and certification requirements for providers within the KRI and Iraq. Consequently, mental health providers decide on their own who is qualified to practice which can greatly impact the quality of services and result in harm to survivors. Unfortunately, the duration of psychological treatment provided is often limited to just a few sessions and, thus, does not adequately address longer-term needs. The severe shortage of psychiatrists in the KRI and Iraq makes access to ongoing psychiatric services extremely challenging.

Further, while various NGOs and UN agencies offer livelihood programs with an emphasis on improving survivors' skills and capacity to generate a monthly income, there are not enough providers and programs nor are there sufficient spaces in existing programs to meet the current needs. The majority of programs are short in duration and lack diversity needed to address different areas of interest and skill levels. Programs that lack stipends for participants to travel, childcare plans, elements of basic literacy and numeracy, MHPSS components, and long-term support often fall short of what survivors need to be successful long-term in a livelihood opportunity. Further, many programs focus on small business, which survivors and their families are not always ready to implement. Finally, programs often fail to take into account how opportunities will be perceived within the culture and whether the training provided will lead to job placement and viable livelihood opportunities where survivors live. This is complicated by the fact that vocational programs often do not provide survivors the materials required to put their newly acquired skills into practice. These limitations result in limited opportunities for survivors to earn a sustainable income long-term.

Legal services remain difficult to access, as well. Few organizations offer these services for free, so they are extremely limited, and resources are not available for hiring legal services. The result is many survivors remaining without the documentation needed to access services, benefits, and opportunities which support their reintegration long-term. Some survivors further reported encountering corruption/demands for bribes, as they sought assistance in obtaining documentation, making costs further prohibitive to accessing what they need. These individual legal constraints are in addition to the lack of general protection provided under the law, and worse, legal provisions which put survivors more at-risk, for example, allowing a rapist to marry his victim to avoid criminal charges.

These failures in cash assistance programs often result in survivors' primary needs remaining unmet, allowing the continuation of a cycle of poverty which is nearly impossible to break and inhibiting survivors' recovery and long-term financial independence.

Lack of Cash Assistance

Although a critical need at the start of recovery for survivors, cash assistance programs remain extremely limited, difficult to access, and insufficient to meet existing needs. The amount received from cash assistance programs is not enough to cover basic humanitarian needs or medical emergencies. Further, survivors and their family members with unaddressed medical needs, be it for treatment or medication, are often unable to support their families through work opportunities. Additionally, mental health interventions are often ineffective when basic needs remain unmet, making it difficult for survivors to engage in services that will ultimately help them learn positive coping strategies imperative to their success in an educational setting or livelihood opportunity. These failures in cash assistance programs often result in survivors' primary needs remaining unmet, allowing the continuation of a cycle of poverty which is nearly impossible to break and inhibiting survivors' recovery and long-term financial independence.

Lack of Transportation

Transportation impacts access to all services not readily available within camps or informal settlements where survivors reside. Certainly, the lack of cash to pay for transportation is a major barrier to access, however, safety barriers also exist. Even when survivors have

cash assistance to access transportation, there may be safety concerns about using public or even private transportation, particularly given their traumatic histories. These barriers create significant challenges for survivors in accessing resources to meet their needs.

> *Survivors commonly report experiencing feelings of shame and stigma that impact their ability to access necessary medical services, mental health services, legal services, and educational and livelihood opportunities.*

Stigma and Lack of Family Support

Finally, survivors struggle to access services due to the stigma surrounding the violence they experienced while in captivity and lack of family support upon return. While strides have been made in accepting survivors back into their communities, survivors commonly report experiencing feelings of shame and stigma that impact their ability to access necessary medical services, mental health services, legal services, and educational and livelihood opportunities.

At times, families struggle to know how best to support survivors in their reintegration and either accidentally or purposefully inhibit survivors from accessing the support they need due to their own beliefs about how survivors should act or engage upon return. This includes a range of gender-based violence, including restricting movements of women, which further serves to control access to needed resources. For example, some women are not allowed to take transportation without a male relative to chaperone them, and therefore if their medical or other needs are not a priority to male family members, they will not have their needs met.

Implications of Culture, Religion, and Captivity

Cultural traditions and religion play a crucial role in the Yezidi community and have both positive and negative impacts on the acceptance, reintegration, and healing of survivors and their children. The assault committed by ISIS on the culture of Yezidi survivors has further created challenges in reintegration and re-engaging support systems. As they return to their tight-knit community, survivors must manage a number of challenges including: 1) the posture of the community towards them; 2) the posture of the community towards children born of war; 3) internal cultural and religious conflict as a result of their time in captivity and the trauma they endured; 4) changing roles and new opportunities; and 5) the decision for resettlement.

Posture of the Community toward Returnees

Findings suggest that Yezidi survivors have experienced both acceptance and rejection from their community upon return. Early on, as survivors began to return to the KRI, religious leaders initiated statements regarding the acceptance of survivors back into the community. The first statement was from Baba Sheikh, the religious leader of the Yezidi community in Iraq, welcoming female survivors back to the community in 2015.[12] A few years later in April 2019, Mir Hazim Tahsin Beg, the Prince of the Yezidis and spiritual leader, made another statement highlighting the importance of family members and the community accepting survivors (not including children born of war). A "rebirthing" ritual at the Yezidi holy site of Lalish was extended to survivors returning to "cleanse" them of their experience and welcome them back to the community.

> *"We feel less in our community."*

However, findings suggest that stigma continues to impact some survivors' daily lives. Some expressed feeling like "lower class" members of the community; one survivor interviewed stated, "We feel less in our community." As a result, some have avoided participating in social and community activities such as weddings,

adding to feelings of isolation. They report feeling they are constantly monitored and judged for their decisions and behaviors due to their association with ISIS.

Additionally, part of starting life anew for many survivors is the hope to marry (or remarry in the cases of women whose husbands were killed by ISIS). Some survivors indicated they are not seen as marriageable by men in the Yezidi community due to fears that images may appear on social media from their time in captivity. This fear is another reminder that the stigma of having been captive by ISIS and sexually exploited remains. Although spiritual and community leaders play an important role in deciding to accept survivors, survivors report that they still face microaggressions as well as discrimination on a daily basis within their own communities.

Posture of the Community toward Children Born of War

Among the most difficult challenges in reintegration for survivors who bore children while in captivity or who return pregnant is the rejection of children born of war within the Yezidi community. Only a few days after the acceptance of survivors was reinforced in 2019, another statement was released which clarified that the acceptance does not include children born of war. As a result, these children have been widely rejected, as have the women who have decided to stay in captivity with these children.[13] Further, some women who returned pregnant have reportedly been asked by their families to have abortions.

> *One survivor interviewed stated, "I know of three women who remained with ISIS because of their children."*

Faced with impossible choices, many women either left children behind when they escaped or were made to give them up by their community or family members prior to their return. A small number of survivors returned to Syria in search of their children. One survivor interviewed stated, "I know of three women who remained with ISIS because of their children." Others struggle with feelings of guilt, regret, and longing for their children while harboring deep anger at their families and communities for their role in separating them. In addition to the painful separations being inflicted on survivors and their children, these children are vulnerable to violence, exploitation, and abuse. Due to the sensitive nature of the reintegration of children born of war, organizations face severe challenges and are hesitant to approach the issue; only a small number of resettlement programs are currently supporting the reunification of children and their mothers.

Internal Cultural and Religious Conflict for Returnees

While in captivity, survivors were often forced to learn and speak Arabic or another language and practice Islam. Some children return no longer speaking their native language, having forgotten it during years of captivity. And while the majority of survivors still identify as Yezidi upon return, some are in conflict with themselves as they try to understand whether they are Yezidi or Muslim. Some face stigma from those who accuse them of voluntarily converting to Islam. One survivor interviewed reported she is often accused of being Muslim, even though she never personally identified as such; rather it was forced on her by her captors. In contrast, some survivors have made the decision to convert to Islam and suffer exile as a result. Those who found peace in reading the Quran while in captivity are no longer able to utilize this coping skill as they reintegrate into their communities, leaving them unsure how to cope. This disrespect of their agency to choose their own beliefs further creates internal tension for survivors having to choose between their families and their beliefs.

> *Some survivors struggle to process their complex connection with and feelings for their perpetrators and life in captivity.*

Additionally, some survivors struggle to process their complex connection with and feelings for their perpetrators and life in captivity. As happens with domestic violence and abuse cases worldwide, there were times when ISIS members showed a distorted "kindness" in the midst of the torture, causing feelings of emotional confusion for survivors. While ISIS members were their abusers, some released survivors or helped them escape. Some survivors were exposed to better living conditions during their captivity and make comparisons to their conditions upon return, creating a confusing sense of loss and resentment. As a result, some women have even returned to their captors or desire to return. These feelings are complex and understandably difficult for family and community members to witness and accept, albeit normal responses to an extraordinary situation.

Changing Roles for Survivors and New Opportunities upon Return

Even prior to the conflict, Yezidi women and girls were marginalized due to being female, members of a persecuted religious and ethnic minority, experiencing low socioeconomic status, and being largely uneducated. These women historically experienced a lack of agency, rights, and independence in their daily lives. And after enduring further abuse at the hands of

ISIS and additional stigma as a result, many survivors are seeking a new way forward - one that allows for more independence and less reliance on others to meet their needs.

In part, these new goals have been forced on survivors through the loss of husbands, fathers, brothers, and other important male leaders in their families following the genocide by ISIS. Previously, the vast majority of women worked within the home, leaving male relatives to provide financially for the family. However, driven by both need and desire, many survivors are returning to different roles and setting new goals - to support their family themselves through work. Moreover, many survivors are interested in receiving education to go beyond the typical work possibilities available to them. With the international attention on the plight of survivors of ISIS captivity, there is opportunity to empower survivors to access their rights and gain opportunities in ways not previously available.

However, challenges remain as survivors attempt to realize these new goals and opportunities. While some survivors have increased access to educational opportunities than before, a general lack of feasible opportunities for education and work inhibit survivors from gaining independence. Additionally, the communities in which they live can be detrimental to the process of gaining independence, as restrictions on movement enforced by male relatives, beliefs about women working outside the home, and other discriminatory practices can prohibit survivors from taking advantage of new opportunities.

The Decision for Resettlement

Upon return, survivors have few options for where they will reside. Most return to their families, where they likely join a crowded tent or informal housing arrangement. Culturally, independent living is less acceptable and private space is often inaccessible. Survivors often feel frustration at the lack of privacy and agency they are afforded when living with extended family; others feel concern that they are a "burden" to already overstretched relatives. Still more survivors who wish to parent children born of war feel there is no option within Iraq to raise their children. As a result, some survivors have looked to resettlement programs. Resettlement programs for survivors of ISIS captivity were established in 2015 to meet the needs of survivors who did not benefit from or had inadequate access to services within Iraq or were affected by other protection, community, or religious concerns. Formal resettlement programs were implemented by Germany, Australia, Canada, and France. The German resettlement program was the first of its kind and resettled approximately 1,100 survivors between 2015 and 2017.[14] This was followed by Australia in 2015 resettling 2,738 Yezidis until February 2019 with an emphasis on women, children, and families.[15] From 2017 to 2018 a total of 1,215 people were resettled in Canada; Yezidis, primarily women and children, accounted for 81% of those resettled.[16] The latest resettlement effort was implemented in 2019 by France resettling 132 Yezidis.[17]

Many survivors report positive experiences with resettlement, particularly when provided critical services such as medical care, MHPSS services, livelihoods, and education for themselves and their families, including children born of war. During a time when needs were particularly high and resources severely lacking in the KRI, resettlement programs offered specialized services for survivors experiencing suicidal ideations who might otherwise have gone unserved with tragic consequences. Furthermore, resettlement gave survivors a feeling of security and stability. Many survivors reported that resettlement programs helped them improve their living circumstances and quality of life. For some survivors who simply do not feel safe in Iraq, resettlement is the only option which can offer the hope for a future they desire for themselves and their children.

However, despite the benefits of resettlement, there are a number of challenges. Some survivors report difficulty in integrating into a new environment, trying to understand local laws, culture, education system, and other areas that differed from life in Iraq; they reported feeling separated from the local culture and struggled as "outsiders." Some reported feeling isolated upon resettlement, missing the tight-knit community they experienced in Iraq. Moreover, some resettlement participants stated that their trauma was reactivated through the application process and insufficiently tailored treatment.

Others had concerns regarding exclusionary criteria for adult men in some resettlement programs, forcing survivors to separate from male relatives. As individuals from family-oriented communities, survivors are left with an impossible choice: choose to resettle and be separated from their support system or remain in Iraq where they do not feel safe. Other resettlement programs remain hesitant to allow children born of war to be resettled due to concerns that the child might one day connect with his or her father, an ISIS fighter, or that the mother or child might be rejected and face stigma, and pose a danger to society. This concern has led some programs to only allow children born of war whose fathers are dead to be resettled. Again, such criteria leave survivors with an impossible choice.

> *"If there would be good services in Iraq, and I would have rights, I would not go abroad." - Said one survivor.*

Even still, many feel pressure to resettle in order to access quality services; one survivor stated: "If there would be good services in Iraq, and I would have rights, I would not go abroad." Perhaps most concerning is the pressure some survivors feel from their families to resettle. Given their survivor status, survivors commonly qualify for resettlement which can include family members (though not all programs allowed for adult men). In some cases, family members are eager to resettle while survivors are not; this is particularly true for survivors who wish to find children who remain in Iraq or Syria. Thus, survivors have at times been pressured to be resettled along with family members, taking them farther from their personal goal of reuniting with their children.

Lack of Government Protections and Services

Survivors have a variety of requests of their government upon return in order to feel protected and supported. As expected, desires vary from person to person, but findings suggest that with regards to government protections, survivors generally want 1) justice and accountability for their perpetrators and closure; 2) compensation for the harm done to them and their families by ISIS; 3) welfare benefits; 4) access to legal documentation; and 5) safety, protection, and right of return. Additionally, some survivors want to be reunited with their children born of war whom they were separated from upon return. The Government of Iraq (GOI) has the responsibility to survivors and their families to provide for these needs; even in disputed territories wherein the KRI claims land, until the disputes are resolved the GOI is the sovereign and thus holds the primary responsibility for ensuring the safety and protection of its people.

Accountability and Closure

Addressing accountability for ISIS perpetrators' actions in accordance with the rule of law is important to survivors. Without accountability, survivors are left to wonder what happened to the perpetrators who harmed them, making it difficult to feel safe as they attempt to reintegrate. Further, they are left without answers regarding missing loved ones - parents, spouses, children, siblings - and public acknowledgment that what happened to them deserves punishment. The lack of justice impacts not only the mental health of survivors but also the collective healing of the community. There are several barriers to seeing justice served and rights protected for survivors in the KRI and Iraq.

As survivors return, they are required to be interviewed by the KRG's security (Asayish) in order to take statements and archive evidence of the crimes committed by ISIS. Survivors are then referred to the KRG's Genocide Commission to ensure the case is well documented and any missing family members are reported. However, there is still no national strategy to coordinate the necessary prosecutions. Thus, the difficulty of ensuring justice is not due to the shortage of physical evidence, but rather a question of political and international will.

> *In addition to the human rights concerns of extrajudicial killings, they also rob survivors of their "day in court" and may prevent survivors from gaining the closure they seek.*

There have been several reports of extrajudicial, summary, or arbitrary executions of ISIS members.[18] Extrajudicial killings are often a sign of a weak and/or overwhelmed legal system wherein people do not have confidence that justice will be served otherwise. However, in addition to the human rights concerns of extrajudicial killings, they also rob survivors of their "day in court" and may prevent survivors from gaining the closure they seek.

Further, many of the crimes committed by ISIS are crimes under international law such as crimes against humanity, war crimes, and genocide; however, the existing legal system within Iraq makes it difficult to prosecute under these as there is often no legislation against these crimes. Therefore, per Iraq law, these offenses are not prosecuted as criminal offenses which hinders the facilitation of reparations and healing for survivors. Iraq has ratified the Convention against Torture[19] and the Genocide Convention[20] making it responsible for prosecuting such crimes committed in Iraq, however, this has not been successfully implemented to date.

Compensation

Survivors further seek compensation - from their perpetrators, the GOI, or the international community - to help them restart their lives. Given compensation is often a part of criminal and civil cases, survivors feel they are due compensation that never comes as the current law makes no allowance for their victimization. According to the Law of Compensating the Victims of Military Operations, Military Mistakes, and Terrorist Actions, No. 20 of 2009, only the loss of family members and properties are compensated; the sexual, physical, and psychological violence and domestic servitude endured by survivors is not included in the compensation law.

Welfare Benefits

In addition to compensation, survivors seek ongoing welfare benefits from the government in order to access the services they need to heal and find a way forward wherein they can support their own families. Ongoing benefits for medical care and medication, food assistance, housing assistance, and unemployment are needed. Survivors recognize that when support is so severely limited - in terms of amount, quality, and/or time - it is nearly impossible to break the cycle of poverty they return to following captivity.

Legal Documentation

As previously mentioned, survivors need easy access to lost legal documents, including IDs, passports, and other materials necessary to access civil services and move freely. Survivors report the current process can be difficult to navigate and impossible to achieve without the assistance of NGOs given many are told they must retrieve documents from Shingal, Mosul, or Baghdad. Most Yezidi survivors do not feel comfortable going to these cities, given their traumatic experiences, and most do not have the resources needed to travel. There have also been reports of corruption wherein survivors have been asked to pay a fee in order to receive their documentation, creating yet another barrier to survivors accessing what they need.

Safety, Protection, and Right of Return

Minorities in Iraq remain vulnerable and those who choose to return to their homes of origin require protection in order to feel safe upon return. Until safety for minorities returning is established, community healing can not begin. As demonstrated by the low numbers of families returning to Shingal, minorities do not yet feel safe or trust the GOI to protect them. Survivors and their families require legal protections from the GOI to address their concerns about instability and safety in areas of return; while there was a legislative proposal in Iraq to provide greater legal protection and compensation for survivors of ISIS, presented by the President of Iraq, it currently has low prospects of support for passage or within the GOI.

Reunification with Children Born of War[21]

Lastly, some survivors desire to be reunified with children from whom they have been separated. A number of women report they were told to leave children behind if they wanted to return to their communities and felt it was their only choice. Others reported that children were taken from them at the border by armed groups or government workers. Some survivors state they were told they could visit their children in the institutions, however this is not something that survivors commonly have the agency or means to do. When women have been able to visit, some have found that their child was transferred to Baghdad or another city.

It is often unclear what has happened to these children, though it is believed that some remain in camps with ISIS families, others taken by military groups, and some placed in government-run institutions. Government care homes for children in Iraq are notoriously overcrowded and under-resourced, offering children bleak futures with no hope for adoption, given the lack of legal provisions for this. Without connection with a family, at best, these children are without the basic protection afforded by a trusted caregiver, struggle to find their place in society and access opportunities for education, and can have lasting attachment issues impacting their mental health throughout their adult lives. At worst, these children are vulnerable to exploitation by military groups or criminals seeking to profit from their labor and/or bodies.

Sadly, even in the event a survivor is able to locate her child, she faces a number of additional challenges in regaining custody of her child should she decide she wants to parent. The Iraqi Personal Status Law No. 188 of 1959, Article No. 17 only allows for Iraqi males who are Muslim to marry female Muslims, Christians, or Jews, making marriages between ISIS members and Yezidis illegal and subsequent children born "out of wedlock." Typical procedure - though not law - is that children born out of wedlock are registered as Muslim under a fake father's name, as the law does not allow for women to give their name to children. This makes it extremely difficult for a Yezidi woman to win back custody of her child who is documented as a Muslim. Legal matters are often time consuming and expensive, making it impossible for a survivor to obtain custody of her child.

Survivors do not even have the option of foster care or adoption for children whom perhaps they are not ready to care for themselves, but wish to remain a part of their lives through visitation. The Juvenile Welfare Law No. 76 of 1983 does not allow for adoptions in the KRI or Iraq. Fostering is a possible option for married couples, which is implemented on the basis of mutual agreements between families; however, given this is not regulated or supported by the government fully, opportunities are few and the lack of oversight can lead to safety concerns.

Promising Practices in Supporting Reintegration of Survivors

While research on best practices is limited for this population, findings indicate there are promising practices for programming seeking to support survivors in their reintegration and recovery. Specifically, the following elements of programming appear to positively impact survivor outcomes: 1) commitment to integrity of practice; 2) provision of comprehensive and long-term services; 3) consistent, individualized service provision; 4) cash assistance; 5) specialized mental health services; 6) community-based PSS activities; and, 7) robust monitoring and evaluation (M&E).

When providers are able to establish this type of trust, survivors are able to engage more successfully in services.

Commitment to Integrity of Practice

Findings suggest basic ethical standards of practice are critically important to engaging survivors in services upon reintegration. Survivors require confidential and non-judgemental treatment; they must know what they tell their provider will be kept in confidence and that they will not be judged for their thoughts, feelings, and even behaviors. Further, service providers must avoid making promises they cannot keep; by providing survivors accurate information on what type of assistance will be offered - and what is not available - trust is built. When providers are able to establish this type of trust, survivors are able to engage more successfully in services.

It takes an organization significant effort to ensure service providers have the skills necessary to consistently deliver ethical services. First, having clear policies and guidelines on ethical practice are needed. Second, relevant training, to include realistic practice of new skills, is critical to application by service providers in the field. Third, organizations must invest in strong supervision structures and technical expertise to ensure that providers have the support and accountability they need to consistently practice ethically. Lastly, organizations must commit to ethical storytelling, refraining from exploiting survivors' stories for any purpose be it to build awareness or garner support or funding.

Provision of Comprehensive Services

Given the complex trauma survivors suffered, it is also important for organizations to provide long-term comprehensive services, or have a strong network of providers offering specialized services, in order to connect survivors with resources to meet their needs as efficiently and effectively as possible. Services should be provided by professionals with specialized training, given the sensitive nature of working with individuals suffering complex trauma. Survivors are often physically and mentally tired; they greatly appreciate when they can connect with a single provider that can help them access the various services they need. Some services required by survivors are highly specialized - such as medical care, mental health treatment, and livelihoods - and it is not necessary that all organizations be experts in everything. Rather, a strong network of providers offering various services is ideal for addressing survivors' needs effectively.

It is not necessary that all organizations be experts in everything. Rather, a strong network of providers offering various services is ideal for addressing survivors' needs effectively.

Further, comprehensive services require that providers look at the person in her environment rather than just as an individual. For example, if a provider connects a survivor to a much-needed livelihood opportunity without considering her need for childcare, her family's feelings about her leaving the home unchaperoned, or her capacity to work due to traumatic triggers, it is unlikely the survivor will succeed with the opportunity. However, when providers take into account not only the survivor's health, abilities, and desires, but also the impact on her of family, community, etc., they will be more likely to develop a workable plan to support the survivor in achieving her goals sustainably.

Organizations will see greater impact from their interventions with survivors when they commit to working with survivors within their environments - engaging families, community members, and community leadership, as consented to by the survivor.

Further, in order to effectively help survivors meet their needs, organizations must be well-networked. In a post-conflict environment like the KRI, this includes participation in the cluster system wherein providers meet regularly to avoid duplication of services, build referral pathways, share lessons learned, and hold one another accountable for quality services. These connections mean that agencies do not need expertise in every sector, rather, the community of organizations - both government and NGOs - can work together to ensure comprehensive services are available.

> ***Survivors prefer services that are individualized to their needs and agencies recognize that a "one size fits all" approach for service provision does not work.***

Consistent, Individualized Service Provision

Findings further suggest that survivors prefer services that are individualized to their needs and agencies recognize that a "one size fits all" approach for service provision does not work. Having arbitrary timelines for how long a service can be provided often negates individuals' personal and environmental realities that may result in a speedier or longer recovery. By tailoring treatment to the individual, agencies commit to working collaboratively with survivors to set goals, identify priorities, and evaluate progress. Further, survivors cited consistency of follow-up as important to their engagement with services supporting their reintegration. Seeing clients at a minimum of once every two weeks allows for survivors to feel consistently supported and build on momentum needed to achieve their goals.

Cash Assistance

Findings suggest cash assistance is a key element to being able to engage with other services that help survivors be independent for the long-term. Many survivors face extreme poverty upon return; survivors can quickly feel like a burden to their families with little hope of earning an income. By providing cash assistance, agencies remove some of this tension and build trust with survivors through meeting a very basic, immediate need.

Cash assistance further allows survivors to focus on services that are necessary to be sustainably independent, such as those targeting their physical and mental health; these services can be difficult to focus on when worried about what they will feed their children or how they will pay for a medication they need. It additionally allows survivors some agency in accessing necessities not typically provided within the camp; for example, phone credit, vegetables and fruit - which are not available in food rations. Also critical, cash assistance can allow survivors to access services without permission from male relatives, whom many survivors have to ask for money from should they need it. For example, survivors can use the funds to access medical treatment that they do not wish to tell their male relatives about, securing them the privacy they deserve to seek out services they need.

Specialized Mental Health Services

Specialized mental health services are another element of successful programming supporting survivors' reintegration and recovery. In SEED's experience providing mental health services to survivors, the complex trauma experienced requires extensive treatment lasting at least six months - though often longer - from a highly skilled mental health professional. Psychologists provide individual, group, family, and couples therapy to reduce symptoms and distress and improve functioning through a wide variety of techniques and interventions. During the initial stages of therapy, psychoeducation is necessary for survivors to provide information and education about their symptoms, diagnosis, effects of trauma, and what to expect in treatment. Other helpful interventions include learning to cope with difficult symptoms, grieving the loss of a loved one, learning to problem solve, changing behavioral patterns, addressing challenges, and resolving family conflict.

Additionally, findings indicate that a variety of specific treatment approaches have been effective in supporting survivors. Cognitive Behavioral Therapy is often used with survivors who experience depression and anxiety to learn to shift unhelpful thoughts, change maladaptive behaviors, and improve emotion regulation. Additionally, Narrative Exposure Therapy is utilized to help survivors gain insight into their trauma, cope better, and move forward. Further, psychologists utilize other techniques to reduce stress and anxiety such as grounding, meditation, guided imagery, visualization, and mindfulness which are aimed at helping to relax the mind and body. Such interventions have helped survivors manage trauma triggers, build positive copings skills, manage anger, and enhance communication skills.

SEED's experience is that survivors are exhausted in telling their trauma stories. As such, SEED is implementing newer mental health approaches such as Traumatic Stress Relief (TSR), a new evidenced-based

treatment. TSR is a non-verbal approach that uses bilateral stimulation as a way of restoring emotional information and helps survivors to distance trauma memories, increase resilience, and lower traumatic stress without talking about their actual trauma. Further, another approach that is slowly being integrated and utilized in the KRI is Eye Movement Desensitization and Reprocessing (EMDR), another evidenced-based treatment. EMDR focuses on helping survivors recover from trauma symptoms through learning how to use bilateral stimulation to cope with distressing memories or images.

Most importantly, effective psychologists work with a client-centered approach, respecting survivors' autonomy, providing a safe place to process their emotions and experiences through reflective and active listening, unconditional positive regard, empathy, and validating their feelings which are all crucial in developing a trusting relationship with survivors. Lastly, peer groups and group therapy are promising practices for helping survivors re-socialize in a safe environment and build support in their community.

Community-based PSS Activities

Community-based PSS activities have further provided an opportunity for survivors to build positive, sustainable support systems within their communities while connecting them with additional services they need. PSS activities provide a safe and respected environment for survivors to connect to other individuals in their community, learn skills to cope with difficult situations, reduce symptoms, and improve functioning and wellbeing. Activities and groups generally vary, but findings indicate survivors specifically appreciated psychoeducation on the impact of their traumatic experiences for themselves and their families to help normalize their experiences and reactions. Organizations further cited that community-based PSS activities can be a way of building trust with the community which allows them to more effectively engage with survivors, their families, and community leaders.

Robust Monitoring and Evaluation (M&E)

Having strong M&E mechanisms in place for programming serving survivors is also critically important for a number of reasons. First, having clear tools to measure progress towards goals clarifies for everyone - service providers and survivors - what the ultimate goal of service is, and in having culturally adapted, evidenced-based tools for measurement, providers can monitor progress and recalibrate in collaboration with survivors, as needed. Second, robust M&E mechanisms allow for providers and survivors to celebrate progress; by tracking baselines and endlines, providers can demonstrate for survivors how their hard work has resulted in change, which can be empowering and a source of hope for survivors. Third, M&E systems allow for feedback loops for providers to ensure interventions are having the intended impact so that changes can be made to the program as needed. Lastly, M&E mechanisms allow for accountability of providers - to their clients, the communities they serve, and donors.

RECOMMENDATIONS

While efforts of the government, community and religious leaders, UN agencies, and NGOs have been extensive, the massive scale of the crisis in the KRI and Iraq is overwhelming, leaving significant gaps in services for returning survivors. Based on the findings in this report, there are a number of recommended actions for 1) government actors; 2) community and religious leaders; 3) NGOs; and 4) the donor community to better respond to, protect, reintegrate, and support survivors' recovery.

1. Government Actors

The KRG and Government of Iraq are responsible for protecting all citizens within their territories. They have a legal obligation to respond to the needs of survivors and hold the primary responsibility for meeting those needs. Government actors can take the lead in supporting survivors as they reintegrate through the following actions:

- Conduct a comprehensive analysis of international best and promising practices regarding reintegration services and response mechanisms for survivors of sexual violence in conflict.
- Build strong partnerships between government, UN, and NGO actors to maximize resources, learn from one another, hold one another accountable for quality services, and avoid duplication of efforts. While the cluster system is a great resource for this, a sustained mechanism is needed should the level of crisis be reduced and the cluster system response in Iraq be disbanded.
- Ensure protective spaces of collaboration and exchange for survivors, academics, think tanks,

community leaders, government officials, and experts to come together to discuss and find sustainable solutions and ideas to improve the reintegration of survivors and children born of war.
- Develop and implement a national action plan to respond to the needs of survivors that encompasses protection, combats impunity, ensures justice and reparation, and provides multi-sectoral assistance and services for survivors.
- Increase support to strong government care models providing comprehensive, relevant services to survivors such as the Survivor Center, Duhok.
- Issue and implement a Standard of Care for mental health and strategy for implementation to ensure high quality services and accountability of providers.
- Regulate mental health professionals in order to ensure those providing services have appropriate education and supervision required to safely meet the needs of survivors.
- Consider the following legal reforms to address key survivor needs:
  - » Ensure prosecutions in accordance with the law of crimes committed by ISIS and ensure a mechanism to update survivors of the outcomes of court proceedings.
  - » Include compensation for victims of sexual violence in the Law of Compensating the Victims of Military Operations, Military Mistakes, and Terrorist Actions, No. 20 of 2009.
  - » Establish a legal framework for adoption in Iraq and the KRI.
  - » Issue regulations enabling the issuance of identity cards for children born of war which allow mothers to choose the religion indicated on the ID and provide guidelines for implementation.
  - » Pass the Yezidi Survivors Bill to provide greater protections and benefits to survivors and their children.
  - » Establish an ad hoc national court with UN observers to try ISIS perpetrators.

2. Community and Religious Leaders

Community and religious leaders also have a significant role to play in supporting survivors' reintegration. These leaders can support survivors through the following actions:

- Listen to survivors and incorporate their views and needs into leadership, advocacy efforts, and policies; host regular roundtable discussions with survivors to ensure their experiences and needs are being addressed.
- Model non-discriminatory engagement with survivors and their families.
- Increase awareness within the community to reduce stigma around sexual violence and mental health needs through facilitated dialogues with community members, allowing survivors to lead and participate, as they feel comfortable.
- Prior to survivors' arrival back to their community, ensure families are provided the option for referral to NGOs to provide awareness sessions to sensitize them to the issues they may face upon the survivors' return and resources they can access to support them in the transition.
- Empower survivors to fully participate in social activities and community events by ensuring these spaces are welcoming and safe for survivors and their families.
- Destigmatize children born of war and support their acceptance within the community.

3. Non-Government Organizations

Local and international NGOs provide services and support the government to effectively respond to the needs of communities and ensure the participation of affected communities in decision-making. NGOs can better support survivors through the following actions:

- Invest in integrated, comprehensive, long-term services that will allow survivors to access a variety of services in one location (or through effective referral pathways) using existing best and promising practices. Comprehensive services should include case management, medical care, mental health services, shelter, legal services, livelihoods and financial assistance, and education opportunities.
- Enhance awareness-raising of survivors' legal rights, how to assert them, and services available to support survivors in asserting their rights and how to access those services.
- Provide support to survivors in registering legal complaints of violence and abuse inflicted by ISIS during captivity.
- Provide support to survivors in registering legal complaints of exploitation and abuse by anyone upon return as well as ensuring the survivor's protection from violence.
- Increase support for obtaining documentation and IDs.
- Ensure cultural relevance of programming through survivor and community participation in program development.
- Increase availability of effective livelihood programs for survivors that will result in a sustainable income. In order to be effective, programs must recognize the realities of survivors' lives, including childcare and other caring responsibilities, and take into account the movement restrictions commonly experienced by survivors. Where appropriate and with consent, ensure survivors' families are included in service provision for sustainable results.

- Utilize resettlement programs in keeping with survivors' best interests and preferences. Resettlement programs should:
  - » Respect and comply with the interrelationship between individual wellbeing and family unity, including adult male family members and children born of war, and ensure family reunification when safe to do so;
  - » Incorporate approaches that work towards the post-genocidal recovery of survivors into resettlement programs;
  - » Allow room for interactions and dialogues between different religious and ethnic groups to nurture emotional healing and understanding as well as prevent further negative attitudes towards each other;
  - » Develop protective spaces to express cultural practices;
  - » Prioritize survivors who are vulnerable to exploitation, at risk of violence, exhibiting self-harm, have children born of war, do not have access to adequate treatment, are rejected by their families and communities, or experience other forms of danger; and,

  - » Provide a customized approach to integrate survivors who wish to remain in Iraq into the community, particularly older women, due to the difficulty of adapting to a new culture and environment.

4. Donor Community

Donors have a unique opportunity to support reintegration of survivors by using their resources in support of quality programming. They can enhance programs supporting survivors' reintegration through the following actions:

- Ensure that NGOs are delivering high quality services in accordance with standards through requiring robust M&E mechanisms and reporting.
- Fund medical, livelihood, and cash assistance programs given without these critical services it is difficult for survivors to make progress and break the cycle of poverty in their families.
- Fund long-term programs that will allow NGOs to work with communities to build sustainable results.
- Fund programs where survivors have chosen to remain rather than solely where their homes of origin are located given many do not yet feel safe to return.
- Ensure that programs are informed by the experiences and perspectives of survivors and accountable to survivors.

CONCLUSION

This report analyzed a range of issues impacting the rights of female survivors of ISIS captivity including their priority needs, challenges in accessing resources to meet their needs, and promising practices for empowering survivors as they seek to reintegrate and recover from their experiences. The findings here emphasize what many already know: the needs of survivors are extensive and resources available to meet those needs are insufficient.

While services are available in the KRI and Iraq, the quality of these services is often poor. Survivors who have returned to their community do not consistently receive adequate, timely, or appropriate support services and protection. Further, while the majority of survivors do not want to resettle, they often feel that they do not have a better alternative. Despite these shortcomings in serving survivors, there are promising practices that promote positive outcomes for survivors and their families which the government and NGOs can apply to programs supporting survivors as they reintegrate.

There is an urgent need for a comprehensive strategy in the KRI that responds to the ongoing needs of survivors, their families, children, and communities. Government actors, community and religious leaders, NGOs, and the donor community all have roles to play in supporting survivors' reintegration. Survivors have demonstrated their resilience; it is time for society to support them in their reintegration and recovery through strategic coordination and promising practices that will meet their needs and empower them to successfully reintegrate, recover, and once again contribute to their communities.

References

Ahram, A. I. (2015). Sexual violence and the making of ISIS. Survival, 57(3), 57-78. https://www.tandfonline.com/doi/abs/10.1080/00396338.2015.1047251?journalCode=tsur20&

Asher-Schapiro, A. (2014). Who are the Yezidis, the ancient, persecuted religious minority struggling to survive in Iraq? National Geographic. https://www.nationalgeographic.com

Australian Government. (2019). Statement on ABC four corners reporting. https://www.homeaffairs.gov.au/news-subsite/Pages/2019-Feb/statement-on-abc-four-corners-reporting.aspx

BBC News. (2019, May 17). "If we stay a secret, there will be a genocide." https://www.bbc.com/news/av/world-middle-east-48301954/the-secretive-kaka-i-of-iraq-are-finally-speaking-out

Cetorelli, V., & Ashraph, S. (2019). A demographic documentation of ISIS's attack on the Yezidi village of Kocho. https://www.un.org/sexualviolenceinconflict/wp-content/uploads/2019/08/report/a-demographic-documentation-of-isiss-attack-on-the-yazidi-village-of-kocho/Cetorelli_Demographic_documentation_ISIS_attack.pdf

Cetorelli, V., Sasson, I., Shabila N., & Burnham, G. (2017). Mortality and kidnapping estimates for the Yezidi population in the area of Mount Sinjar, Iraq, in August 2014: A retrospective household survey. PLoS Med, 14(5): e1002297. https://doi. org/10.1371/journal.pmed.1002297

Deutscher Bundestag. (2017, January 16). Lage von jesidischen Flüchtlingen. http://dip21.bundestag.de/dip21/btd/18/108/1810844.pdf

El-Masri, S. (2018). Prosecuting ISIS for the sexual slavery of the Yezidi women and girls. The International Journal of Human Rights, DOI: 10.1080/13642987.2018.1495195

Erdener, E. (2017). The ways of coping with post-war trauma of Yezidi refugee women in Turkey. Women's studies international Forum (Vol. 65, pp. 60-70). Pergamon.

Hassen, S. (2015). Stories of Yezidi women uterus: Untold Stories of Pregnant, Raped Yezidi Women. Paper proceedings of Second International Conference on Advances in Women's Studies, 2015 (p. 75).

Human Rights Watch. (2017). Flawed justice accountability for ISIS crimes in Iraq. https://www.hrw.org/report/2017/12/05/flawed-justice/accountability-isis-crimes-iraq

Ilhan Kisilhan, J. (2017). Treatment of traumatized women in Germany. https://link.springer.com/article/10.1007/s11757-017-0444-1

IOM. (2019, May 22). IOM assists over 130 Yezidis to resettle from Iraq to France. ttps://www.iom.int/news/iom-assists-over-130-Yezidis-resettle-iraq-france

Iraq Council of Ministers. (2005). Anti-Terrorism Law. http://www.vertic.org/media/National%20Legislation/Iraq/IQ_Anti-Terrorism_Law.pdf

Iraq Ministry of Justice. (1969). Iraq Penal Code. https://www.unodc.org/res/cld/document/irq/1969/penal_code_html/Iraq_The_Penal_Code_1969ENG.pdf

Mahmood, S. (2017). "Challenges of children born by ISIS rape in Iraq." Graduate Institute in Geneva. https://www.cerahgeneve.ch/files/1715/0963/3793/WP49-Challenges-Children-Born-by-ISIS-Rape-Iraq.pdf

OHCHR. Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment. https://www.ohchr.org/en/professionalinterest/pages/cat.aspx

OHCHR. Convention on the Prevention and Punishment of the Crime of Genocide. https://www.ohchr.org/en/professionalinterest/pages/crimeofgenocide.aspx

OHCHR. Convention on the Rights of the Child.
https://www.ohchr.org/en/professionalinterest/pages/crc.aspx

OHCHR. (2018). Report of the Special Rapporteur on extrajudicial, summary or arbitrary executions on her mission to Iraq. https://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/a_hrc_38_44_add_1.pdf

OHCHR. (2016). The Commission of inquiry report They came to destroy: ISIS crimes against the Yezidis."https://www.ohchr.org/Documents/HRBodies/HRCouncil/CoISyria/A_HRC_32_CRP.2_en.pdf

UNFPA. (2016, November 18). Iraq centre brings specialized care to gender violence survivors. https://www.unfpa.org/news/iraq-centre-brings-specialized-care-gender-violence-survivors

UNHCR. (2011). Resettlement Handbook. https://www.unhcr.org/46f7c0ee2.pdf.

Van Zoonen, D., & Wirya, K. (2017). The Yezidis: Perceptions of reconciliation and conflict. Middle East Research Institute Report.

Wilkinson, L., Bhattacharyya, P., Riziki, A., & Abdul-Karim, A. B. (2019). Yezidi resettlement in Canada-Final Report 2018. https://mansomanitoba.ca/wp-content/uploads/2019/03/Yezidi-FINAL-FEB14.pdf

WHO. Sexual Violence. https://www.who.int/violence_injury_prevention/violence/global_campaign/en/chap6.pdf

Yezidis to accept ISIL rape survivors, but not their children. (2019, April 29). Al Jazeera. https://www.aljazeera.com/news/2019/04/Yezidis-accept-survivors-isil-rape-children-190428164100751.html

Rudaw. (2019). Yezidi spiritual leaders clarify children of ISIS rape won't be accepted. https://www.rudaw.net/english/kurdistan/27042019

SEED Foundation. (2020). Children born of the ISIS war. https://www.seedkurdistan.org/

Yüksel, S., Saner, S., Basterzi, A. D., Oglagu, Z., & Bülbül, I. (2018). Genocidal sexual assault on women and the role of culture in the rehabilitation process: Experiences from working with Yezidi women in Turkey. Sexualized torture and gender-based torture to genderized torture: The urgent need for a conceptual evolution, 28(3), 124.

Endnotes

1 UN General Assembly. https://www.ohchr.org/en/professionalinterest/pages/crc.aspx.

2 NCTSN.. https://www.nctsn.org/what-is-child-trauma/trauma-types/complex-trauma

3 UN Convention against Transnational Organized Crime Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children. https://www.ohchr.org/en/professionalinterest/pages/protocoltraffickinginpersons.aspx

4 UNHCR Resettlement Handbook. https://www.unhcr.org/46f7c0ee2.pdf.

5 UNHCR Resettlement Handbook. https://www.unhcr.org/46f7c0ee2.pdf.

6 UNHCR, Emergency Handbook, https://emergency.unhcr.org/entry/60283/sexual-and-gender-based-violence-sgbv-prevention-and-response

7 Cetorelli, V., & Ashraph, S. (2019).https://www.un.org/sexualviolenceinconflict/wp-content/uploads/2019/08/report/a-demographic-documentation-of-isiss-attack-on-the-yazidi-village-of-kocho/Cetorelli_Demographic_documentation_ISIS_attack.pdf

8 Asher-Schapiro, A. (2014). https://www.nationalgeographic.com/news/2014/8/140809-iraq-Yezidis-minority-isil-religion-history/.

9 Cetorelli, V., Sasson, I., Shabila N., & Burnham, G. (2017). https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002297.

10 KRG's Missing Persons and Kidnap Affairs Department. Personal communication conducted by SEED. April 2, 2020.

11 KRG's Office of Missing Persons and Kidnap Affairs. Personal communication conducted by SEED on April 2, 2020.

12 Al Jazeera. (2019). https://www.aljazeera.com/news/2019/04/Yezidis-accept-survivors-isil-rape-children-190428164100751.html

13 Rudaw. (2019). https://www.rudaw.net/english/kurdistan/27042019.

14 Drucksache. (2018). http://dip21.bundestag.de/dip21/btd/18/108/1810844.pdf.

15 Australian Government. (2019). https://www.homeaffairs.gov.au/news-subsite/Pages/2019-Feb/statement-on-abc-four-corners-reporting.aspx.

16 Wilkinson, L., Bhattacharyya, P., Riziki, A., & Abdul-Karim, A. B. (2019). https://mansomanitoba.ca/wp-content/uploads/2019/03/Yezidi-FINAL-FEB14.pdf.

17 IOM. (2019). https://www.iom.int/news/iom-assists-over-130-Yezidis-resettle-iraq-france.

18 OHCHR. (2018). https://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/a_hrc_38_44_add_1.pdf.

19 Convention against Torture - OHCHR. https://www.ohchr.org/en/professionalinterest/pages/cat.aspx.

20 Prevention and Punishment of the Crime of Genocide - OHCHR. https://www.ohchr.org/en/professionalinterest/pages/crimeofgenocide.aspx.

21 SEED Foundation. (2020). https://www.seedkurdistan.org/

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