

CARE Rapid Gender Analysis

Mosul crisis, Iraq – December 2016

Executive summary

Gender plays an important role in the humanitarian response for the Mosul crisis due to **family separation, stigmatisation of survivors of gender based violence (GBV) and their children, lack of access to education and employment** particularly for women and girls from prior to the Mosul crisis, IDPs being **confined** to camps and the severe gendered **psychological impact** for women, men, boys and girls previously under armed group occupation.

While gendered humanitarian response rightly prioritises GBV prevention and response coordinated through the GBV sub-cluster, specific measures to avoid **re-stigmatisation of GBV survivors** and promote reintegration into the community is also an essential component of this type of response, particularly for women who have been forced into sexual slavery. GBV prevention and response services should be provided through entryways such as health services and community activities to ensure discretion.

Children born under armed group occupation, particularly those born from women and girls from minority ethnic groups who were held as slaves for militants, are an extremely vulnerable group. Children born from Yazidi women and girls held as sexual slaves can be seen culturally and religiously as 'unacceptable'. Abortion is seen as the solution but due to the illegality, this is often carried out in unsafe and dangerous ways.

The Iraqi law would currently see many of these children as 'born out of adultery' and by that rule the children should be looked after by their fathers. The legal system will need to ensure appropriate protection and support for these children and their mothers.

Due to high levels of trauma experienced by women, men, boys and girls, there are high needs for **mental health support** particularly due to the current situation in IDP camps whereby IDPs are confined to the camp and can not communicate with relatives left behind.

While all IDP families from the Mosul crisis will have very **scarce economic resources**, female-headed households are particularly vulnerable firstly because they have not been engaged in livelihoods activities under armed group occupation, are enduring the stress of changed gender roles and are less able to leave the camp to seek work due to responsibilities in caring for children.

Men and boys fleeing their homes face extreme dangers including **execution, forced recruitment, torture, arbitrary detention, enforced disappearance** and being used as **forced labour** by armed group fighters in areas targeted by Iraqi security forces (i.e. as human shields). Many young men are suspected of being affiliated with armed groups and are detained without any contact allowed with their families. Men and boys are usually less likely to access psychosocial support due to traditional notions around masculinity and it is crucial that mental health support is provided through entryways such as awareness sessions and information dissemination to target men and boys.

Human rights groups have reported detention and torture of men and boys in areas liberated from armed groups, carried out by government-backed militia who suspect the men and boys of being connected to armed groups. This type of 'vigilante justice' shows that **even after liberation of Mosul, it can not be assumed that civilians will be in safety.**

It should also be emphasised that young people, young men in particular, have been subjected to propaganda under armed group occupation and a lack of access to education. Therefore **conflict mitigation and peace-building activities** should target particularly the non-camp areas where IDPs are collectively gathering to ensure that tensions do not rise particularly with host communities.

Key recommendations:

Targeted support for women-headed and child-headed households - With increasing numbers of female-headed and child-headed households, targeted humanitarian support is crucial. Even once security forces allow IDPs freedom of movement inside and out of camps, women-headed households are less likely to move freely in this way. Humanitarian activities in camps should consult with vulnerable households to understand how to adapt methods to suit their needs e.g. for vulnerable households, items should be brought to the household rather than being distributed at a fixed site.

Specific measures to combat stigmatisation - GBV prevention and response services should incorporate specific measures to tackle stigmatisation of GBV survivors and avoid re-stigmatisation. This can include provision of GBV services through entryways such as health and community centres and working with religious leaders to promote acceptance of children born with fighters.

Legal services – Legal issues particularly around lack of registration, lack of formal identification and status of children born under sexual slavery will become a growing need. Mobile legal teams should ensure discreet and gender-balanced teams to reach out to women and men.

Mental health support - Counselling and mental health support should be provided for women, men, boys and girls through entryways such as information dissemination and awareness sessions.

Vocational/Educational activities - While livelihoods activities are often dismissed at emergency stage, and it is uncertain on how long families will remain displaced, small types of vocational activities are important in terms of self-protection (Keeping busy and having a sense of purpose) and to start gaining skills for income-generating activities

Training for staff in Psychological First Aid - Training should be provided to frontline humanitarian implementing staff on Psychological First Aid and integrating GBV prevention and response into programming.

Conflict resolution and peace building – While it is not seen as a prioritised emergency intervention, large groups of people in a confined space (where currently freedom of movement outside of camps is not allowed) can lead to rising tensions and this should be closely monitored and peacebuilding organisations should intervene in these settings.

Reproductive health service provision – With IDPs consisting mostly of women and children, it is anticipated that numbers of pregnant women will be high. UNFPA estimates 8000 displaced women who are pregnant or about to give birth and this number is likely to rise as more IDPs arrive. Stranded families on changing frontlines in particular will be in need of health services.

Introduction

On 17th October 2016, a coalition of Iraqi and international military forces launched an offensive to liberate Mosul and its surrounding villages which had been held by an armed group for the past two years. The aim of the operation was to push armed group out of Mosul, the second largest city in Iraq, as well as out of the rest of the Nineveh governorate. This military operation is still ongoing and while many villages surrounding Mosul have been liberated from armed group, an uncertain number of civilians are still residing inside Mosul.

As of 22nd November, the IOM Displacement Tracking Matrix (DTM) has recorded 68,112 individuals internally displaced by Mosul operations. Out of these, 77% reside in camps and 14% in private accommodation. 8% of the population resides in critical shelters, distributed across various locations, especially in Red Valley Village, Tilkaif district. The IDP population displaced from Ninewa governate due to Mosul military operations grew by 30%.

IOM (2016) estimates that the vast majority of the displaced are currently in Ninewa governorate (98 percent or over 58,400) – mostly in Al-Hamdaniya district (38,300) and in Mosul district (nearly 16,000). Host communities are in a position of vulnerability and in need of humanitarian assistance as they consist largely of previously displaced people. Multiple displacement is common and formal camps are filling quickly with uncertainly around how many IDPs can be anticipated within the coming weeks.

It was reported by UNHCR on 21st November that since the Mosul offensive started, there have been a total of 1,950 Iraqis who have arrived in Al Hol in Syria. While this number is relatively low compared to the numbers of internally displaced Iraqis, these refugees have severe protection needs particularly for children.

This Rapid Gender Analysis has the following objectives

1. To analyse and understand the different impact that the Mosul crisis has on women, men, girls and boys and their current needs and capacities.
2. To inform humanitarian programming on the Mosul crisis based on the different needs of women, men, boys and girls particularly
3. Identify key priorities in terms of advocacy on gender and protection issues

Method

The Rapid Gender Analysis in Mosul has been carried out remotely and uses a range of methods to collect data and information. It is based on the CARE Emergency Pocketbook's Rapid Gender Analysis tool and draws from the IASC Gender Handbook in Humanitarian Action.

Due to issues around humanitarian access relating to the ongoing conflict this Rapid Gender Analysis draws mostly on secondary information and interviews with key informants who are currently working with IDPs affected by the Mosul offensive. While attempts were made to verify information within this analysis, the complexity of the conflict and access challenges may result in information gaps. This Rapid Gender Analysis has been designed as an incremental process due to the rapidly changing conflict and its impact on civilians and is therefore an incomplete analysis.

Gender Roles and Responsibilities

Prior to Mosul crisis

Information on the gendered dynamics for women, men, boys and girls living, prior to the current offensive, under armed group rule is uncertain and largely unverified however it can be concluded that women's participation in the community was very minimal under armed group occupation.

Most women stayed at home for fear of leaving the house and had very restricted movement. In terms of political participation, a recent UN WOMEN report mentions public executions of female parliamentary candidates by militants in Mosul.

Women and girls from minority ethnic and religious groups, e.g. Christians and Yazidis were forced to convert to armed group's interpretation of Islam and many have been bought and sold amongst fighters as sex slaves. Media reports have shown examples of armed group instructional pamphlets on treatment of women and girls and one such leaflet stated that "Pre-pubescent girls can be taken as concubines. You cannot have penetrative sex but you can still enjoy them."

While information on households living under armed group occupation is not verified, it can be assumed that men and boys were more mobile than women in the community, though there were also grave security risks for men and boys including beatings and arbitrary detention.

During the current Mosul crisis – How have things changed?

Recent Rapid Protection Analysis conducted through the Protection Cluster shows family separation as a critical protection concern due to urgency of flight from houses and issues around men and boys being more likely to be detained or held in prolonged security screenings. There are high numbers of female-headed households and child-headed households and this means for many individuals, their roles and responsibilities have changed as a result of the crisis.

This places women and children in new positions of decision-making and providing for their families. Lack of economic resources puts them in a more vulnerable position in terms of exploitation and lack of access to humanitarian support, particularly for those without valid registration documents.

Capacity and coping mechanisms

Due to severely restricted economic resources and restricted mobility for newly displaced families arriving in camps, women, men, boys and girls are relying heavily on government and humanitarian support. Other types of coping mechanisms include selling of jewellery for women and using personal cash and other assets. However whether families were able to bring such items depends on the context of their displacement. An assessment of Zelikan camp by REACH found that only 0-25% of families who left Abu Jabro'a were able to bring such assets with them due to the rapid nature of their displacement.

Displaced families residing outside of camps, with host communities or in collective shelters, will have more freedom of mobility however might not be easily reached by humanitarian assistance. There will be increasing strain on host communities (often these host communities are previously-displaced IDPs) to share resources with newly arriving IDPs and coping mechanisms such as significantly reducing food intake and selling small items will be used. When significantly reducing food intake in households, it is common for the women in the family to eat last.

Ethnicity

Religious and ethnic minorities in Mosul and its environs consisted of groups such as Christians, Kurds, Turkomans, Shabaks and Yazidis, prior to armed group occupation in 2014.

There is little information on how many ethnic minority groups are still residing in Mosul and its environs but it is presumably a low figure as many fled after armed group officially took Mosul in 2014. Those who have remained consist mainly of women and girls who are bought and sold amongst fighters and forced to convert to armed group ideology.

Women and girls from ethnic minority groups, particularly from Yazidi, Christian, Turkmen and Shabak groups, have experienced severe forms of gender-based violence including rape, assault, sexual slavery and psychological abuse. They have been named the 'spoils of war' by fighters under armed group. Human Rights Watch reports that armed group is still holding a significant number of Yazidi women and girls as sex slaves in Mosul whom they have raped, forcibly married and converted to Islam. While many armed group fighters have moved these women to Raqqa (Syria), HRW estimates at least 300 Yazidi women still remaining inside the city of Mosul, and this figure could be much higher in reality.

Men and boys from ethnic minority groups have faced execution and torture. It could be assumed, but not verified, that there are few men and boys from ethnic minority groups in Mosul remaining as they would have mostly fled or been executed or detained.

Yazidi women and girls / Children born from sexual slavery

The challenges for Yazidi women and girls do not end for them upon their return. These women and girls are subject to the double stigma of their status as an ethnic minority and their affiliation with armed militants. Those who have small infants born with armed militants include some who do not return to their families as they fear they would need to give up their children. Those who fall pregnant often have abortions in unsafe ways due to the illegality of abortion and some are forced to have abortions against their will due to community pressures.

Due to religious and legal issues, the status of children born by Yazidi women with Muslim fighters can be unclear. By Iraqi law, which is guided by the Islamic Sharia code, children hold the religion of their fathers – therefore it is unclear what would happen with children raised by Yazidi mothers. Also if children are treated as if they were born from adultery, the law does not allow the mother to raise them. These legal issues will become a growing issue that the Iraqi legal and religious systems will need to consider and address.

GBV / Protection

Women, men, girls and boys who have been displaced by the Mosul crisis have been exposed to protection risks en route including risks of exploitation, GBV and execution. Even after families have arrived in camps or collective shelters, protection risks can continue with depression, lack of economic resources and family separation leaving individuals exposed to exploitation.

International Humanitarian Law continues to be breached as several credible reports currently show that armed group had moved tens of thousands of civilians to act as human shields. Women and girls who are already embedded with armed group fighters will be at particular risk of attack. Men and boys are also used as forced labour to dig trenches and construct fortifications with many reports of the labourers being killed in subsequent airstrikes and shelling.

In IRC's recent situation report for Mosul, they recorded 50 cases of babies born amongst 200 families recently transported to Zelikan camp needing documentation. This number will likely increase and infants and children without documentation, particularly those separated from families, are particularly vulnerable.

It should also be considered that boys and girls, and in some cases young adults, who have been living under armed group occupation have been subjected to heavily propaganda education with emphasis on violence and hateful rhetoric. This can present potential dangers with IDPs and host communities and peace building, conflict-mitigation measures are a critical accompaniment to humanitarian assistance to stabilise tensions.

Teenage boys and men of fighting age are likely to be held longer at screening centres and unaccompanied young men are treated with suspicion and are less likely to receive assistance. Child labour has also been identified as a highly reported protection concern and with IDPs arriving with little economic resources, this is expected to be a continually concerning issue.

Vigilante-type attacks on civilians by government-backed militia who suspect civilians of links with armed groups will continue to happen. It is the responsibility of the government to ensure their troops are not engaging in these types of attacks, and this is certainly a challenge for the government given the diverse range of armed actor in its coalition, yet is a crucial challenge to overcome.

Health

Displaced families are making difficult and dangerous journeys, often fleeing in a hurry and not with all members of their families, sleeping rough and in the cold and sometimes with elderly relatives and children. Many families might already be malnourished due to limited resources under armed group occupation and diseases will be prevalent due to dysfunctional sanitation systems in Mosul in the last two years.

It can be expected that pregnant women will constitute a significant number of these vulnerable populations and amongst certain communities who remain stranded on changing front lines, children and pregnant women will be in particular need of medical assistance. Even before the recent Mosul offensive, maternal health was already declining under armed group occupation due to restrictions on male doctors examining female patients and armed group restricting girls from studying certain subjects at higher education level including science.

If IDP numbers increase it will be crucial to increase reproductive health services as part of life-saving humanitarian assistance, particularly for stranded communities. Mobile health teams should deploy wherever possible to provide emergency maternal health services for pregnant women.

WASH

In terms of the current humanitarian response, WASH interventions are being provided in formal IDP camps however concerns have been raised, particularly around bathrooms in Zelikan camp which are not currently gender-segregated and therefore exposing women to more violence. If IDP numbers continue to increase, WASH facilities in camps should ensure they are mitigating risks of gender-based violence and non-camp WASH interventions should ensure they reach out to vulnerable households outside of camps. To avoid spread of disease and discomfort, hygiene promotion is also an essential component of WASH provision.

UNICEF reported on 30th November on almost half of children and their families in Mosul having reportedly been cut off from access to clean water after a major water pipeline was destroyed during ongoing conflict.

WASH interventions should ensure a consultative process with women, as well as men, to ensure opportunities are provided for women to volunteer for activities such as hygiene promotion.

Shelter / NFI

Anecdotal evidence has shown that winter clothes have been named as one of the top priorities for displaced families, many of whom left their homes with only the clothes on their backs.

Shelter/NFI winterisation distributions should ensure blankets are provided for each family member, rather than providing one blanket per household. Due to IDPs restricted movements and

lack of economic resources they are unable to purchase additional blankets/heaters and therefore are heavily dependent on humanitarian assistance. Particular attention should be paid to infants, pregnant and lactating mothers and the elderly who are particularly vulnerable during winter months.

As IOM's recent report on gendered perspectives in Iraqi IDP camps shows, female-headed households tend to access humanitarian distribution mostly if it is received in their sites as they are often unable to collect NFIs from a distribution office or distant location.

REACH Zelikan camp assessment found that while food was widely distributed within 24 hours of IDP arrival in the camp, more recent arrivals reported a lack of cooking facilities, fuel and utensils.

Food and Nutrition

Due to the poor living conditions and lack of employment under armed group occupation, families had to use coping mechanisms such as cutting down on food. Malnourishment can be expected, particularly amongst women who tend to eat last after the rest of the family.

According to IRC, food is currently insufficient to meet the needs of current IDPs in Al Qayyarah Jad'ah camp (and Qayyarah town), Hasansham, Zelikan and Debaga camps. IRC reports that there is no infant formula and that women are feeding their babies crushed biscuits mixed with water, of which there is also a short supply.

Education and employment

While some women did have their own businesses before armed group occupation (such as hairdressers and beauty parlours) these enterprises were crushed by armed group and women were forbidden from having their own source of income. Men also suffered similar fates and lack of income and livelihoods was a big issue facing households, with begging and common theft becoming an increasing coping mechanism. While little information is available on literacy levels for women in Mosul, nationally women are twice as likely as men to be illiterate and this can reflect lower levels of literacy amongst women in the region.

Currently men and woman are heavily dependent on government assistance and aid due to severe lack of economic resources and access to livelihoods under armed group occupation. Longer term solutions should be embedded into short term humanitarian assistance, such as vocational training, to ensure restoration of dignity and sustainable income along with the psychological benefits of engaging in productive activity.

While some education facilities still remained open under armed group occupation, most parents took their children out of schools due to fear for their security and of 'brainwashing' by armed actors.,

Temporary education facilities and child protection referral pathways are currently in place in formal camps. Assessments should consider the capacities of existing schools to take in an influx of children and further solutions for temporary education will need to be explored if IDP numbers rise.

Who's affected? Sex and Disaggregated Data

While there is currently no sex and disaggregated data available for the Mosul crisis, it has been identified that female-headed households are increasing in numbers and child-headed households also constitute a significant vulnerable group.

In a recent UNHCR report, they estimate that out of 2507 families assessed, 22% of families are headed by a female.

Individuals and families currently displaced from their homes consisting mostly of women and children due to family separation and it can therefore be possible that family relatives have been left behind including the elderly and disabled due to their restrictions on their movement.

In Dohuk and Ninewa governorates, which hosts IDPs who arrived in the last two years during armed group occupation, pregnant females have been identified as the most vulnerable group and this can be true also of the current situation regarding the Mosul crisis.

According to UNFPA, women and girls might currently be cut off from life-saving emergency obstetric care in Mosul and its environs. It estimates 46,000 women and girls of reproductive age amongst the 200,000 people displaced during the initial weeks of military operations, including around 8000 who are pregnant or about to give birth.

Sources

- IOM Displacement Tracking Matrix, Iraq
- REACH, Rapid Displacement Overview: Zelikan Camp, Ninewa Governorate, Iraq, 4 Nov 2016
- CARE Mosul context reports, Phil Priestley
- UN Habitat, City Profile of Mosul, Iraq, Multi-sector assessment of a city under siege, October 2016
- UNHCR. 12-18 November 2016. Mosul Weekly Protection Update. Available at <http://reliefweb.int/sites/reliefweb.int/files/resources/UNHCR%20Mosul%20Weekly%20Prot%20Update%20Week4.pdf>.
- Reuters News Agency <http://www.reuters.com/article/us-mideast-crisis-mosul-islamicstate-idUSKBN12W4KR>
- OCHA, Mosul Humanitarian Response, Situation Reports
- IRC, Mosul Situation Report, 31 October 2016
- IOM, A Gendered Perspective: Safety, dignity and privacy of camp and camp-like settings in Iraq, February 2016.
- UNFPA, Press Statement, 18 October 2016, Protection of Women and Girls in Mosul
- Rapid Protection Analysis, Crisis Information Report, 23 October 2016
- Discussions with national NGO Darya Women for Social Development
- UN WOMEN: Iraq – Voices for dignity: Providing assistance, amplifying the voices of women and girls fleeing, 01 December 2016
- UNICEF – ‘Almost half of Mosul’s children cut off from clean water as fighting intensifies’
- Human Rights Watch
- Amnesty International
- VOA News – Pregnant IS Rape Victims Face Challenges Upon Return