Improving the Safety, Protection, and Wellbeing of Adolescent Girls in Iraq
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Programming Objectives:

Improve the safety, protection, and wellbeing of adolescent girls by reducing the risks of gender-based violence (GBV), ensuring quality service access for girls harmed by GBV, advocating for adherence to protective laws, and building girls’ individual and collective agency.

UNICEF’s Iraq’s Approach:

Foster a protective environment for adolescent girls, including reducing harmful norms that tolerate GBV and hinder help-seeking by adolescent girls. Through a multisectoral approach, strengthen the quality and accessibility to GBV services, as well as the protective assets, coping skills, and resilience of adolescent girls.

Context

The many years of conflict in Iraq has resulted in widespread psychosocial distress among the adolescent population and in poverty and low school attendance. Adolescent girls in particular are disproportionately vulnerable to violence in many forms including harassment; sexual exploitation, abuse, and violence; abductions; and child marriage—and often have limited access to information and support systems.

As Iraq transitions from conflict and emergency to recovery and development, improving the safety, protection, and wellbeing of adolescent girls in Iraq is critical.

Iraq is a historically patriarchal society where certain traditional values and views of gender roles, female chastity, restricted movement for women, and family honour have, to a certain extent, normalized gender-based violence (GBV)—including emotional, psychological, physical, and sexual abuse. A 2016 survey on GBV highlighted high levels of violence experienced by girls, and a 2018 survey reported that eight out of 10 children aged 1-14 years experienced some form of violent discipline. Widespread denial of access to services, resources, social opportunities, employment, schooling, and healthcare is
prevalent for adolescent girls, especially those living in rural and/or traditional communities. While attitudes around the acceptability of violence has shifted over the past decade, an unacceptable number of young people still believe it is acceptable to resort to violence with their partner (see box). Within this context, efforts to ensure adolescent girls are safe, protected, and able to thrive without the risk of GBV require strategies at the individual and governmental levels.

At the governmental level, the Kurdistan Regional Government (KRG) passed a Law against Domestic Violence in 2011 that criminalizes “honour” crimes, female genital mutilation, physical abuse, and child and forced marriage. The Republic of Iraq ratified the National Child Protection Policy in 2017 that provides a framework for action to prevent and protect Iraqi children and adolescents from violence, abuse, exploitation and neglect, and to provide services and support for children and adolescents who are at risk and experienced violence. Unfortunately, the laws have only been minimally implemented.

Iraq’s current stability offers hope that a more collaborative and proactive response to GBV can be achieved. Working together to overcome financial constraints, the ongoing humanitarian crisis, and competing government priorities, UNICEF Iraq has been collaborating with the Government, UNFPA, UNDP, civil society, and other partners in drafting and operationalizing a national adolescent action plan based on the Ministry of Youth and Sports (MOYS) National Youth Strategy 2015-2025.

**UNICEF Response: Key Programmes & Outcomes**

From 2014-2017, UNICEF worked alongside humanitarian organizations to address GBV in internally displaced persons (IDP) camps and host communities through multiple sectors, including child protection, adolescent development and participation, education, health, and more.

As the country stabilized in 2017, UNICEF and partners have worked more closely with the Iraqi Government and Kurdistan Regional Government to develop coordinated regional and national responses for adolescent girls.

Reaching girls in their adolescence is critical to develop their knowledge, coping capacity, and resilience to help mitigate their risk of GBV, especially for those displaced by conflict (who may not receive such information and skills in school or at home). Almost half of the approximate 355,000 school-age children and adolescents who are displaced are not in school, with the situation most severe for girls in rural areas who are under-represented in both primary and secondary schools.

For instance, in partnership with the MOYS and civil society organizations, programmes are being offered through Youth Centres that promote girls as agents of change in their communities; develop social cohesion and meaningful engagement in social and civic life; and enable girls to confidently express themselves within their families, communities, and in national dialogue. The Youth Centres also offer specific skills-building training to girls to help them gain an income in the future such as in tailoring and awareness-raising sessions on early marriage and premenstrual syndrome.

**2019 Iraq National Youth and Adolescent Survey**

70% of respondents in 2019 would not resort to violence with their partner compared to 54% in 2009.
Fostering a Protective Environment

Provide safe spaces for girls

Protective environments can be physical spaces where girls are safe from harm and can build knowledge and agency to recognize, prevent, cope with, and recover from GBV. In Iraq, adolescent girls have long faced violence as they transition from childhood to adulthood. For those whose education was interrupted at young ages, they often experience limited access to services and information—including on sexual and reproductive health. Reaching this group was a priority during the conflict, and continues to be today.

During the humanitarian crisis in Iraq, UNICEF, Save the Children, World Vision, and other partners set up Child Friendly Spaces designed to offer psychosocial support and recreational activities, including sports and participatory games to help them cope with the challenging situation. While the spaces often served as areas where children could connect to protective services and build protective assets, UNICEF found that adolescent attendance—especially by girls aged 11-14 years—was limited.

Similarly, Youth Centres were established by government bodies and national organizations in Iraq to provide various educational, intellectual, and recreational services to adolescents and youth. However, because they were set up for all genders, many girls were unable to attend due to traditional practices where families limited their ability to engage in mixed groups. Women Centres that offer computer and literacy classes, job skills, education and training for financial independence, access to information regarding health care, and legal services to women tended to be more well-attended by adolescent girls who were out of school. They would often go with their elder sisters even though these centres did not technically cater to younger adolescents. Understanding this reality led to the recommendation to create adolescent girl-friendly spaces in established Child-Friendly Spaces, Youth-Friendly Centres, and Women Centres.

Strengthen girls’ knowledge, agency, and resilience

The Adolescent Girls Toolkit for Iraq launched in 2016, targeting girls from IDP, refugee, and host communities in Iraq. The Toolkit was designed for girls in early adolescence (aged 10-14 years old) and late adolescence (aged 15-19 years old). The curriculum is grounded in the lived experiences of adolescent girls living in Iraq to meet their unique needs and challenges. The Toolkit not only focuses on GBV but provides reproductive health and financial education and psychosocial life skills training to help girls develop protective assets and improve their access to essential services. It has been acknowledged as instrumental in advancing adolescent girls programming in Iraq. It sparked the formation of an Adolescent Girls Task Force (with members from CSOs and NGOs across Iraq), who used the Toolkit throughout Iraq.

Since 2016, more than 100 governmental partners (i.e., the Ministry of Labour and Social Welfare [MOLSW] and MOYS), local civil society organizations, and international NGOs have received training on implementing and using the Toolkit. Those trained then taught others—who support adolescent girls across Iraq—on how to create and operate girl-friendly spaces in different centres with the Iraqi context and run programming in contextually sensitive ways that help to lower risks of GBV.

Because the Toolkit is designed to address multiple protection issues such as sexual violence, abductions, sexual harassment, child marriage, exploitation and abuse, even the girls who were allowed to mix with boys at Youth-Friendly Centres felt more comfortable in adolescent-girl only sessions.

The Toolkit provides a set of ready-to-use tools for partners to reach and support girls with information and life skills essential for their wellbeing and safety; and also promotes parental involvement in girl-focused, education-linked interventions such as learning support classes, English language lessons, and Information Communications Technology (ICT) courses.
One reason the Toolkit has been widely accepted is its practical approach to developing girl-specific and friendly curriculum, which can be easily adapted to be culturally and religiously sensitive. For instance, the Facilitation Technique section provides guidance on sensitive topics, confidentiality, adolescent girl-friendly language, reproductive health and safety sessions, and positive discipline.

UNICEF Iraq and partners also worked together to strengthen the capacities of civil society organizations and community leaders to offer ongoing girls programming using the Toolkit. Trainings on the Toolkit are conducted yearly for new partners; and a refresher session is offered for previously trained partners. Since 2017, UNICEF and its partners have also supported parenting skills programmes—delivered by Child Protection Sub-Cluster in Iraq and government social workers—that aimed to increase parents and caregivers’ knowledge of positive and non-violent discipline techniques, increase and improve intergenerational communication, and contribute to reducing violence against children and women in the home. Teachers and education staff could also access UNICEF and partner trainings. The pedagogical skills for these cadres focused on reducing corporal punishment, enhancing learner-centered approaches, and improving school staff’s ability to identify, manage, and refer children who are experiencing psychosocial distress or child protection issues at school or at home.

In 2019, nearly 209,000 children and adolescents (98,500 girls) accessed child protection services aimed at improving their safety, wellbeing, and resilience.

More than 708,000 children and adults took part in preventive interventions aimed at addressing social norms that perpetuate violence against children and women.

Children and adolescents displaced by conflict participate in a skills-building programming at a Youth Centre in Kirkuk, Iraq. Since it opened, more than 3,200 young people have visited the Youth Centre to learn English, Arabic and Kurdish, life skills, and enjoy theatre, art, and drawing classes. Adolescent girls and young women attended job-focused courses like tailoring, along with awareness-raising sessions on GBV, early marriage, premenstrual syndrome, girls’ health, etc. Gender-based issues such as early marriage, violence, and sexual education are of particular concern for displaced people, and the Youth Centre offered a safe space to receive information.
Address harmful attitudes and social norms that condone violence

GBV prevention requires a comprehensive approach that aims to reduce harmful norms and attitudes around GBV, lower overall risk, reduce stigmatization as a barrier for adolescents to seek support and services, and build supportive legislative and policy frameworks. To this end, UNICEF Iraq and its partners prioritized constant and careful community engagement aimed at initiating behaviour change and discouraging harmful practices and GBV. This included efforts to ensure that girl-friendly spaces and programming and the use of the Adolescent Toolkit would be accepted by local families and by centre staff.

For example—cognizant of potential resistance to the programme—discussion sessions were held with parents, caregivers, and religious and community leaders to introduce the Toolkit curriculum in a community before implementation. These sessions explained how the activities were designed; the leadership, health, financial, and life skills the girls would gain; and how the Toolkit promotes evidence-based, age-appropriate information on physical and cognitive development. The Toolkit curriculum also includes seven sessions that mothers and adolescent girls can attend together, which helped to lower barriers to girls’ attendance and create a more enabling environment. The emphasis on refresher training was also helpful for addressing stigma perpetrated by facilitators themselves.

Involving adolescents and youth in their own wellbeing

In addressing GBV and related issues, attention was also given to involving adolescents and youth in civic engagement. For instance, UNICEF and UNFPA supported the Ministry of Planning Central Statistics Office and Kurdistan Region Statistical Office to run the 2019 Iraq National Youth and Adolescent Survey, during which 10 NGO partners and 175 young researchers (88 female) engaged in Youth Participatory Action Research. They collected data on the aspirations of young people, their self-perceived wellbeing, and young people’s positive contributions for the report, including on GBV. To further involve adolescents, UNICEF Iraq launched U-Report in 2019 to support young people in Iraq to speak out on community issues and encourage citizen-led development. Currently, more than 20,000 adolescents are enrolled on the platform.

Accessing Quality Services, Psychosocial Support, and Legislation

As important as adolescent girls easily accessing safe space is ensuring they can receive specialized GBV case management services to meet their medical, psychosocial, legal, and security needs. Here, UNICEF Iraq is helping to strengthen the quality of multisectoral, gender-sensitive child protection prevention and response services, case management, and other specialized services for children and adolescents without parental care. Specifically, it supports welfare and justice systems, schools, and health facilities as platforms to prevent and detect cases of abuse, violence, and exploitation.

Strengthen the capacity of GBV service providers

Working with NGO and government partners, UNICEF has supported the establishment and implementation of a case management system that offers appropriate and timely access for GBV survivors, including adolescents. Additionally, in 2017 a UNICEF Iraq collaboration with the United Nations Assistance Mission for Iraq (UNAMI) identified and sought to address gaps in laws, policies, and essential service delivery for GBV survivors to support them in recovery and reintegration, including how to reduce stigma of being a survivor.

More than 33,000 adolescents and youth aged 10-30 years participated in the 2019 Iraq National Youth and Adolescent Survey, and their responses are being used to build the Iraq National Vision for Youth 2020-2030.
This collaboration included making investments in more strategic and sustainable capacity-building approaches, including child protection and GBV response training for social and community workers, police, security officers, lawyers, and teachers who support IDPs; especially in the IDP camps and communities hosting displaced families. Through a comprehensive training package that UNICEF designed and implemented (in 2019), more than 350 government staff members (from MOLSA, MOYS, the Ministry of Education, and the Department of Labour and Social Affairs) were trained on adolescent GBV case management. Additionally, frontline workers are obtaining skills to identify and refer adolescents at risk or survivors of GBV to the services they need. At the same time, work was initiated to foster a supportive environment for adolescent girls to report cases.

Support better policies, practices, and legislation

In Iraq, the legal and policy framework for child protection and prevention and response to GBV has continued to improve, although there remain legislative gaps. UNICEF reviews have revealed gaps between domestic laws and the Convention on the Rights of the Child (CRC). UNICEF continues to support legislative review of the rights of children, engaging stakeholders working on legal reform to collaborate in the child law process, facilitate consultations, and build consensus on the need for a new child rights law in line with the CRC. Such efforts have prioritized actions and policies that aim to shift knowledge, attitudes, practices, and behavior.

As one example, the Juvenile Justice system in Iraq is tasked with ensuring high standards of justice services for adolescent GBV survivors. To strengthen this system, in the Kurdistan Region (KRI) UNICEF Iraq developed an integrated training module for justice and security sector actors on child rights, juvenile justice, and justice for GBV survivors. The office also completed a Training Needs Assessment of the Police Academy in the KRI and developed a pre-service training curriculum for introduction to GBV.

Nationwide, UNICEF Iraq, other UN bodies, government, and partner organizations are utilizing a transparent, data-driven GBV Response Dashboard (launched in 2018 and co-developed by government and civil society, with UNICEF support) to track the GBV response for IDPs. The Dashboard data helps elevate an understanding of where, when, and why GBV occurs and monitor whether indicators are being met at an institutionalized level. Partners are accountable for the indicators and the programmes they implement in response. As part of Iraq’s GVB Sub-Cluster, UNICEF reports to this dashboard, which includes data specific to adolescent girls and boys.

Work through GBV networks

UNICEF is an active partner in the Inter-Agency Standing Committee on Protection from Sexual Exploitation and Abuse (PSEA), a network that receives and monitors complaints and referrals on sexual exploitation and abuse, with onward referral to the GBV Sub-Cluster for immediate action and mobilization of support services. Members of the network also work together to train humanitarian workers to understand how sexual abuse can occur, the consequences for survivors, how to respond to complaints and act if they witness abuse, including on the sensitivity required when supporting girl survivors.

Being part of this and other networks has helped elevate the importance of a collaborative, strategic focus on adolescent girls and GBV, and led to the 2016 formation of the Adolescent Girls Task Force (AGTF). The AGTF consists of members from the UN, government, and civil society organizations. The task force played an active role in raising awareness on the issues of adolescent girls, including through capacity-building on the Adolescent Girls Toolkit to create awareness on GBV and girls’ health. Furthermore, UNFPA as a co-lead of the AGTF with UNICEF, has conducted vigorous evidence-based advocacy on the issue of child marriage and GBV. UNICEF Iraq also plans to adopt UNICEF’s Communities Care Programme that is premised on the idea that while armed conflict causes deep suffering for those affected, the disruption it causes may also present opportunities for positive change in social norms that can contribute to gender equality and decrease gender-based violence (GBV) and discrimination.
Lessons Learnt

Involve all of society in addressing GBV

Gender-based violence is not just a girls’ or women’s issue, but a societal issue in Iraq where violence is most often perpetrated by boys and men against girls and women, but where boys and men are also survivors. It is thus imperative that attention is also focused on boys and men to alter individual instances of violence, and conditions that tolerate and even promote violence, including an acceptance of harassment, abuse, exploitation, and child marriage. Programmes that offer holistic packages of age and gender-responsive multisectoral services and focus on social cohesion are a promising way forward for shifting harmful norms, attitudes, and practices. Importantly, efforts must include the most vulnerable populations who are often the most affected by GBV, such as adolescents out of school and/or with disabilities, those who have been displaced, and adolescents affected by lack of access to education, job opportunities or multidimensional poverty.

Ensure gender-sensitive, multisectoral responses to child protection

In times of crisis or conflict, sexual exploitation and abuse escalate, with adolescent girls facing multiple hardships. It is thus critical to ensure staff members and partners have an understanding of the conditions girls might face during and after crisis and hazardous events. They also require knowledge and skills in how to manage trauma and its manifestations (i.e., mental health issues, potential for self-harm, etc.) after a crisis or conflict.

A gender-sensitive response to GBV looks to how differing sectors (i.e., education, health and child protection, peace and justice, etc.) can work together in supporting adolescent girls surviving GBV or at a higher risk. This includes adolescent-friendly psychosocial support, family tracing and reunification, back-to-school programming, legal assistance, survivor-centered GBV prevention, and other GBV response services.

Conclusion

Addressing gender-based violence in Iraq is a complex undertaking that requires multisectoral responses at multiple levels from the individual to the community level with active engagement of local and national decision-makers. Working together with government and civil society is critical in ensuring that adolescent girls live in a protective environment, with access to the support and services they need to mitigate their risks of experiencing GBV and if they are survivors of GBV. While the focus in Iraq has been primarily on girls due to high prevalence of violence perpetrated against them, an effective response requires a strategic, holistic approach that involves all members of society united in creating communities free from all forms of violence—be it harassment, abuse, abduction, exploitation, rape, child marriage, or domestic violence.

As UNICEF Iraq’s efforts have shown during and after the conflict, a response to child protection is strongest when it is gender-sensitive and involves multiple partners working towards a similar goal to reduce adolescent GBV strategically and systemically. Undercutting these efforts is a need to work consistently and coherently to alter social norms and practices that negatively affect adolescent girls in Iraq to ultimately improve their safety, protection, and wellbeing.

Further Readings and Information

- Adolescent Girls Toolkit
- 2019 Iraq National Youth and Adolescent Survey – Arabic
- Humanitarian Response Plan Iraq
- Inter-Agency Steering Committee (IASC) Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action
- IASC COVID-19: Resources to address gender-based violence risks
- IASC plan for accelerating protection from sexual exploitation and abuse (PSEA) in humanitarian response at country-level
- Lost at Home: The risks and challenges for internally displaced children and the urgent actions needed to protect them
- Women and Girls Safe Spaces - UNFPA
Acknowledgments and Contacts

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Endnotes

14. Funded by the Norwegian Ministry of Foreign Affairs.
17. www.uniraq.org
20. The Sub-Cluster members work together to initiate and coordinate concrete actions to protect GBV survivors and other groups at risk of GBV, promote GBV survivors’ access to multi-sectoral services; and support mechanisms to mitigate and prevent GBV.