



## **CHILD PROTECTION ASSESSMENT** **HARSHM IDP CAMP**

### **Introduction**

This report was written in response to the need for qualitative information regarding the child protection concerns in Harshm IDP Camp in Erbil. The camp has been hosting Iraqi IDPs since September 2014 and currently more than 260 families are residing there, according to the camp database. The camp has a population of about 1400 persons, more than half of which are below 18 years of age.

Information regarding the child protection situation is needed to specialize and focus the assistance offered. Therefore, Terre des Hommes Italy, as the main child protection actor in Harshm, conducted an assessment of the child protection situation in the camp, which aimed to include all the families with minors currently residing in the camp.

The assessment was carried out by the Child Protection Unit in April 2015, as part of the ongoing child protection project of Terre des Hommes Italy.

### **Objective of the Assessment**

In Harshm Camp there are about 1400 individuals and 760 children. In September of 2014 Terre des Hommes Italy opened up a child friendly space (CFS) in the camp. Per week approximately 300 children attend the educational and recreational activities. Furthermore, the social workers of the CFS provide counselling, support and case management to the most vulnerable children and families. In April 2015 TdH Italy opened a Child Protection Unit in the camp to extend the child protection services.

The objective of this assessment was to obtain both qualitative and quantitative data regarding the situation of children in Harshm. The priority of this assessment was to get a better understanding of the main child protection issues and the scale of these problems. At the same time, the assessment was used as a tool to make the social workers of the Child Protection Unit known in the camp and familiarize the community with the scope of their work.

Finally, the assessment aimed to measure the extent to which some services in the camp were known and assistance was received.

### **Methodology**

The assessment was done through a questionnaire consisting of maximum 37 questions. A minimum of 27 questions were asked to all the respondents, who were mainly the parents. The families were visited by Terre des homes Italy CPU social workers in their house and informed about the voluntary

participation to the exercise, the objective of the questionnaire and the confidential manner in which their answers would be handled.

The questionnaire was written by Terre des Hommes Italy Child Protection Unit and reviewed by Unicef. The form was inserted in ODK in order to conduct the survey by tablet and to collect the data in a safe and most confidential manner.

A total of 263 families were interviewed. All families with underage children residing in the camp were targeted. Single persons were not included in this assessment, unless they were minors.

For the outcomes and conclusions of some of the data, the knowledge and experience of the social workers of the CFS was used independently of the survey. This was done in order to place some of the data in perspective, as well as to emphasize important child protection issues which cannot be highlighted enough in an assessment which aims to have parents as respondents.

### **Challenges**

As mentioned, all families with underage children residing in the camp were targeted. However, after reviewing the outcome it became clear that some families with adult children or couples with pregnant women were interviewed by mistake as well. This happened because it was not always clear for the interviewers what the age of the children was when they started the interview, or if the children present in the house where the children of the respondent.

The respondents were informed that their information would be kept confidential and none of their individual answers would be shared with anyone. This was done in order to make the respondents feel at liberty to answer honestly, even regarding potentially uncomfortable questions. Despite this, at times the assessors received incorrect answers from families, especially when asked about employment and assistance received. The assessors were mostly known in the camp as well and therefore they were sometimes aware of the fact that the actual situation of the family was different from the answers they gave. However, of course the results of this assessment were based solely on the answers received.

In the weeks it took to interview all families there might have been some changes in the situation in the camp, the family composition or the family situation (for instance regarding employment).

## **Findings**

### ***Origin of respondents***

The families in Harshm Camp originate mainly from Mosul, Sinjar and the surrounding areas. They are Iraqis who fled to Kurdistan when IS rose in the Nineva district. Some of them spend some time in the Khazir transit camp in July, while others came directly to Harshm Camp during the influx of August and September 2014.<sup>1</sup>

### ***Household composition***

Of the 262 households interviewed, 85 were effectively headed by a female. The others were male headed households.

All the respondents together had a total of 766 children. This is a division by sex and age groups:

AGE	# boys	# girls	TOTAL
0	18	17	35
1	37	32	69
2	30	28	58
3	23	21	44
4	31	29	60
5	22	29	51
6	26	25	51
7	25	21	46
8	21	31	52
9	19	20	39
10	27	21	48
11	9	22	31
12	25	15	40
13	10	16	26
14	17	11	28
15	19	13	32
16	16	12	28
17	16	12	28
<b>TOTAL</b>	<b>391</b>	<b>375</b>	<b>766</b>

The family size recorded ranged from 1 to 15 persons. Most families consist of 5 persons (47 families). As the family size gets higher the number of families gets less (9 families of 10 persons, 4 families of 11 persons and 1 family of 15 persons).

### ***Pregnancies***

The assessment recorded 36 pregnancies in the camp.

### ***Medical conditions***

107 families indicated there was a member of the family suffering from a severe medical condition. In this section the respondent could indicate the condition. The survey did not ask for any medical documents to substantiate the claim. Some conditions indicated would not be considered "severe" as

<sup>1</sup> Iraq Humanitarian Needs Overview 2014-2015

the survey intended to record. The medical conditions most mentioned were high blood pressure (19), heart problems (11), disability/handicap (10), kidney problems (8), diabetes (7), and other medical problems and diseases.

However, later in the assessment when the respondents were asked about children with vulnerabilities in the family, and only 1 of the 107 indicated a severe medical condition as a vulnerable child in the family. Therefore, it could be that the other persons with medical conditions were all adults, or the respondent did not consider the medical condition as a vulnerability.

Of the 107 families with an ill family member, 65 of them indicated that they have insufficient access to medical services. For most of them (53 families) the reason is that the treatment they need is not available in the medical facilities they have access to. However, 4 of them gave financial constrains as the reason for their lack of access. Also, 1 family indicated they were refused access to the medical service they needed. Finally, 7 families claimed there were other reasons.

### ***Child birth in camp and birth registration***

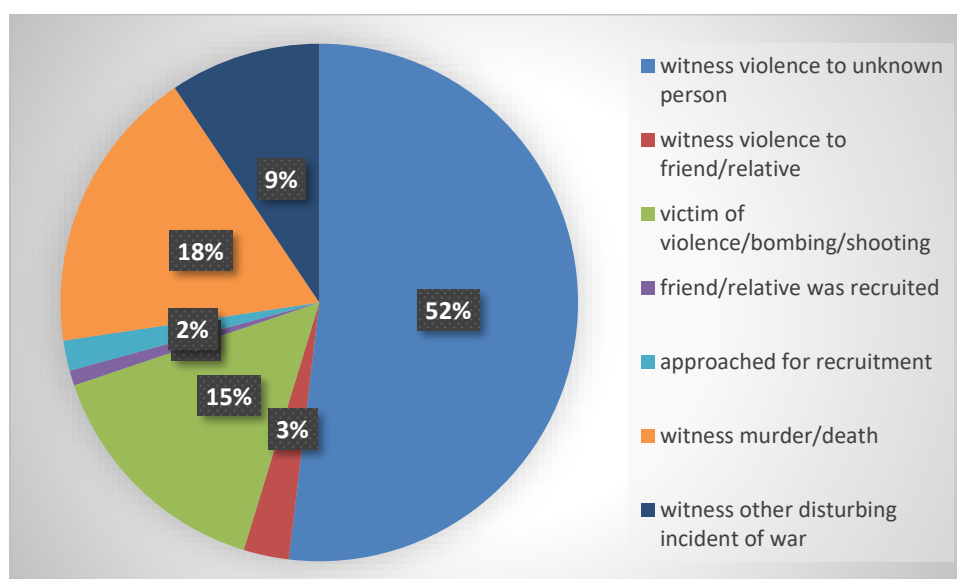
42 families indicated that at least one of their children was born in Harshm Camp. Of these newborns 41 were registered and only 1 child remained without birth registration. According to the family they will be registering the newborn in the coming weeks.

Compared to the number of newborns, the number of unregistered children is very low. It is a good sign that most families did indeed register the birth of their child and are aware of how and where to fulfill this process.

### ***Child trauma/experiences in Iraq***

The survey asked if (one of the) children in the household had witnessed or experienced any traumatizing incidents before or during their flight. The outcome was the following:

Incident:	# of children:
- The child witnessed violence/harm against an unknown person	55 children
- The child witnessed violence/harm against friends/family members	3 children
- The child was subjected to violence/bombing/shooting	16 children
- A friend/family member was recruited into an armed group	1 child
- An armed group approached the child/the family for recruitment	2 children
- The child witnessed murder/death	19 children
- The child witnessed another disturbing incident of war	10 children



The answers above reflect the experiences of 88 children, because in most cases the child had witnessed/been subjected to more than one of the scenarios. Therefore the numbers above collectively (106) do not represent the number of children who suffered these experiences.

The total, 88 children, indicates that over 10% of all children in Harsham has been witness or victims of incidents of war. This is a substantial number and it reflects the high need for ongoing psychosocial support to children and families.

51 families indicated their child/children suffered from trauma and/or a significant change in behaviour and/or other psychological problems as a result of what was witnessed or experienced in Iraq. However, only 7 of these 51 families sought psychological support for the child/children. Later in the survey, 9 of the remaining 44 families indicate they are aware of psychosocial support services and services of a psychiatrist offered in the camp.

This shows that the number of families seeking psychological help for their child is very small compared to the need, and an equally small number of families is aware about the existence of such services.

#### *Witness of violence/harm against an unknown person*

A total of 55 children witnessed an act of violence or harm against an unknown person before or during their flight. This is a significant number, but it is not unexpected in light of the violent surroundings in their area of origin.<sup>2</sup>

#### *Witness of murder/death*

Significant is the high number of children who have witnessed a murder or death. 19 children have apparently experienced this type of event. However, less than half of this group indicates their child/children to suffer from a trauma as a result of anything witnessed or experienced.

#### **Separated children**

The survey included a question regarding the presence of unrelated children in the family. The survey aimed to include all children who are not part of the immediate family (thus also nieces, nephews, grandchildren etc.) in order to get an overview of children who are in the camp without one or both of their parents.

According to the findings there are 8 families taking care of a child/children who are not part of their immediate family. All of those children are in a way related to the family they are staying with: 3 are nieces/nephews, 3 are grandchildren and 2 are otherwise related to the family. 5 of the 8 children indicated that they are in contact with their own parents.

Compared to the total number of families in Harsham this number of separated children is low, however, these children are in a more vulnerable situation and they are in need of continued monitoring. At the moment there are no unaccompanied children in Harsham Camp.

#### **Married children**

Respondents were asked if any of their minor children were married in the last two years. For this question it was irrelevant if the marriage was concluded in the camp, or in any other location before or after fleeing from Iraq.

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<sup>2</sup> This becomes clear in for example the following reports of OCHA and Human Rights Watch:  
<http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=14980&LangID=E> and  
<https://www.hrw.org/news/2014/07/19/iraq-isis-abducting-killing-expelling-minorities>

The survey showed that in only 3 of the interviewed families a minor child was married in the last two years. 2 families indicated that the reason for the early marriage was security. In one case tradition was given as the reason for marriage. This number is low compared to the total children of (potential) marriage age in the camp, however the issue remains relevant and monitoring continues to be needed.

### **School**

At the time of the assessment, there was no formal education available in Harshm camp. For this reason, the topic was left out of the survey.

However, 44 families indicated that they received education assistance (see page 8). The families claimed that they let their children (mostly boys) go to nearby Arabic schools, mainly the school in Baharka and in Shoresh Ankawa. However, this is not available for everyone due to financial constraints and security concerns.

In September 2015 the school in Harshm Camp will most likely be opened. Almost all of the families interviewed indicated they will send their children to school.

### **Household income and working members**

The families were asked about their source of income. The following options and answers were given (combinations were possible):

Source of income:	# of families
- No form of income	111 families
- Work outside the camp	98 families
- Work inside the camp	55 families
- Volunteer work (stipend)	1 family
- Savings	1 family
- Humanitarian assistance	0 families

The outcome of this question of the survey is doubtful, considering the fact that there are quite a few members of the camp community working for a volunteer stipend for several NGOs in the camp, including Terre des Hommes. Possibly, the stipend is mistaken for a salary by the respondents.

Additionally, the respondents were asked who in the family was working. In most cases (130 families) this was the head of the household or his or her spouse. In 16 cases an adult child was providing (part of) the family income. In 2 families a minor child was working and in both of those cases the child was providing the only income of the family. Mostly this was daily labor done outside the camp.

It is significant to mention here that 10 cases of child labor have been identified and assisted by the TdH Social Workers since December 2014. It has proven to be a sensitive and misunderstood topic among families. Often they do not regard the income generating activities of their child "work" or they feel hesitant to mention the issue to the social worker out of fear of being judged or forced to make the child stop working.

### **Access to water**

Many families indicated they did not have enough access to water for drinking, cooking and hygiene purposes (108 families). At the same time, some of them also indicated before not to have a source of income (46 of the 108) which might be a reason for their lack of access to water. However, most families without income did have sufficient access to water.

Also, the majority (84 families) of the 108 respondents indicated to have received food assistance and/or vouchers, which could also be used to increase access to water. This outcome is peculiar considering the fact that all residents of Harsham Camp receive regular food voucher assistance.

**Access hygiene items**

A large majority of the respondents (192) indicated they have insufficient access to hygiene items. However, 59 of them indicated they have received hygiene products and/or awareness.

When cross checking with the families with pregnant women it showed that 30 of the 36 families with pregnancies indicated to have insufficient access to hygiene items. Additionally, 83 families with a baby in the family indicated they did not have access to hygiene items (which include diapers and other baby products).

**Non-Food Items**

All families interviewed indicated they have insufficient access to non-food items. The families were asked to indicate what they were most in need of (several answers could apply):

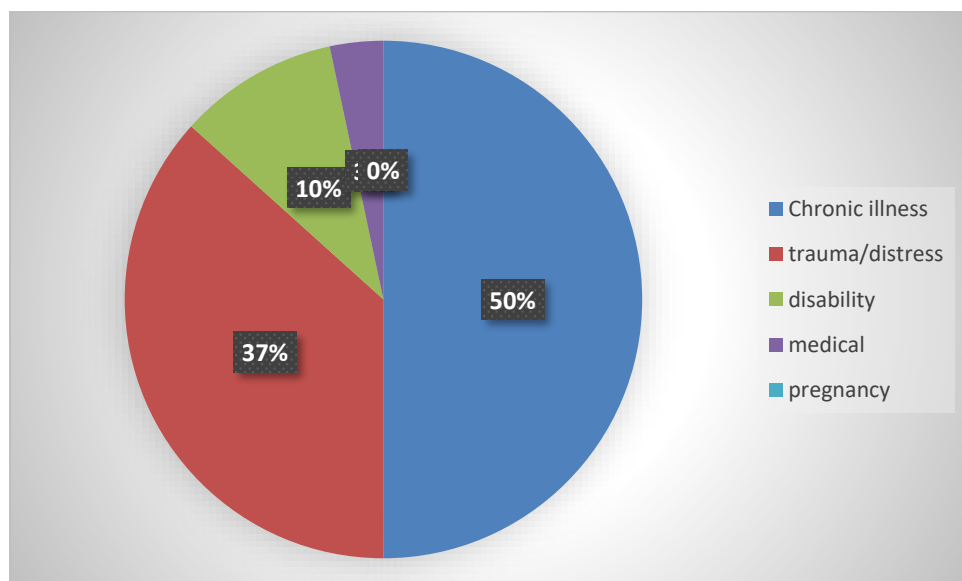
NFI needs:	# families who indicated this as a need:
- Cooking supplies	236 families
- Clothing	155 families
- Mattress	102 families
- Blankets	93 families

It is significant that cooking supplies seems to be the main need for the respondents. Over 90% of the families indicated they had a need for these items.

**Vulnerabilities**

The majority of the respondents indicated there were no children with specific vulnerabilities in the family (232 families).

Possible vulnerabilities were:	# of families where this was present:
- Child with chronic illness	15 families
- Child suffering from trauma / psychological distress	11 families
- Child with disabilities	3 families
- Child with serious medical condition	1 family
- Pregnant child	0 families

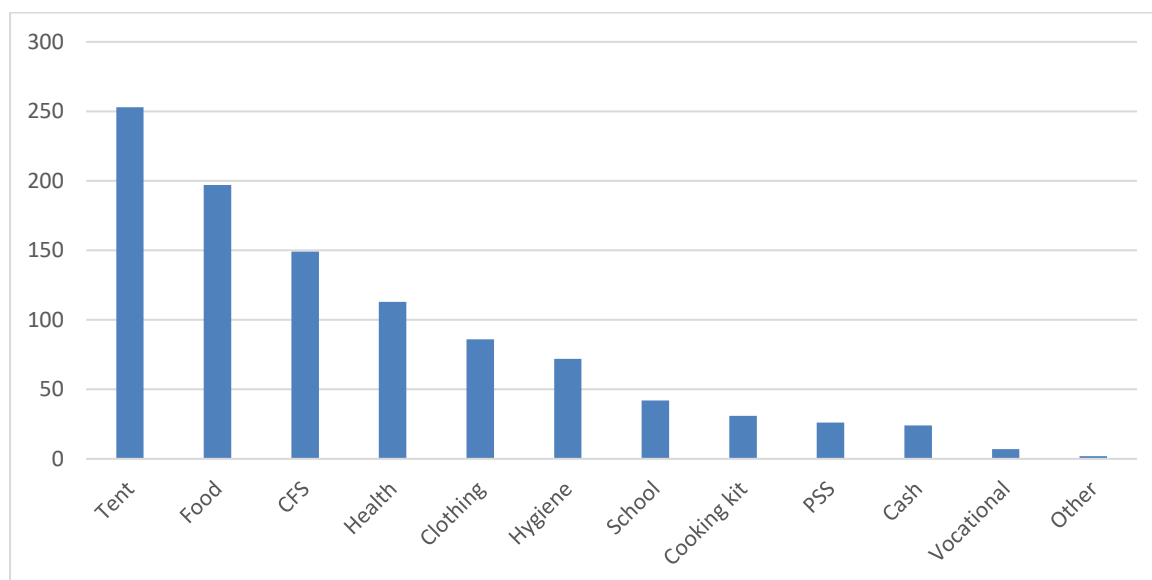


However, it is significant to note that 88 families had indicated before that their children had witnessed or experienced a war-related event in Iraq. Of those families, only 8 reported trauma or psychological distress as a vulnerability. Clearly, the families did not consider these types of events as resulting in a vulnerability.

**Assistance received**

The respondents were asked about the assistance they had received since arriving in the camp. Several answers were possible.

Type of assistance received:	# of families who received this:
- Tent or caravan	253 families
- Food items or voucher	197 families
- Child friendly Space	149 families
- Health care assistance	113 families
- Clothing	86 families
- Hygiene products and/or awareness	72 families
- School items or assistance	42 families
- Cooking kit	31 families
- Psychosocial support/counselling	26 families
- Cash assistance	24 families
- Vocational training or livelihood assistance	7 families
- Other types of assistance	2 families



The answers to the assistance received do not seem to reflect the reality correctly, especially regarding the immaterial services such as psychosocial support and CFS.<sup>3</sup> However, it is possible that the respondents did not recognize the type of assistance, or were hesitant to tell the interviewer about for instance psychosocial support received.

<sup>3</sup> TdH Italy is also providing CFS and PSS services in Harshm Camp. Therefore, we are aware of the fact that more families than indicated have been using the services offered by the CFS and the social workers. Possibly, the respondent is unaware of the services received by his/her children, or the respondent is embarrassed to tell the interviewer that psychosocial services were used by his/her family.



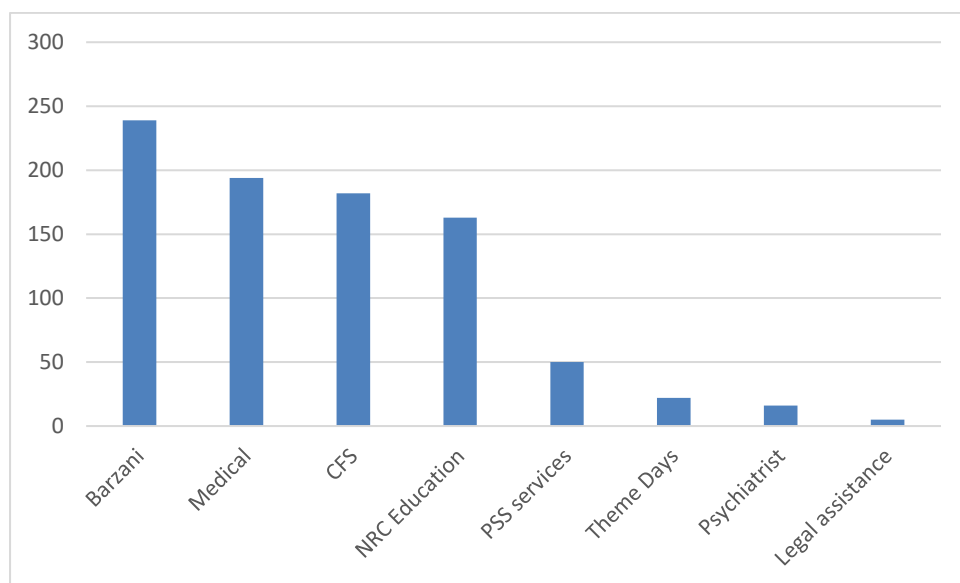
Furthermore, the number of cooking kits received is low. It is clear that cooking supplies are very much needed and not much provided in the camp. However, upon arrival in the camp all residents were assigned a tent or caravan, and received some NFI assistance.

**Awareness of service providers in the camp**

The families were asked if they received information about the services available in the camp, and about their awareness of a number of organizations/services in the camp. Regarding the first point most families indicated that they did receive information about the services provided in the camp (203 families).

The respondents were asked if they were aware about the following services/organizations:

Service/organization:	# of families who are aware:
- Barzani assistance	239 families
- Medical services	194 families
- Child Friendly Space	182 families
- NRC Education	163 families
- Psychosocial support services	50 families
- Theme day activities	22 families
- Psychiatric consultation	16 families
- Legal awareness/assistance	5 families



This indicates that most families in the camp are well aware of most of the material services and locations, but that the immaterial services offered are far less widely known. Possibly this is because the need for these services is less (like the psychiatric consultation) or because they are not as visible as centers or distributions are.

**Other notes / comments from the respondents**

At the end of the survey the respondents were given the opportunity to make any other comments they considered relevant or necessary to be said regarding child protection issues/topics, or otherwise.

Many respondents indicated they are in need of material assistance such as air conditioners (111) and fridges (103). Food, stoves and water tank were also regularly mentioned. Additionally, a need of education for the children was flagged by 24 families.

66 respondents indicated they had nothing to add or to comment at the end of the survey.

### **Conclusion and recommendation**

The assessment indicates several main concerns regarding child protection. Based on the outcomes of this survey and the relevant experience of the social workers the following conclusions and recommendations can be made:

#### *Need for psychosocial support*

The number of children who have witnessed or experienced a possibly traumatic incident before or during their flight is high. This is not surprising considering the violent nature of the situation in their region of origin, but the identification of psychological distress and need for psychosocial support should be increased. Based on the experience of the social workers so far, it is likely that more children than indicated by the survey are suffering from trauma or psychological distress. Possibly the parents don't recognize the signs in their children, or they are unable or unwilling to ask for assistance.

The social workers and CFS staff have noticed a lot of aggression and anger problems in children of different ages. Many of the children are violent with each other and play in an aggressive way. Sometimes their behavior and tactics seem to be copied from incidents they might have witnessed in war, or acts of aggression they might have seen around them.

This situation has to be combated by raising awareness among parents, caregivers and children about the signs of psychological distress, and the negative effects untreated psychological issues can have on a child's well-being and development. At the same time, awareness should be raised about the type and availability of psychosocial support and the benefits of group activities, education and recreational activities on a child's mental state.

#### *NFI assistance*

The survey shows that almost all families in Harsham Camp are in need of NFI assistance. Especially cooking supplies and clothes were flagged by the community. From the comments it also became clear that a large number of families is affected by the increasingly hot weather and in need of air conditioning and fridge. However, it is not likely that it will be possible to equip all caravans in Harsham with an AC system and/or a fridge. If this reflects a serious expectation from the camp community, it might be necessary to clarify the assistance offered early on.

#### *Education*

The school is not yet opened in the camp, but most likely children will be able to go to school starting the new school year in September. It will be necessary to provide awareness for parents and children about the need to follow education. After this prolonged period without formal education it might be challenging to make sure all the children of school going age return to school. Coordination between all child protection actors and the school will be necessary to achieve this. However, it is positive that most parents indicated they will send their children to the camp school. Furthermore, education was an often indicated need in the comments the families made.

Finally, the school in the camp will negate the need for children to go outside the camp for education. This will lessen the family's financial pressure and better ensure the children's safety.

### *Child labor*

The survey indicates that only a small number of the children in Harsham Camp are working. Unfortunately, based on the experiences and cases management by the CFS social workers involving child labor the number is likely to be higher.<sup>4</sup> Regardless of the number of cases, child labor is a very serious issue which will not only negatively affect the child's emotional and physical development; it can also place the child at risk of physical and psychological violence, sexual violence and injuries. For this topic too awareness in the family (for parents and children) is needed to decrease the number of children working or looking for work.

However, realistically, it is unlikely that families are able to take their child out of their employment when this is (one of the) main sources of income. Therefore, families should be aware that guidance and assistance will be offered aiming to improve the well-being of the family; without judgment or breaking confidentiality. Potentially, awareness raising among NGO staff could also be necessary to ensure this attitude.

Additionally, the protection partners should work together to provide different types of support to families in order to stop child labor. For instance: priority for livelihood opportunities, or NGO cooperation in gathering cash assistance to fund urgent needs for which the children are working to pay. In this regard, it is important to note the danger of openly prioritizing families with working children for assistance, as it set a precedent which encourages child labor in order to gain (more) assistance. Therefore, the combination with awareness raising is absolutely needed.

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<sup>4</sup> 10 cases of child labor have been identified and assisted since December 2014. It has proven to be a sensitive and misunderstood topic among families. Often they do not regard the income generating activities of their child "work" or they feel hesitant to mention the issue to the social worker out of fear of being judged or forced to make the child stop working.