Child Protection Issues and Responses
Syrian Refugee Community in Domiz Camp & Dohuk

Desk Review

July 2013
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1. BACKGROUND

Maps – Syria and Kurdistan Region of Iraq

http://i.infoplease.com/images/msyria.gif
Emergency profile

‘The unrest began in the southern city of Deraa in March 2011 when locals gathered to demand the release of 14 schoolchildren who were arrested after writing anti regime slogans.’¹ The conflict escalated and by ‘May 2012, Human Rights Watch found that the fighting in some parts of Syria had reached the level of an armed conflict, making international humanitarian law, or the laws of war, applicable in those areas’² Syrian Kurds have chosen to flee to the Kurdistan region of Iraq because of ‘the security and stability of the region’; ‘the shared ethnic, religious and linguistic affinities’; and the ‘better livelihood opportunities’.³ The Kurdistan Regional Government (KRG) has provided refugees with temporary residency cards, which have allowed them to move freely throughout the region, and to access public services such as health care and education.⁴ Although a range of services are available in Domiz, these are limited and the resources of providers are stretched beyond capacity; in urban areas, rents are increasing and employment opportunities are scarce.⁵ Furthermore although the Dohuk Governorate continues to issue residency permits, the Erbil and Sulaymaniah Governorates have recently halted the process until further notice, and the Saheela border crossing has closed on the 19th May, except for outgoing movement of refugees returning to Syria. Meanwhile, the Kurdistan region of Syria, which has stayed on the sidelines of the crisis until now, is at increasing risk of getting caught up in the conflict.⁶

‘The number of Syrians registered or awaiting registration surpassed 1.5 million in May 2013, while over 650,000 more unregistered refugees are estimated to reside in Lebanon, Jordan, Turkey, Iraq and Egypt; this means that at least 9% of the original population has fled Syria’.⁷ At the time of writing (June 2013) 156, 667 people are registered in the Kurdistan region of Iraq, 64.2% in the Dohuk Governorate, 23.4% in the Erbil Governorate, 8.6% in the Sulaymaniah Governorate, 3.4% in the Anbar Governorate, and 0.4% in other Governorates; 62.2% of refugees have fled from Hassakeh (Kurdish region of Syria), 10.9% from Damascus, 17% from Aleppo, 3.8% from Dayr Az Zor, 2.4% from Raqqa, 0.4% from Rif Dimashq, and 0.1% in Dara.⁸ Although Hassakeh had not experienced direct conflict before November 2012, according to refugees in the Domiz camp, located 20 kms southeast of Dohuk city, and established by local authorities in April 2012, the situation begun to significantly deteriorate towards the end of 2012; in particular Syrian Kurds experienced: shortages of gas and water, significant increases in price of food, school closures, disabled

³ Salman, M., op.sit, p.4
⁴ IRC, Iraq Country Program, op.sit, p.1
⁵ ibid
⁷ Regional Analysis Syria (May 2013), http://reliefweb.int/sites/reliefweb.int/files/resources/regional_analysis_for_syria_part%20II%20may.pdf
⁸ UNHCR, (28/05/2013) “Iraq Consolidated Statistics”
health systems, and lack of job opportunities; there were also reports of forced recruitment of children, and physical and psychological assault of women and girls, which were identified as strong motivators for seeking protection in the Kurdistan region of Iraq.

2. AFFECTED CHILDREN

Impact of the Crisis on Children

The impact of the conflict on children has been well reported. In the 2011-2013 crisis report, UNICEF refers to a lost generation of Syrian children, and underscores that ‘children have been exposed to grave human rights violations [in Syria] including killing and maiming, sexual violence, torture, arbitrary detention, recruitment and use by armed forces and groups, and exposure to explosive remnants of war’. By the end of April 2013, at least 93,000 people were reported to have perished as a result of the conflict and over 10,000 of these deaths are children. The Center for Documentation of Violations in Syria, a network of Syrian activists, has alone, documented 5874 deaths of children since the crisis began. Syria was added to the annexes of the Security Council’s Report on Children and Armed Conflict for ‘the killing and maiming of children and attacks on schools and hospitals by government forces’, and the subsequent Report of the Secretary-General to the Security Council (A/66/782-S/2012/261) issued on 26 April 2012 states that a technical mission sent to Syria to verify reports, confirmed that ‘children as young as 9 years of age have been victims of killing and maiming, arbitrary arrest, detention, torture and ill-treatment, including sexual violence, and have been used as human shields; that schools have been regularly raided and used as military bases and detention centres’; that soldiers have been shooting demonstrators without distinction in full knowledge that there were children and women in the crowd; that children have been arrested and tortured in detention; and that ‘boys and girls ranging between the ages of 8 and 13 years, were forcibly taken from their homes, [and] reportedly used by soldiers and militia members as human shields, placing them in front of the windows of buses carrying military personnel into the raid on the village’.

‘Basic infrastructure and public services are being systematically destroyed’, ‘families are struggling to survive’, one in every five schools has been destroyed, damaged or converted into shelters, ‘water availability is a third of what it was before the crisis’, and children and women are forced to live in unsanitary conditions placing them at risk of a range of health related issues. In the “Childhood Under Fire” report, 9

9 IRC, Iraq Country Program, (01/2013) “Child Protection Rapid Assessment in Domiz Camp and Dohuk”, p.1
10 Salman, M., op. sit, p.1
17 ibid
Save the Children identified that children are at risk before they are even born, due to the lack of healthcare facilities and birth attendants which means that many women give birth in unsanitary conditions, with no medical care before and after birth, and no access to vaccinations and other essential neo-natal care; substantial damage to the water network means that children have limited access to clean water and sanitation, both essential to healthy childhood development. In addition, less evident, but just as serious, are the lasting psychological impacts of the crisis. Sadly, one in three children who were interviewed as part of the research reported that they had been ‘hit, kicked or shot at’, and three in four ‘had experienced the death of a loved one due to the conflict’; parents reported that the result of this is that children are left with a pervading and persistent feeling of fear.

3. CHILD PROTECTION FRAMEWORK

Child Protection System in the Kurdistan Region of Iraq

**Legal framework**

‘The United Nations Convention on the Rights of the Child (CRC) entered into force in Iraq on 15 July 1994’ and the new Iraqi Constitution, approved by a referendum that took place in 2005 endorsed the CRC. The Constitution also ‘guarantees the protection of motherhood, and childhood’ and commits to ‘care for children and youth and provides them with the appropriate conditions to further their talents and abilities’; in addition ‘all forms of violence and abuse in the family, school and society are prohibited’ as is economic exploitation of children. In Northern Iraq, honour killings and female genital mutilation are reportedly prevalent, with a significant increase in honour killings reported in the Kurdish region between 2005 and 2006; and in 2006, a survey found that 60% of women and girls aged older than 10 had undergone female genital mutilation; Women’s organisations have been advocating for legislation to criminalise FGM, and a draft Law prohibiting FGM has

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18 Save the Children, (2013) “Childhood Under Fire: The Impact of Two Years of Conflict in Syria”
19 ibid
21 ibid
22 ibid
been submitted to the Kurdish Regional Parliament.”

Iraq ratified the ILO convention 138 on the 13th February 1985, specifying the minimum age at which a child can legally work at 15 years; and ILO convention 182, on the worst forms of child labour, on the 9th July 2001. Although child labour is banned in Iraq, the economic situation in the country has resulted in an estimated 11% of children aged 5 to 14 years of age engaged in various forms of labour.

**Children’s Rights in the Kurdistan Region of Iraq**

The government institutions in the Kurdistan Region of Iraq follow Iraqi Law in most cases, with some exceptions when the legislative system in Kurdistan decides that it is essential to pass new legislations. Concerning human rights in general, the Kurdistan region has worked in the recent years on amending some Iraqi laws in response to advocacy campaigns by activists and NGOs. Most of these amended, or new laws, relate to the rights of women and youth. In regards to children, Asos Najib, minister of labor and social affairs in the KRG, announced that in order to ‘ensure children’s rights and protection from violence, [his] ministry has crafted a draft law and referred it to the Shura Council. Once returned, the draft will be sent to the parliament through the cabinet to be read, discussed, ratified and passed.’ This new law focuses on children’s rights in general, with a particular focus on children with special needs, and school enrolment to ensure an inclusive environment. The draft law also refers to child labor. Najib stressed that her ministry was "seeking to set a minimum working age of 15 for minors, according to international standards.”

**Key ministries and directorates in the Kurdistan Region of Iraq**

<table>
<thead>
<tr>
<th>Ministries/Directorates</th>
<th>Focus</th>
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</table>
| **Directorate of Social Care and Development** | Operates orphanages, shelters for elderly, and women shelters  
Operates educational institutes for children with disabilities (sight, speech and hearing disabilities)  
Family Protection Network provides monthly financial assistance to families who are assessed as vulnerable by a team of social workers  
Operates reformatory for juveniles who are in conflict with the law (in close collaboration with the Ministry of Interior).  
Operates centers for children at risk of delinquency (Haval centre)  
A center for autism will be operational soon |

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23 ibid  
24 International Labour Organisation, “ILO Conventions and Recommendations on Child Labour”  
25 Save the Children Sweden, (August 2008), op.sit., p.45  
26 Zebari, Abdel Hamid 23-04-2013 Al Monitor, available online from  
http://www.ekurd.net/mismas/articles/misc2013/4/state7029.htm  
27 Ibid
**Directorate of Labour**

Delivers vocational trainings and serves as a link between job seekers and the private sector (no specific programme to address child labour).

**Ministry of Interior**

Protection from crime and terrorism
Juvenile Police stations identify children in conflict with the law or children at risk of delinquency

**Ministry of Justice**

Juvenile courts – minimum age 11 (If sentenced - Juvenile reformatory; if delinquent - Rehabilitation centers)

**Ministry of Education**

Provides education programmes /schools
A law prohibiting physical punishment was passed few years ago
Education is free, including universities, and it is compulsory up to the grade six.

**Ministry of health**

Health system
No protocol for detection, reporting and assistance of children who are victims of violence

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**Social protection system**

The Family Protection Network provides monthly financial assistance to registered families who are assessed as vulnerable by a team of social workers through family visits. The beneficiary must be an Iraqi citizen. UNHCR, through implementing partner Harikar NGO provide 1 off cash assistance to vulnerable refugee families in Dohuk (cash transfers)

**Child protection system**

**Dohuk Governorate**

- Coordination

  *The Child Protection Committee in Duhok* comprises of UNICEF, various government departments and NGOs. The meetings are held monthly and issues related to child protection are discussed. Juvenile police participate in the meetings to present the cases of detained children during the month. Since the establishment of Domiz camp, the situation of children in the camp is also discussed in the CPC meetings.

- Identification, referral and follow up of child protection cases

  No formal system of identification, referral and follow up of child protection cases

**Domiz camp**
Coordination

Protection Working Group. UNHCR Chair, and IRC co-chair. Meets monthly to discuss integration of protection interventions and specialized protection responses

Child Protection Sub Working Group. UNICEF Chair. Meets monthly to coordinate child protection activities, identify and address critical gaps, develop an inter-agency strategic action plan, and share information on individual agency progress

SGBV Sub Working Group. UNHCR Chair and UNFPA co-chair. Meets monthly to discuss and coordinate SGBV specific interventions

PSS Sub Working Group. UNHCR Chair. Meets monthly to discuss and coordinate PSS specific interventions

Identification, referral and follow up of child protection cases

Child protection concern identified (abuse, neglect, violence or exploitation) ➔ Refer to service directly if unsure about where to refer or the needs are complex, refer to the Child Protection Unit (CPU)

CPU ➔ Undertake intake interview ➔ Develop case plan with the child, family, and service providers ➔ Refer to services and/or provide direct services (psychosocial support, awareness sessions, group work) ➔ Follow up ➔ Update case plan or close

Social and cultural norms related to child wellbeing, rights, development and protection

In preparation for the upcoming Child Protection Interagency Strategic Planning Workshop (2 day workshop to develop a child protection inter-agency strategic plan), UNICEF undertook a series of focus groups between the 2nd and 6th June to find out more information about social and cultural norms related to child wellbeing, rights, development and protection. Discussions took place with 42 participants in 4 different age groups: young boys and girls, adolescent boys and girls, men, and women. Open questions focussed on the key child protection concerns described in chapter 4 below, and community responses have been integrated accordingly. The focus group participants highlighted that the Syrian community is a very close and connected community and that people look out for one another and help one another out; however the current crisis has impacted on community connectedness and capacity, and communities that were once connected, are now dispersed and consequently less able to help one another, in addition to this, families are struggling financially and less able to assist those more vulnerable, as is customary in Syria.

4. CHILD PROTECTION CONCERNS AND RESPONSE
Separation of children from their caregivers

Overview

A recent joint rapid assessment of Northern Syria revealed that high rates of family separation were reported in the high conflict intensity (HCI) areas of Aleppo, Al-Raqqa, and Lattakia, as well as the low conflict intensity (LCI) areas of Al-Hassakeh, whilst moderate numbers were recoded in the LCI areas of Aleppo, Al-Raqqa, Lattakia, and Deir-Ez-Zor. The Child Protection Rapid Assessment, which was conducted in Domiz camp and Dohuk in January 2013, confirmed that there were separated children living in the camp, and that these children were ‘staying with a member of the extended family; most often the arrangement had been made in Syria and the family member frequently was an older brother or sister’. According to UNHCR data, at the time of writing (June 2013) there are 59 separated children in Domiz camp: 40 boys and 19 girls. The Child Protection Rapid Assessment also identified that many ‘single adolescents have come to Kurdistan to find work and send money back to their families because they are no longer able to work or go to school in Syria’; all of the single boys interviewed had left voluntarily, they knew where their parents were and remained in contact with them. Data provided by UNHCR reveals that there are 116 unaccompanied minors in the camp, and of these only one is a female. Both separated and unaccompanied minors are boys in the older age cohort suggesting a common pull factor.

Response

Prevention measures can be taken to prevent accidental separation from occurring. However, in the case of Syrian refugees, there has been a pattern of organized and deliberate separation, which is much more difficult to prevent. Family separation is initiated in Syria as a protection mechanism, to prevent recruitment into armed forces and armed groups, for economic reasons, and to protect girls from sexual assault. In most cases, there is ongoing contact between separated children and their families. Consequently family tracing mechanisms, typically present in emergency situations, were not established in Domiz camp. Nonetheless, assessment of the needs of separated children, support and follow is required. In this regard, ‘a two day training was [recently] conducted on Best Interest Determination (BID) and resulted with an action plan for the implementation of the BID Standard Operating Procedures.’ UNHCR will chair the panel, and IRC will conduct BID interviews, prepare the BID reports, and present the report findings to the panel for determination. The panel recommendations will be followed up by IRC case managers who, in together with the Child Protection Units will ensure that the full suite of services is available to unaccompanied and separated children.

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30 ibid
31 ibid
32 Assessment Working Groups For Northern Syria, (May 2013), op.sit., p.38
33 IRC, (January 2013), op.sit., p.7
34 UNHCR Iraq, “Syria Situation: Bi-Weekly Update No.43” 15-28 May
35 ibid
Capacities and Gaps

The Child Protection Rapid Assessment conducted in Domiz camp and Dohuk identified that single boys arriving alone need particular attention; they are at high risk of exploitation, and they have little to no access to services; the report recommended that protective mechanisms should be identified and strengthened in order to reduce these risks in the camp as well as in the host community. There is a limited information about young unaccompanied refugees who live in the host community and their particular needs, as well as the needs of unaccompanied young boys in the camp, however an assessment of the refugee population living in Dohuk, conducted by UNHCR and REACH in February 2013 highlighted that orphans and unaccompanied and separated children are the most vulnerable group living in Dohuk. Nonetheless, to date no assessment has been carried out to ascertain prevalence, protection issues (particularly engagement in worst forms of child labour and trafficking), access to services, and particular needs of this population. Engagement of young people in the workforce was explored as part of UNICEF led focus group discussions, and the younger participants said that if their families needed help, they would work, and felt this was their duty.

Physical danger and violence against children

Overview

Children are exposed to a range of physical dangers on their journey from Syria to the Kurdistan Region of Iraq, and are exposed to new dangers at destination. In addition to the obvious risk associated with direct exposure to armed conflict and bombings, the physical safety of communities and children is threatened by the presence of ‘explosive remnants of war (ERW), including rockets, cluster munitions and IEDs [which] contaminate large parts of Syria’. Before the border closed, around 600 men, women and children entered Iraq on foot every day at a crossing point near Shilkye village, via a route which runs alongside a known minefield. Additionally, the Kurdistan Region of Iraq is amongst one of the most contaminated regions in the world, with landmines accounting for three quarters of casualties. The Domiz camp and surrounding area was ‘littered with landmines and other munitions’, before being cleared by MAG.

In addition to the risk associated with land mines and UXOs, the Child Protection Rapid Assessment conducted in Domiz and Dohuk identified a broad range of other physical dangers that children are exposed to in the camp. The assessment found that the camp is ‘extremely unsafe for children’, and identified the following risks: children sustaining burns from gas and electricity, injuries associated with tents collapsing with heavy rain, tents burning, risk of disease such as jaundice and acute

36 IRC, (January 2013), op.sit., p.7
37 Assessment Working Group For Northern Syria, (May 2013) “Joint Rapid Assessment of Northern Syria II: Final Report”, p.70
40 MAG, 2013, op.sit
diarrhea, risk of children being hit by a car or truck, and risk of accidents arising from exposure to electric cables and holes and ditches filled with water.\textsuperscript{41} The issue of physical safety in the camp was also raised in the focus group discussions, as well as the risk of illness developing as a result of unsanitary conditions in the camp, the safety of children selling goods in and around the camp, particularly in the singles area, and insufficient water during the summer season.

In addition to physical dangers, children are also exposed to violence in the home and other settings. ‘The risk of home and family violence arises from the interaction between the quality of family relationships, and stress or pressure upon the family from external factors or from characteristics of family members.’\textsuperscript{42} Evidently the stress that the emergency exerts on Syrian families is enormous, and likely to strain parental capacity to be emotionally present at a time when their children need them the most. The fact that corporal punishment as a disciplinary measure is lawful in Syria both in home settings, in alternative care, and at school,\textsuperscript{43} suggests that violence against children, at least at moderate levels, is considered acceptable, and is likely to be relied on as a predominant strategy to control children’s behaviour. Indeed, children engaged in the UNICEF led focus group discussions conducted in Domiz camp said that discipline includes shouting, and sometimes hitting with a stick, both of which were considered to be appropriate and expected. Violence impacts children’s ability to trust; ‘learning to trust from infancy onwards through attachments in the family is an essential task of childhood, and closely related to the capacity for love, empathy and the development of future relationships.’\textsuperscript{44} Evidence also suggests that ‘exposure to violence or trauma alters the developing brain by interfering with normal neuro-developmental processes; where family violence is acute, children may show age-related changes in behaviour and symptoms consistent with Post-Traumatic Stress Disorder (PTSD) and depression.\textsuperscript{45} The cumulative impact of children’s exposure to violence in the context of the Syrian armed conflict, together with exposure to violence in the home and other settings can be debilitating for children and severely impact their resilience and recovery capacity.

The impact of domestic violence on children (violence against women perpetrated by an intimate partner) is often overlooked, and poorly understood. For example, although it was identified in the Child Protection Rapid Assessment that domestic violence is occurring in Domiz camp, the community did not recognize this as posing a significant risk to children.\textsuperscript{46} However research reveals that ‘children who grow up in a violent home are more likely to be victims of child abuse’; may have difficulties learning and limited social skills, exhibit violent, risky or delinquent behaviour, or suffer from depression or severe anxiety; and are at increased risk of being affected by violence as adults – either as victims or perpetrators.\textsuperscript{47} Studies have also linked the presence of domestic violence with higher risk of child maltreatment fatalities.\textsuperscript{48} A recent Child Protection and Gender-Based Violence assessment conducted in the

\begin{thebibliography}{9}
\textsuperscript{41} IRC, (January 2013), op.sit. p.10  
\textsuperscript{42} Pinheiro, P., S., 2006, “World Report on Violence Against Children”, Published by the UN, p.66  
\textsuperscript{43} Save the Children Sweden, (August 2008), op.sit., p.113  
\textsuperscript{44} Pinheiro, P., S., 2006, op.sit. p. 63  
\textsuperscript{45} ibid  
\textsuperscript{46} IRC, (2013), op.sit., p.10  
\textsuperscript{47} UNICEF, 2006, "Behind Closed Doors: The Impact of Domestic Violence on Children"  
\textsuperscript{48} Pinheiro, P., S., 2006, op.sit. p.70
\end{thebibliography}
Za’atari camp in Jordan revealed that although domestic violence was reported as being a significant issue, it remained vastly under-reported.49 A similar pattern is evident in the Domiz camp. Research however, shows that ‘at least one in every three women globally has been beaten, coerced into sex, or abused in some other way – most often by someone she knows, including by her husband or another male family member, and one woman in four has been abused during her pregnancy.’50

Response

In terms of physical dangers, MAG has cleared 650,000m2 of mined land in and around Domiz camp, and 220,000m2 near the Shilikye crossing point and registration centre, and is undertaking awareness campaigns in the Domiz camp as well as the crossing point.51 In addition, UNICEF/DoLSA CFS staff trained by MAG, are delivering MRE awareness sessions. No specific response has followed the recommendations included in the Child Protection Rapid Assessment conducted in January 2013 regarding physical dangers. In terms of the issue of violence against children, and children being exposed to domestic violence, the response has not been strong so far. Admittedly, responding to domestic violence is not a simple task. Its perpetration is assisted by the fact that it happens behind closed doors, and Syrian refugee women are particularly vulnerable due to their current situation, displacement and associated economic struggles, and lack of access to affordable housing and income generation support. Additionally traditional family attitudes and structures do not readily support women leaving a marriage. These factors, together with the limited availability of services to support women to leave the relationship and protect their children, traps victims, both women and children, in an unbreakable cycle of abuse and isolation.

A SGBV sub-working group has recently been established and meets monthly to discuss and coordinate SGBV specific interventions. Domestic violence is also discussed at this form. However given the nature of domestic violence in the context of displacement, the response has been largely limited to referral of victims for psychosocial support, and awareness raising activities. The Women’s Listening Center, staffed by two case workers from local NGO, Harikar, with IRC’s technical oversight, provides case management a case management service to women and girls who have experienced gender based violence, including sexual gender based violence. The Centre offers psychosocial support, referral, recreational activities, information sessions and provides a base for refugee women's community leadership in Domiz Camp.

Capacities and gaps

Physical dangers have been identified in the Child Protection Rapid Assessment (CPRA) in January, however it has not been reviewed, children have not been engaged, for example in drawing danger maps for each of the camp sectors, and developing child-led community messaging, and the issues raised have not been addressed. In terms of violence against children, in particular the issue of corporal

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50 UNICEF, 2006, p.7
51
punishment, there have been no interventions targeting behavior change in the community, and in schools that employ Syrian teachers, and there have been no interventions targeted at raising community awareness of the cumulative impact on children of experiencing various forms of violence, and the particular impacts of corporal punishment. Additionally, there are no support groups in place at this time for parents to learn and explore new parenting techniques.

In terms of domestic violence, it has already been identified that women have extremely limited to no capacity when it comes to protecting themselves and their children in the context of displacement. Although the listening center has organized awareness campaigns about women’s rights, there are currently no interventions targeting the particular dynamics of domestic violence, for example engaging respected men and elders in the community to develop and spread messages in the community, identify and monitor cases of domestic violence, and refer the perpetrators to one on one intensive counseling and/or domestic violence specific programs (concentrating on child focused awareness raising and behavior change). Cases of violence against children, and children trapped in domestic violence are not readily referred to the CPU, possibly due to a lack of knowledge about the impact of domestic violence on children. UNICEF and Save the Children are planning to build the capacity of frontline staff to better understand child protection (neglect, violence, abuse and exploitation) so cases of concern can be effectively referred to the CPU for follow up; at the same time, the capacity of the CPU to work with families on such issues, and undertake awareness raising activities in communities and other activities targeting behaviour change will be strengthened through training.

Psychosocial distress and mental disorders

Overview

Emergencies resulting from armed conflict can have a range of psychological and social impacts on children and their families, and individuals experience crises in different ways depending on age, gender, development level, vulnerabilities, current as well as previous experiences, family and community supports, and protective and resilience factors. ‘Children’s wellbeing and development depends very much on the security of family relationships and a predictable environment.’ Firstly, when children have been exposed to ‘traumatic or psychologically wounding events’ a range of stress responses will be present, which is a normal reaction to abnormal events. For example, in the Domiz camp, every person who was interviewed as part of the CPRA identified profound changes in children’s behaviours, including increased signs of sadness, crying, becoming withdrawn, increased apathy, challenging and aggressive behaviours, and for teenage boys, a tendency towards substance abuse. The inability to return to education was identified as one of the highest sources of stress for children. As noted earlier in this review, when parents are themselves struggling to cope, they can be less emotionally available and able to respond to their children’s needs for comfort and protection, and this was also noted

52 Save the Children, 1997, “Promoting Psychosocial Wellbeing Among Children Affected by Armed Conflict and Displacement”, p.4
53 ibid
54 IRC, (January 2013), op.sit, p. 15
55 ibid
in Domiz camp.\textsuperscript{56} Children who engaged in the UNICEF led focus group discussions said that their parents were preoccupied with many issues, and were less available to them than they were in Syria. In addition to direct impacts, children and families also struggle with coming to terms with the impact on their lives of the break down of civil society, and disruption to the normal functioning of their communities, in addition to the insecurity that accompanies displacement, and in the absence of targeted supports, families may rely on maladaptive coping strategies. In Domiz, these include engaging children in labour, and forcing girls to marry early.\textsuperscript{57}

Response

Given the multiple factors that impact children and carers mental health and psychosocial wellbeing, it is important that the response include integrated support systems. For example, as identified in the IASC Guidelines on Mental Health and Psychosocial Support, MHPSS services should be available and accessible, the community’s inherent capacity should be recognized and active participation should be built into the MHPSS response, wherever possible, supports should build on existing resources and capacities, responders should adhere firmly to the do no harm principle, and supports should be multi-layered and integrated.\textsuperscript{58}

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<th>\textit{Domiz}</th>
<th>\textit{Dohuk}</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic services</td>
<td>\textit{Shelter and non food items (NFI) - UNHCR, Qandil, and DMC Food}</td>
<td>\textit{Shelter/housing and non food items} Government, with support from agencies, has constructed</td>
</tr>
</tbody>
</table>

\textsuperscript{56} ibid
\textsuperscript{57} IRC, (January, 2013), op.sit, p.19
| **WFP** | **Water and sanitation**  
UNICEF, NRC  
**Health**  
MSF (health, medical consultation, primary health care, referral to hospitals, medical treatment); DoH (trained health promotion teams – 60 volunteers)  
**Education**  
UNICEF, DoE; 3 schools in Domiz, one is open in summer for catching up lessons. 1 high school in planning stages  
**Livelihoods**  
IOM (vocational training) | houses for refugees in the past  
**Social protection**  
(1 off cash assistance) UNHCR and Harikar  
Family Protection Network provides monthly financial assistance to vulnerable families (Iraqi only)  
**Food**  
As for wider Iraq, in Duhok the food ration system is for Iraqi only  
**Health:** Government run Primary Health Centers and hospitals free of charge.  
**Education.** A recent UNICEF assessment showed that 90% of urban refugee children are not enrolled in schools (barriers: language, transportation cost, fees)  
**Livelihood.** The Ministry of Labour and Social Affairs organize some vocational trainings (limited numbers) |

| **Community and family supports**  
- Community awareness programs (CPU)  
- GBV awareness and information programs (Women’s Listening center)  
- Community based committees (IRC)  
- Camp management, and leadership committees (UNHCR and IRC)  
- Child Friendly Spaces/Youth Friendly Spaces (UNICEF/DoLSA, ACTED) | Each political party in Duhok has their own women, students and youth union. Although most of these unions carry out social activities for their members, these include political aspects |

| **Focused, non-specialised supports**  
- Individual PS First Aid interventions (women’s listening center, CFSs)  
- Community services assessments and referrals (UNHCR)  
- Child and family |  
- Non-formal education and recreation (Zewa Center)  
- Protection and rehabilitation services for young people in contact with the law |
Interventions by trained and supervised workers (CPUs – referral monitoring and follow up)
Group interventions by trained and supervised workers (CPU – group work and awareness sessions; CFS/YFS)

**Specialised services**
- Psychological counseling (UPP, MSF)
- Psychiatric support (UPP, MSF)

- Psychiatric support and psychological counseling (Mental Health Center);
- Psychiatric unit (Azadi hospital outpatient clinic)
- Counselling services (private clinics)

**Protection services, psychosocial support and recreational activities (KSC)**

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**Capacities and gaps**

The IASC guidelines refer specifically to the importance of community participation and building on existing capacities, yet it is a commonly overlooked aspect of psychosocial recovery, including in the context of Syrian refugees in the Kurdistan Region of Iraq. ‘When conflict erupts, there are far-reaching consequences at the community level as traditional structures erode, authority figures weaken, cultural norms and coping mechanisms disintegrate, and traditional support relationships disappear.’59 ‘Children interact within the [interconnected] social systems of family (including clan and kinship group) and wider society (including community institutions and religious and ethnic networks).60 The response to mental health and psychosocial impacts should be informed by a psychosocial assessment which identifies community capacities and structures, as well as needs and gaps, so that existing structures can be built on to strengthen individual, family, and community capacities; gaps can be specifically identified and responses across the intervention pyramid, can be established to allow individuals, families and communities to recover and return to normalcy. A specific MHPSS assessment has not been undertaken, and therefore knowledge about individual, family and community coping strategies, traditional and community mechanisms used in times of stress and crisis is limited, without which it is difficult to set up responsive community-based mechanisms. In addition, the near absence of livelihoods programs such as employment generation activities, vocational training, formal and informal education, and traineeships, means that families continue to experience high levels of stress resulting in children being at heightened risk of being involved in child labour or early marriage.

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59 Save the Children (2004), “Psychosocial Care and Protection of Children in Emergencies”, Save the Children Federation, p.10
60 ibid
Children associated with armed forces and groups

Overview

In his annual report to the Security Council on children and armed conflict, covering January to April 2011, the Secretary General confirmed evidence that ‘Syrian Armed Forces and associated Shabbiha militia have used children as young as 8 years’. 61 The United Nations has [also] received credible allegations of the recruitment and use of children by armed opposition, including Free Syrian Army (FSA) and other armed groups’, and reports of ‘young children associated with FSA carrying guns and wearing camouflage uniforms’. 62 A recently released joint rapid assessment conducted in Northern Syria, also confirmed this trend, and highlighted that for many children and their families, this is seen as a source of pride. 63 The report further outlines that in some parts of Northern Syria up to 25% of children of 15+ years are being recruited. 64 In his recently released annual report to the Security Council on children and armed conflict, covering January to December 2012, the United Nations Secretary General stated that the number of reports about the ‘use of children by armed opposition groups’ is increasing; and that child association with the Free Syrian Army is often linked to an older relative facilitating recruitment or in instances in which the child has lost all members of his or her family. It is also linked to the fact that there is no central recruitment authority amongst the Free Syrian Army and that many forces are clan- based or village-based. 65

Response

Following presentation of the Secretary General’s Report on children and armed conflict to the Security Council, The Special Representative of the Secretary General for Children and Armed Conflict (SRSG-CAAC) visited Syria from 14 to 17 December 2012, following which the UN Country Team in Syria set up a Country Task Force to start monitoring grave violations of child rights. This mechanism goes beyond monitoring and reporting recruitment or use of children by armed forces and armed groups, to include killing and maiming of children; sexual violence against children; attacks against schools or hospitals; abduction of children and denial of humanitarian access. A regional reporting system was established whereby UNICEF Jordan, Iraq, Lebanon, and Turkey identify and verify cases and submit regular reports to the MRM task Force in Syria via the UNICEF MENA Regional Office. In the Kurdistan Region of Iraq, the MRM system for Syrian Refugees has been reviewed and an updated system in the process of being established as follows: Frontline staff refer any potential MRM cases to UNICEF MRM focal point; focal point reviews initial information, seek additional information if needed and refers cases that fit into the MRM framework to a trained MRM interviewer; the person is interviewed; UNICEF focal point is responsible for information management at the local level and compiles and sends periodic reports the MRM focal point, MENA regional office.

62 ibid
63 Assessment Working Group For Northern Syria, (May 2013), op.sit. p. 70
64 ibid
Capacities and gaps

Syrian refugees in Domiz have predominantly fled from Hassakeh, Aleppo, Damascus, and Dayr Az Zor and surrounding areas, all of which have experienced fighting of various levels of intensity. Most have fled to the Kurdistan Region of Iraq in order to survive and escape the effects of armed conflict, and one of the reasons frequently cited is young men avoiding becoming associated with armed groups and armed forces. There is currently no information to suggest that recruitment of children is taking place in the camps, however a specific mechanism to identify whether this pattern exists has not been specifically established. The Machel 10 year strategic review identifies that children are at particular risk of being recruited when family and community systems are weakened, when children are working, have limited opportunities, and/or are separated from their families. At this stage the risk factors, root causes of recruitment, and community attitudes have not been clearly identified, and vocational and other opportunities for young people have not been developed

Sexual violence and exploitation

Overview

The prevalence of sexual violence against Syrian boys and girls remains largely unknown, due to a high level of stigma which makes people reluctant to report it, and many survivors interviewed by Human Rights Watch said that they did not want their families or others in the community to know about the assault because of fear or shame. Similarly, the recently released Joint Rapid Assessment of Northern Syria found that sexual and gender-based violence was not explicitly mentioned by the people interviewed, most likely due to cultural sensitivities; whilst secondary data indicates that SGBV is significantly underreported and a major protection concern. It is known that ‘rape has been used as a form of torture to extract information during interrogations’; ‘attacks are often carried out in public, compounding the humiliation and stigma endured by those who survive’. The difficulty in accessing information about the prevalence and patterns of sexual violence in Syria due to cultural sensitivities, stigma and shame was also identified in assessments undertaken in Jordan and Lebanon. In Lebanon, however, it was identified that ‘rape and sexual violence were the most extensive form of violence faced by women and girls while in Syria’. Women reported that acts of sexual violence were frequently perpetrated within homes, and coupled with other forms of physical assault, torture, kidnapping,

69 Assessment Working Group For Northern Syria, (May 2013), op.sit. p.68
70 ibid
and sometimes murder, and often in the presence of male family members. Fear of rape is frequently cited in assessments across the region for a reason to flee Syria.

In terms of sexual violence in the camp, the CPRA highlighted that ‘all latrines in the camp, excluding phase 4 and the singles area of the camp were mixed latrines, many of which had broken doors and nonfunctioning locks’, this issue was identified as placing children at risk of exposure to sexual violence. The adolescents who were engaged in the focus group discussions expressed that they were distrustful and fearful of the singles area and that they heard that some of their peers had experienced harassment and sexual violence in that part of the camp. The adolescents said that the singles area comprises of a high number of young men (20-22 years) formally associated with the Syrian government military forces, and expressed that they thought that police could increase observation in that part of the camp. Both adolescent and adult groups felt there was a need to increase awareness amongst girls, in particular, for them to understand risks in the camp. There was also a view that women had a responsibility to avoid men and ‘behave appropriately’ suggesting that there could be an inaccurate community belief that some of the responsibility to avert sexual violence lies with the women and girls who are subjected to it.

Response

The Women’s Listening Center, operated by Harikar with technical support from IRC, provides case management support to women and girls who have experienced sexual gender based violence through the provision of psychosocial support, referral, recreational activities, and information, and provides a base for refugee women’s community leadership in Domiz Camp. MSF undertakes medical check ups, follow up and referrals, as well as counseling. Although services are available at the camp, reports of sexual violence are very rarely reported, and agencies attending the SGBV sub-working group have identified social stigma and cultural sensitivities as being the reason for this. Efforts are being made by the IRC to build the capacity of both community leaders and service providers to be able to identify and respond to SGBV through ongoing training and advocacy.

Capacities and gaps

Evidently, ‘a high degree of cultural sensitivity needs to exercised when assisting victims of sexual violence’. Although some information is known about community beliefs and cultural values around sexual violence and appropriateness of seeking assistance, there have been no targeted assessments or focus groups conducted to explore this in any depth. For example other than the listening center, which offers a soft entry point for victims, and the camp’s women’s committee, members of which where trained and focus specifically on GBV, community attitudes, awareness raising and monitoring safety and security around the camp have not yet been established, As part of the CPRA women and young girls were engaged in identifying the source of threats in the camp, however their feedback has not been followed up with a targeted response to reduce the threat. In other contexts, multi-disciplinary teams have been

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72 IRC, (August 2012), op.sit
73 ibid
74 ICRC, 2004, "Addressing the Needs of Women Affected by Armed Conflict", IRCR Women and War Team, p.29
successfully set up. The “multidisciplinary approach is designed to reduce secondary victimization of children by: facilitating collaboration between relevant agencies (e.g., child protective services, law enforcement, prosecution, mental health, and medicine), providing child sensitive interview settings, and limiting the number of interviews child victims must undergo”.75 “An additional core component of the … model is the coordination of specialized therapeutic services to children and their families, including victim support and advocacy”76 Such a model is not present in the Domiz Camp.

**Child Labour**

**Overview**

‘Livelihoods have been severely interrupted by the crisis, with large-scale displacement, decreased agricultural harvests, loss of economic assets and a decrease in the number of people receiving Government salaries’.77 ‘Disruption of agricultural activities, breakdown of the Government’s food subsidy programme, and devaluation … are all factors causing significant price increases’.78 Poverty is one of the leading root causes of child labour; when poor households spend the bulk of their income on food, the income provided by working children is often critical to their survival.79 ‘Child labour was reported both in high conflict intensity areas, and low conflict intensity areas of Northern Syria as a major protection concern; and hazardous child labour was reported to be a high protection concern in low conflict areas in Deir-ez-Zor.’80 In the Kurdistan Region of Iraq most Syrians entering the country are relying on dwindling savings or financial assistance from relatives and most have not found secure employment; therefore, because it is easier for minors than adults to find work in the low paid informal sector,81 child labour has developed into a worrying trend across the region.82

The Joint Rapid Needs Assessment of Syrians in the Kurdish Region conducted in July 2012 found that child labour was occurring in Dohuk, Domiz camp and Erbil; In Domiz, some children are selling cigarettes, mobile phone credit, and vegetables, while in Dohuk and Erbil some of the older children/adolescents work as daily labourers (mainly in construction), often under difficult conditions with long working hours and low salaries. No incidents of child labour were reported in Sulaymaniyah.83 The CPRA conducted in Domiz camp and Dohuk found that the main driver of child labour in the region is the lack of family income. Most families reported that most of the money earned is sent back to families in Syria.84 At the time of the assessment, 83% of key informants had reported that they noticed an increase in the number of

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76 ibid
77 ACAPS, (30th May 2013) op.sit., p.13
78 Joint Rapid Assessment of Northern Syria (2013), op.sit, p.70
80 Joint Rapid Assessment of Northern Syria (2013), op.sit, p.70
81 Regional Analysis Syria: Part II, op.sit., p.23
82 ibid
83 IRC, (2013), op.sit., p.23
84 ibid
children working; and according to 60% of key informants, most families had a child working; 26% mentioned that the children working come from vulnerable families, with children as young as 6 years engaged in some form of child labour, however most commonly, children 12 years and above. Sexual transaction for money (both girls and boys) was also mentioned but is a very sensitive subject and very limited information was shared about this.

Response

Evidently, the issue of child labour requires a coherent and coordinated multi-stakeholder approach, and this is not established in the Kurdistan Region of Iraq at this time. The ILO explains that ‘in addition to commitments in their national constitutions, governments commit their countries to regulating children’s work and eliminating worst forms of child labour when they sign ILO conventions 182 and 138. Labour ministries usually take the lead in coordinating child labour initiatives but since the policies and responsibilities of other ministries (such as Education, Health, Agriculture and Social Welfare) have considerable impact on the lives of children, families and communities, they also play an essential role in creating an environment less conducive to child labour. Thus eliminating child labour is a cross cutting issue and coordination within and between ministries and with various development partners plays a crucial role in maximising the impact, efficiency and effectiveness of interventions.’

Emerging good practice also suggests the importance of assimilating the following aspects into a coherent strategy: establishing integrated policies and coordination of key ministries and departments, ensuring that the rights of all children to full time free education is fulfilled (particularly the poorest and most vulnerable children), implementing laws on compulsory education and prohibition of child labour, engaging a range of stakeholders in establishing the norm that no child should work (education, children, parents, labour inspection, welfare, security, unions, and NGOs), involving the education department in developing programs to target children who are not enrolled at school or at risk of dropping out, and establish catch-up classes and bridging programs, implementing financial incentives and support for parents of children not attending schools, funding programs to combat all forms of child labour including the worst forms of child labour.

Capacities and gaps

There is insufficient data and knowledge about the phenomenon of Syrian refugee children involved in labour in the KRG (drivers, root causes, ages of children involved, parents knowledge attitudes and beliefs, work place, conditions, presence of WFCL, exploitation and trafficking, impacts, geographical distribution etc). Without this knowledge it is impossible to establish coherent comprehensive and adequately targeted responses to child protection concerns, particularly concerning children working in urban settings. To effectively impact the issue if child labour, a coordinated multi-stakeholder and multi-level strategy will need to be developed.

85 ibid
86 ibid
87 International Cocoa Initiative (2011) “Emerging Good Practice in Combatting the Worse Forms of Child Labour in West African Cocoa Growing Communities” p. 80
88 ibid
including the considerations included in the above paragraph, in addition to building on existing capacities. At this stage there is no strategy in place targeting the children who are selling goods at the entrance to the camp and in Domiz, linking them with education and other activities, as well as linking the parents to employment support programs; even if such a program existed, there is a gap in terms of access to education and real livelihood opportunities, and ongoing access to social protection.

**Justice for children**

**Overview**

Children can come into contact with the justice system in a variety of contexts, therefore the justice system must be competent to deal with all children within that context, ‘whether those children are in contact with the law, victims, witnesses, or in contact with the law as beneficiaries’. The justice system is generally understood to include the courts, police and correctional facilities, as well as informal systems such as those working under traditional and customary law.’ In the Kurdistan Region of Iraq, ‘it was reported that children from Domiz Camp had come into contact with the law (Police) as a result of working and begging in Dohuk. Currently, children working in Dohuk are intercepted by Police and driven back to the camp together with Police and a social worker from Kurdistan Save the Children (KSC).

**Response capacities and gaps**

As highlighted in the previous section, there is significant gap in terms of the response to child labour, and a need for a coherent and coordinated approach to the issue, as part of which the Juvenile Police could be involved so that child-friendly approaches can be developed, and the inter-disciplinary approach can include follow up with the child and family from the CPU to address the drivers of child labour with the family of concern, and assist in reintegrating the child into school and other activities. It is also unknown as to whether Juvenile Police Officers have been trained in child protection core concepts, and understanding and talking to children from vulnerable backgrounds.

**Excluded children**

**Overview**

The Rapid Assessment recently conducted in Northern Syria indicates that 25% of households in high conflict areas and 14% in low conflict areas reported that a member of the family had a disability. However according to UNHCR data, in June 2013 only 1,025 people registered in Domiz had reported a disability, of which 387 were children; this represents about 2.5%, of the number of people who reported a disability in Northern Syria. The UNICEF CPU reports that most of the families seen at the CPU have children with disabilities who need essential services that are not available, and parents are reporting needing support (accessing essential services,

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91 IRC, (2013) Child Protection Rapid Assessment, op.sit., p.25
92 Joint Rapid Assessment of Northern Syria (May 2013), op.sit, p.72
medication, and assistance to manage the disability in an emergency setting). The UNICEF/DoLSA CFS reports needing expert advice and support in managing children with disabilities in the context of group activities and need to be capacitated to enable better inclusion of children with special needs in CFS programs. The UNHCR and REACH assessment conducted in Dohuk identified people with disabilities as the second most vulnerable group behind orphans and unaccompanied and separated children.93

Response capacities and gaps

UNICEF, UNHCR and other partners are concerned about the gap in services and support for people living with disabilities. UNICEF has recently organized a meeting with Handicap International to discuss possible options. It was agreed that there is a need for a focused assessment to:

- Identify existing service availability and accessibility for Syrian refugee children in Domiz camp and in host population
- Determine the number of children living with disabilities in the camp and the predominant type of disabilities to ensure specific targeting and service improvement
- Identify gaps in current service provision including accessibility to community activities, social services, support groups, WASH services and medication to help define how to most efficiently and effectively target those gaps

• If funded, Handicap International could:
  - Take a leading role in the assessment as they have extensive experience in working in similar settings world wide
  - Build the capacity of essential services (CFS/YFS) to include children with disabilities and manage behaviours in a group environment
  - Assist the CPUs to develop appropriate case plans, and referrals for families of children with disabilities, set up parent support groups, identify appropriate services to refer children to, and identify missing services and advocate for children to access services abroad if needed
  - Build the capacity of DoH to extend existing services (physiotherapy, rehabilitation) to refugee children in the camp
  - Support capacity building in DoH service provision to children living with disabilities, support groups etc
  - Work closely with the WASH sector to improve accessibility of WASH services to children living with disabilities (latrine construction, water supply et cetera).

93 UNHCR, REACH (February 2013) “Fact Sheet # 2: REACH Assessment of Syrian Refugees in Host Communities – Dohuk Governorate”
## 4. APPENDICES

### Childhood Development Indicators – Children in Syria

#### Basic Indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Data 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under-5 mortality rank</td>
<td>115</td>
</tr>
<tr>
<td>Under-5 mortality rate (U5MR), 1990</td>
<td>36</td>
</tr>
<tr>
<td>Under-5 mortality rate (U5MR), 2011</td>
<td>15</td>
</tr>
<tr>
<td>U5MR by sex 2011, male</td>
<td>16</td>
</tr>
<tr>
<td>U5MR by sex 2011, female</td>
<td>14</td>
</tr>
<tr>
<td>Infant mortality rate (under 1), 1990</td>
<td>30</td>
</tr>
<tr>
<td>Infant mortality rate (under 1), 2011</td>
<td>13</td>
</tr>
<tr>
<td>Neonatal mortality rate 2011</td>
<td>9</td>
</tr>
<tr>
<td>Total population (thousands) 2011</td>
<td>20766</td>
</tr>
<tr>
<td>Annual no. of births (thousands) 2011</td>
<td>466</td>
</tr>
<tr>
<td>Annual no. of under-5 deaths (thousands) 2011</td>
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<tr>
<td>GNI per capita (US$) 2011</td>
<td>2750</td>
</tr>
<tr>
<td>Life expectancy at birth (years) 2011</td>
<td>76</td>
</tr>
<tr>
<td>Total adult literacy rate (%) 2007-2011*</td>
<td>83</td>
</tr>
<tr>
<td>Primary school net enrolment ratio (%) 2008-2011*</td>
<td>99</td>
</tr>
</tbody>
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#### Definitions and data sources


### Child Protection

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Data 2011</th>
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<tbody>
<tr>
<td>Child labour (%) + 2002-2011*, , total</td>
<td>4</td>
</tr>
<tr>
<td>Child labour (%) + 2002-2011*, , male</td>
<td>5</td>
</tr>
<tr>
<td>Child labour (%) + 2002-2011*, , female</td>
<td>3</td>
</tr>
<tr>
<td>Child marriage (%) 2002-2011*, married by 15</td>
<td>3</td>
</tr>
<tr>
<td>Child marriage (%) 2002-2011*, married by 18</td>
<td>13</td>
</tr>
<tr>
<td>Birth registration (%) 2005-2011*, total</td>
<td>95</td>
</tr>
<tr>
<td>Violent discipline (%) + 2005-2011*, total</td>
<td>89</td>
</tr>
<tr>
<td>Violent discipline (%) + 2005-2011*, male</td>
<td>90</td>
</tr>
<tr>
<td>Violent discipline (%) + 2005-2011*, female</td>
<td>88</td>
</tr>
</tbody>
</table>

#### Definitions and data sources

ILO Guidelines

#### ILO Guidelines

<table>
<thead>
<tr>
<th>Hazardous work</th>
<th>The minimum age at which children can start work.</th>
<th>Possible exceptions for developing countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any work which is likely to jeopardize children’s physical, mental or moral health, safety or morals</td>
<td>18 (16 under strict conditions)</td>
<td>18 (16 under strict conditions)</td>
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</table>
should not be done by anyone under the age of 18.

<table>
<thead>
<tr>
<th>Basic Minimum Age</th>
<th>15</th>
<th>14</th>
</tr>
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<tbody>
<tr>
<td>The minimum age for work should not be below the age for finishing compulsory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>schooling, which is generally 15.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Light work</th>
<th>13-15</th>
<th>12-14</th>
</tr>
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<tbody>
<tr>
<td>Children between the ages of 13 and 15 years old may do light work, as long as it</td>
<td></td>
<td></td>
</tr>
<tr>
<td>does not threaten their health and safety, or hinder their education or vocational</td>
<td></td>
<td></td>
</tr>
<tr>
<td>orientation and training.</td>
<td></td>
<td></td>
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</tbody>
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