

# IOM-IRAQ SPECIAL REPORT



## Increased Incidents of Suicide Among Yazidis in Sinjar, Ninewa July 2011

International Organization for Migration (IOM) field staff conducted a psychosocial assessment in response to a recent rise in suicides among young Yazidis in the Sinjar district of Ninewa governorate. Monitors asked families questions regarding feelings of uneasiness, relations with neighbors, the threat of eviction, freedom of movement, and coping mechanisms for anxiety, as well as their priority needs and living conditions.

The following report reflects information compiled after an assessment of approximately 110 families during the month of July, of which 55 were Sunni Muslim Kurds, 50 Yazidi Kurds, and 5 Sunni Muslim Arab families. In addition, the monitors interviewed health sector professionals and found that there is no mental health assistance available in Sinjar.

### KEY FINDINGS IN SINJAR

**Health professionals and families alike report that there are very few, if any, available staff and resources for community members suffering from psychosocial difficulties, despite a definite need for these services.**

According to the local police commander, the district saw 26 cases of suicide in 2010, and more than 40 have been reported so far in 2011, representing an increase over years prior. Of the suicides from both years, 23 were carried out by females, and all of the individuals were between the ages of 18 and 23.

IOM monitors determined that the vast majority of suicide cases were among the Yazidi community, with only a few occurring in the Muslim population. The assessment found that social and cultural factors play a dominant role in causing suicides and suicide attempts, with economic concerns serving as secondary factors.

Families point towards external factors that affect their mental health and sense of security. These factors include the threat of eviction from their homes, the cost of rent, a safe environment for their children, the ability to freely practice religion, and the availability of mental health services.

Three health officials in Sinjar report that there are currently no mental health units or psychiatrists in Sinjar's main hospitals, and consequently some doctors prescribe sedatives to patients suffering from mental health problems in place of providing treatment. Individuals also turn to family members for support where professional help is not available.



An IOM monitor interviews residents of the Sinjar district.

### FAST FACTS

- Sinjar district is located in the northwest of the country near the Syrian border in the Ninewa governorate.
- The districts population numbers approximately 350,000 people, two thirds of whom are of the Yazidi faith.
- Yazidis are a religious minority group that lives primarily in the Ninewa governorate in the Sinjar and Shekhan districts.



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### SOCIAL AND CULTURAL FACTORS

Due to the sensitivity of the subject matter, a number of interviewees refused to answer some of the questions posed by IOM Iraq field staff, or downplayed the extent of psychosocial issues in the community. Once initial hesitations subsided, respondents felt more comfortable admitting their feelings of uneasiness.

Many of those who responded cited cultural and social factors, particularly those regarding marriage, for the young Yazidi suicides. Multiple respondents had either personally experienced or had a close relative who had entered a relationship or marriage of which their families did not approve, leading to the suicide of one of the young individuals. Family disapproval tends to arise when individuals from different religious or social backgrounds announce a desire to marry. Many of these couples cannot move elsewhere due to the security situation, and some instead commit suicide.

Monitors also found that difficulties with social interactions and feelings of uneasiness were much more acute in the rural areas in which they conducted interviews due to greater ignorance, illiteracy, the marginalization of women, and the lack of government-provided services.

### THE PERSPECTIVE OF HEALTH PROFESSIONALS

The professionals interviewed by IOM monitors agree that social and cultural forces play a prominent role in the suicides of young Yazidis. Several doctors echoed the reports of conflicts that can arise due to a marriage match, and added that the tribal system of social organization at times exacerbates conflict within and between families.

Furthermore, one doctor sees the arrival of the internet and its influence on culture and youth as a contributing factor. This fear similarly arose when several community members expressed a fear that the strongly traditional Yazidi culture is changing shape in a negative way.

The health professionals interviewed agree that a lack of resources contributes to this problem by stunting education levels, awareness, and health services, but that economic causes of suicide remain a secondary factor.



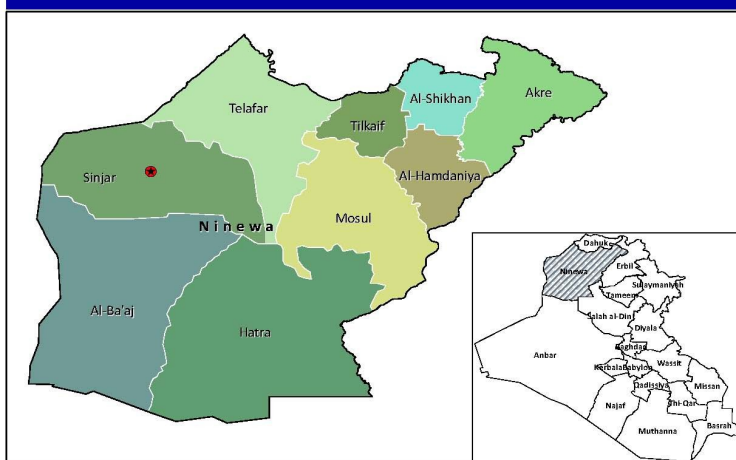
### SERVICES AND RECOMMENDATIONS

Mental health support in Sinjar is non-existent. The Director of Health in the district confirms that there is no department or unit for mental health there, and that doctors often prescribe sedatives instead of proper treatment for individuals complaining of psychosocial problems. The Director of Sinjar's health center reports that the center sees 2 or 3 cases daily of psychosomatic symptoms or psychiatric problems yet there is no psychologist or social worker on staff.

The district and its hospitals and health centers are in immediate need of mental health support infrastructure and staff. Not only would these facilities provide for the adequate diagnosis and treatment of psychosocial problems,

but they would raise much needed awareness in the community both for individuals seeking help and for relatives struggling to overcome the associated stigma and support family members with mental health problems. The leadership of the local women's center further suggests that a youth forum would be beneficial to young Yazidis facing relationship and familial problems.

### Rise in Suicides Among Yazidis in Sinjar, Ninewa



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## FOCUS ON WOMEN AND YOUTH

A greater number of young women have committed suicide than young men, and the health professionals who spoke with IOM field staff confirmed that the marginalization of women and the view of the woman's role as peripheral contributed to the recent suicides. The marginalization of women is demonstrated by the gap in employment rates, with an overwhelming majority of women being unable or unwilling to work, largely due to family responsibilities and cultural qualms regarding women engaging in activities outside the home.

**Employment status of assessed Yazidis, aged 18 and older**



The Yazidi women who spoke with IOM Iraq field staff are at an even greater disadvantage than their Sunni Muslim counterparts, experiencing higher rates of illiteracy than both Sunni Muslim women and Yazidi men. Furthermore, the monitoring team noted that Sinjar's mixed population comprising different ethnic and religious groups adds to tensions between and within each group as well as magnifies feelings of isolation. The women's union reports that isolation of women and their inability to travel to nearby cities for psychiatric treatment due to cultural norms and tribal restrictions

**Education status of assessed community members, aged 18 and older**



Additionally, students are another demographic of concern. IOM monitors interviewed several school teachers who reported an increase in the number of students exhibiting unusual emotions and violent or isolationist behaviors. The monitoring team learned of several disturbing cases, including a seven-year-old child who attempted suicide three times within one month. The teachers believe the causes to be either problems between parents at home or, for teen girls, issues surrounding arranged marriages.

All of the suicide victims were between the ages of 18 and 23. Yazidi and Sunni Muslims within this age range differ greatly in terms of displacement status with Yazidis being far more likely to be members of the host community, while Sunni Muslims are largely displaced. Very few youths from either community are married or are heads of household.

**Assessed youths, aged 18-23**

	Yazidi	Sunni Muslim
Host Community	20	7
IDP	10	43
Married	3	2
Head of Household	1	1

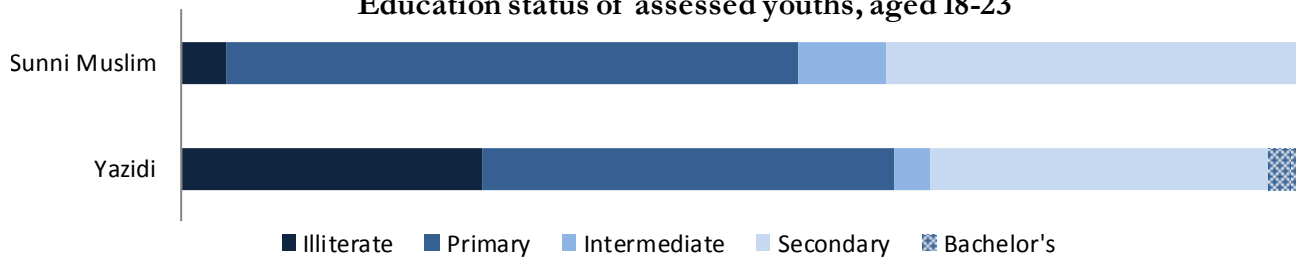
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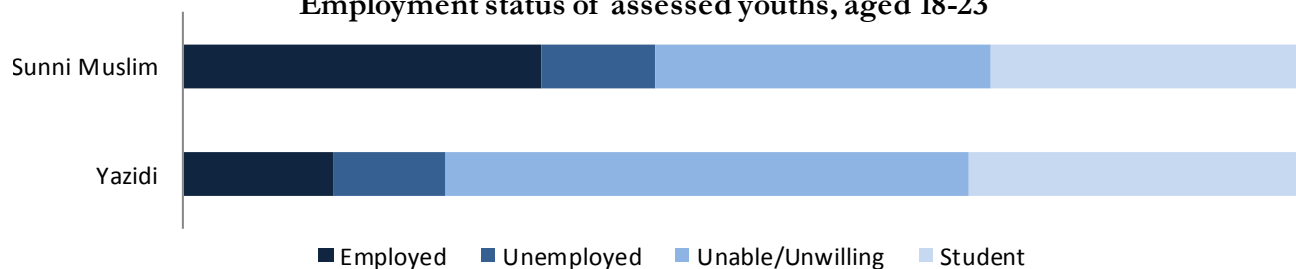


Among youth who were interviewed by IOM field staff, Yazidis within the at-risk age range were found to be less educated overall than Sunni Muslims in the community of the same age, and to have a higher illiteracy rate. Furthermore, fewer assessed young Yazidis reported being employed compared to Sunni Muslims of the same age.

**Education status of assessed youths, aged 18-23**

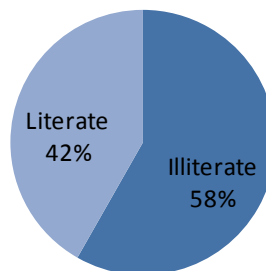


**Employment status of assessed youths, aged 18-23**

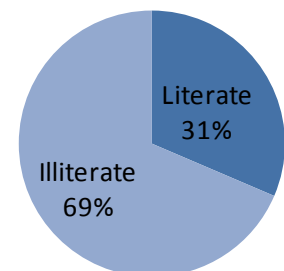


Among all age groups, Yazidi respondents demonstrated a higher incidence of illiteracy than Sunni Muslim respondents. Illiteracy is a problem identified by several community leaders as a hindrance to spreading awareness about suicide and mental health treatment.

**Literacy among assessed Sunni Muslims**



**Literacy among assessed Yazidis**

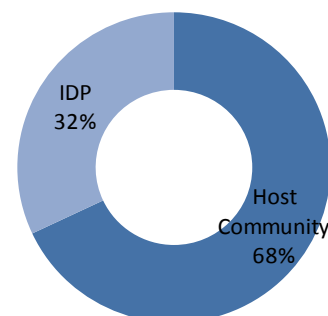


### LIVING CONDITIONS IN SINJAR

While economic factors have been found to play a secondary role to cultural influences of youth suicide, they nevertheless contribute to feelings of uneasiness or hopelessness, problems within families, and tensions among groups.

Despite being mostly members of the host community, the Yazidi families from Sinjar who spoke with IOM were much more likely to live in improvised housing than their Sunni Muslim neighbors.

**Status of assessed Yazidis in Sinjar**



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## Housing discrepancies between Yazidi and Sunni Muslim families in Sinjar

Type of Housing	Number of Yazidi Families	Number of Sunni Muslim Families
Rented	3	17
Improvised	38	2
Own House	9	39
Relatives or Host Family	0	1

Residents of Sinjar did not mention health needs with quite the same frequency as economic ones, but such problems still played a recurring role in interviews, and the concerns that exist are significant.

Families, particularly those whose children have special needs or other chronic health problems, reported that there are poor health services in the region. Some also must travel to other cities for medical attention, placing an additional financial burden on the family.

A handful of Yazidis admitted to fearing the occurrence of further suicides in the community, particularly within their own families.

## A resident of Sinjar discusses his health concerns with an IOM monitor.

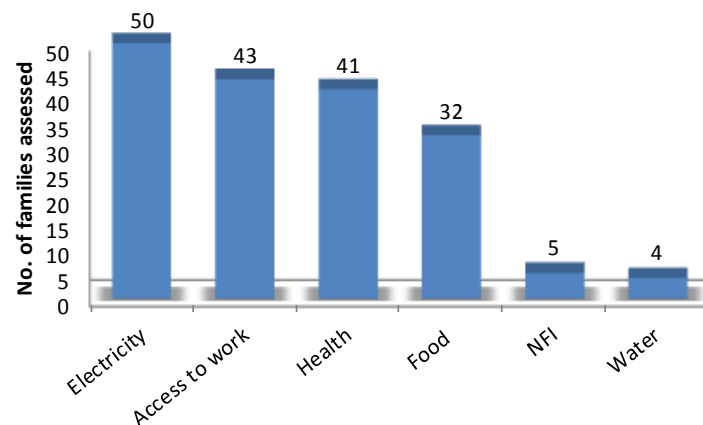


In conversations with IOM monitors, residents of Sinjar expressed an array of needs that center around major themes such as supporting their families, remaining safe during volatile circumstances, and caring for relatives with health problems.

Economic difficulties clearly place a strain on both Yazidis and Sunni Muslims alike, with families across the board struggling to provide for their physical needs and worrying that the economy will worsen. Continued growth of the displaced population was mentioned as well, as families in Sinjar fear that a continued influx of IDPs will cause further deterioration in quality of and access to services. A few of the IDP families reported their fears of being evicted because they are living on public land.

Interviewees also pointed to the poor political and security situation as a source of stress, saying that violence and the threat of violence hamper both the economy as well as their ability to move about the region. Residents of Sinjar therefore find themselves isolated from services and from supportive like-minded communities.

## Priority needs of assessed Yazidi families



Given the influx of IDPs to Sinjar, the region has become home to a mix of religions and ethnicities. Yazidi and Sunni Muslim families alike expressed similar concerns about this when interviewed by IOM field staff, pointing towards fears regarding continuity of their traditions and potential conflicts with other groups. Parents in particular worry about the implications for their children, no doubt a concern held by many families throughout Iraq as their towns face changing cultural compositions.