

Sustainable Reintegration in Iraq

This report is a part of the ERRIN Facility project implemented by the Finnish Immigration Service.

This research activity focused on tackling the psychosocial challenges and potential stigmatisation issues that people face upon the return to Iraq – and which could possibly be addressed by a future grassroots campaign creating a more enabling environment for Iraqi returnees.



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Introduction

The last five years have seen increasing numbers of Iraqis returning from Europe, with over 27,000 returning from mid-2018 through 2020.¹ For those born in Iraq and in host communities, the adaptation and reintegration process is full of challenges. Flows of tens of thousands of Iraqis return from abroad to a country that has long standing social fractures, sectarian conflicts and poor resources. When these circumstances are coupled with economic barriers, poor access to services and insufficient psychosocial support for both returnees and host communities, successful reintegration is put in jeopardy and the risk of remigration increases.

This report aims to inform future engagements of the "Sustainable Reintegration in Iraq " (SRI) project, which is implemented in a collaboration by the Finnish Immigration Service and The European Return and Reintegration Network (ERRIN). The main goals are to:

- Generate novel insights into the challenges returning Iraqis face during the reintegration process - in particular, potential unmet psychosocial needs and stigmatisation.
- Develop an evidence-based campaign that enables Iraqi returnees to experience a more enabling environment.

Key Findings

- Consistent with the literature, research subjects reported broad psychosocial needs before, during and after return.
- Psychosocial services were largely unavailable to research participants despite widespread anxiety, depression, and experiences of trauma. In the few cases where available, services were limited to a one-time session.
- Fear of stigmatisation - rather than stigmatisation itself - emerged as a core influence on behaviour and mental health during reintegration experiences.
- Social networks were identified as key facilitators or inhibitors of reintegration experiences. However, whilst most participants reported a positive short-term influence from networks upon return, they also said there was neutral long-term influence.
- While research participants reported few challenges in formal access to education and healthcare, adjustment and quality barriers impact their ability to benefit from these services.
- Returnees faced clear barriers to livelihoods upon return and whilst not necessarily a barrier to reintegration, it sits as a cause for re-migration.

¹ IOM (2021) Displacement Tracking Matrix : Iraqi Returnees from abroad.
https://reliefweb.int/sites/reliefweb.int/files/resources/20211175432691_Returnees_from_abroad_December_2020.pdf

Background

Iraqis have been among the top five nationalities arriving irregularly into Europe over the last decade. In the last year alone, there were over 16,000 first-time Iraqi asylum-seekers in the EU.² The main drivers of migration from Iraq are a lack of personal and general security, lack of equality and social justice, political instability and poor employment options - factors that have remained constant for years.

At the same time, return migration flows from Europe to Iraq have substantially increased since 2014³, accompanied with unique new challenges. The literature is clear that many migrants experience difficulties with adapting to a new environment (e.g. on arrival in destination countries) but returning migrants face particular and unique obstacles. There are four key dimensions that impact the process of reintegration⁴:

- self-identification and sense of belonging,
- cultural orientation toward the host and home country,
- social networks, and
- access to rights, institutions and the labor market in the country of origin.

While longstanding reintegration approaches focus on aspects of physical and social reintegration, the psychosocial implications of reintegration are often unaddressed. Encountering different societal norms in host communities, different religious beliefs and traditions can lead to powerful identity shifts in migrants⁵. The adaptation process before and upon return - difficult for most migrants - is also impacted and amplified by factors such as length of time away, how much the migrant remained in contact with origin networks and age at departure.

It is often not possible to simply reverse any identity changes and become their 'pre-journey selves'. Migrants' experiences during their journeys and lives in the destination country may have changed them. To cope, migrants often report trying to 'fit into both worlds', and this could be observed during the research as participants mentioned incorporating "European" behaviors such as respecting traffic laws and avoiding making loud noises after 10PM. But in doing so, they risk not finding deep connections within their community of origin. In addition, returning migrants may also have with them children who have little or no experience of life in Iraq. As their parents face complex reintegration processes, these children undergo their own "integration" experiences into a new environment, language and culture they may have no memory of, or have never been a part of.

² Eurostat (2021) Asylum quarterly report. https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Asylum_quarterly_report

³ OM (2017) Lack of security (general and personal), perceived lack of equality and social justice, and political instability

⁴ Kuschminder, Katie (2019). Reintegration Strategies: Conceptualizing How Return Migrants Reintegrate. *Asian and Pacific Migration Journal*, Vol 28, Issue 1. <https://journals.sagepub.com/doi/full/10.1177/0117196819832756>

⁵ European Parliament (2017). Reintegration of returning migrants, October 2017 Briefing. Retrieved from: [http://www.europarl.europa.eu/RegData/etudes/BRIE/2017/608779/EPRS_BRI\(2017\)608779_E N.pdf](http://www.europarl.europa.eu/RegData/etudes/BRIE/2017/608779/EPRS_BRI(2017)608779_E N.pdf)

Iraqi refugees and migrants are five times more likely to suffer from anxiety, depression and trauma related conditions compared to European populations and most receive no psychosocial support upon return⁶. Untreated mental health conditions can cause severe behavioral and physical problems, leading to withdrawal from family and friends, trouble learning new skills and an overall decreased enjoyment of life.

The impacts of psychosocial challenges in reintegration reverberate far beyond mental health. The literature clearly shows that psychosocial needs among returnees profoundly impact economic, social, and security factors at community and individual levels⁷. For example, Seefar's research has found that poor adaptation upon return is linked with low motivation and ability to access jobs⁸.

These challenges only add to the physical, social and economic burdens returnees already face. In Iraq, key examples of these challenges include:

- The number of youth out of work in Iraq is 60% higher than it was 10 years ago⁹.
- Access to high quality learning remains low; at the end of 2019, close to 3.2 million school-age Iraqi children were not attending school¹⁰.
- Healthcare remains in a state of crisis with "a shortage of drugs, doctors fleeing in their thousands, life expectancy lower and child mortality rates higher than average".¹¹

Research Overview and Methodology

Aims and objectives

This report seeks to identify and understand the psychosocial challenges and potential stigmatisation issues that returnees face upon return to Iraq. The recommendations are based on findings from desk-based research and focus group discussions (FGDs) with 60 returnees, their family and key stakeholders.

To make the recommendations as practical as possible this report aims to:

1. Identify social units that should be engaged to mitigate the identified challenges; and
2. Elaborate evidence-based recommendations for a future grassroots campaign that creates an enabling environment for Iraqi returnees.

⁶ Sandalio, R. (2018) Life After Trauma: The Mental-Health Needs of Asylum Seekers in Europe. <https://www.migrationpolicy.org/article/life-after-trauma-mental-health-needs-asylum-seekers-europe>

⁷ Kuschminder, Katie (2019). Reintegration Strategies: Conceptualizing How Return Migrants Reintegrate. *Asian and Pacific Migration Journal*, Vol 28, Issue 1. <https://journals.sagepub.com/doi/full/10.1177/0117196819832756>

⁸ Seefar. (2018). Distant Dreams: Understanding Aspirations of Afghan Returnees. <https://seefar.org/news/research/distant-dreams-understanding-the-aspirations-of-afghan-returnees/>

⁹ World Bank. (2021). <https://data.worldbank.org/indicator/SL.UEM.1524.ZS?locations=IQ>

¹⁰ UNICEF (2020). Every Child <https://www.unicef.org/iraq/what-we-do/education>

¹¹ Reuters (2020). Iraq's healthcare system is in crisis. <https://www.reuters.com/investigates/special-report/iraq-health/>

Methods

Desk Research

The research began with a rapid literature review with the purpose of informing the design of subsequent research stages. The desk research continued throughout the project in order to ensure that other research components remained focused on gathering original data, and to enable the final report to point readers towards sources of further information.

Focus Group Discussions and Key Informant Interviews

Seefar conducted a series of focus group discussions (FGDs) and key informant interviews (KIIs) in Baghdad, Iraq. Field work took place between May and June 2021, preceded by the literature review. The FGDs were semi-structured with 52 returnees and their family members. Seefar conducted semi-structured KIIs with 8 key community stakeholders.



FGDs
4 groups

Semi-structured discussions
52 participants
47 returnees
5 family members



Interviews
8 key informant interviews (KIIs)

3 female key informants
1 Professor of Psychology
1 Legal Advisor
1 Social Worker

5 male key informants
2 Imams
1 lawyer
1 educator
1 senior member of the Ministry of Migration & Displacement

Participants were identified by the European Technology and Training Centre (ETTC), a reintegration partner of the European Return and Reintegration Network (ERRIN), using a snowball sampling technique, in which research participants were referred by returnees within the same target group. Under this approach, referrals to build the sampling frame continued until the predetermined sample size (60) was reached. This form of sampling is used when research subjects are from a population that is hard to access or difficult to locate. Seefar’s field staff in Iraq were used to identify the key informants.

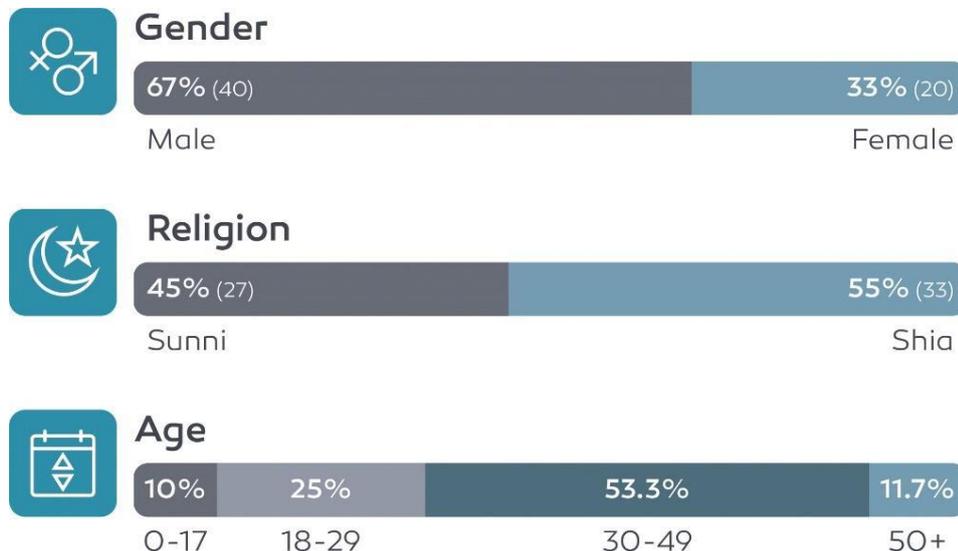
FGD and KII tool design was conducted by Seefar’s researchers in close consultation with other stakeholders. The tools were reviewed for conflict and trauma sensitivity and cultural appropriateness. All field research was conducted in Arabic or English depending on the participants’ language preference. There were 23 guiding questions for FGDs and 6 for KIIs (Annex 1).

Limitations

Qualitative research sampling is specifically designed to elicit a breadth of responses from diverse and hard to access populations, in contrast with random sampling approaches. As such, the research is not representative of all returnees in Baghdad or wider Iraq and findings should not be interpreted as causal.

Numerical descriptions of the sample are presented below. These figures are useful to calibrate and interpret the qualitative data and themes that are emphasised throughout the analysis.

Returnee Profiles



Findings

Psychosocial Support largely unavailable

Consistent with the literature, the research found that psychosocial support was an often overlooked part of reintegration.¹² Almost 90% of research participants never had access to this type of service. Just over one third of participants believed they would have benefited from psychosocial support prior to, upon or shortly after return.

“It would have helped, I’ve had such worries and difficulty in coping. I don’t know where to go for this kind of support.”

The minority of research participants who had received this kind of support referred to sessions with a counsellor in a European country prior to departure. Two participants reported counselling upon their return. In all circumstances, this was described as only one session with no repeat or follow up engagements.

Key informants emphasised this unmet psychosocial need, believing that reintegration is hampered by reduced resilience, feelings of hopelessness and lack of access to any kind of mental health support.

“Returnees have often experienced trauma before or during their journeys and coming back home is not necessarily what they want or easy for them...it can make symptoms much worse.”

Fear of Stigmatisation is prevalent

A Baghdad based psychologist said many of their recently returned clients felt like they had failed, and had let themselves and their family down by failing in their attempts to remain in Europe. Going further, they noted that concerns around stigma were commonplace among returnees, ***“I can see many of them feel sad or angry and in addition they have anxiety about the stigma of return.”***

This fear of stigmatisation was referred to by the returnees themselves, with the majority acknowledging that they had been, or were still, concerned about it.

“I worried a lot about what my family would say when I returned. It was hard to communicate before I travelled back.”

Whilst the majority of returnees admitted to feeling anxiety and stress about possible stigma, the number of returnees who actually reported experiencing stigma was extremely low. In fact, close to 90% reported being welcomed back happily by family and friends. They agreed that the most prevalent reaction from others was empathy; disappointment for them at not making a new life in Europe, but importantly, not disappointed at them.

¹² IOM (2019). Reintegration Handbook – Practical guidance on the design, implementation and monitoring of reintegration assistance. <https://publications.iom.int/books/reintegrationhandbook-practical-guidance-design-implementation-and-monitoring-reintegration>

“My family and friends made me feel disappointed... they are just sad for me that I had to come back.”

For others, whilst they were upset about having to return their families felt quite differently:

“The problem is that I don't feel happy at all here, my family are happy I'm here but I don't want to be here again.”

This preemptive anxiety about being stigmatised was only ever realised by three participants. Giving weight to the suggestion that the fear of stigmatisation far outweighs the actual occurrence of stigmatisation. However, fear -whether realised or not - can be debilitating and is very likely to affect mental well-being¹³. Psychosocial interventions at a pre-return or early-return stage would likely help to alleviate the considerable stress burden associated with returnees fearing stigmatisation.

Among the two-thirds of research participants who said they were not interested in psychosocial support, many linked their lack of interest with judgment and stigmatisation. Some returnees said that they would be fearful of receiving any type of counselling as others may presume they have “something really wrong” or would assume they were needing psychiatric interventions.

“...you might be judged if you see a psychologist. Your family can be embarrassed as others may think you are crazy.”

Whilst there was acknowledgment that things were slowly changing, it was evident that misunderstanding and misinformation regarding counselling, its benefits and its purpose are barriers to increasing community acceptance of psychosocial support.

Both Imams interviewed offered that they had frequently been in circumstances where they were able to offer support and guidance to returnees, and that this often ***“was not just faith-based, but about being content, how to deal with worries and make changes.”*** Some participants referred to finding religious leaders an important part of reintegration in that they ***“can make you feel part of this society.”*** Others reported that where ***“they did not receive enough support from the government...the role of religious leaders was more important.”*** The connectedness and trust that some of the returnees interviewed showed in their Imam, makes it worth considering whether such faith-based interactions may have the potential to increase uptake of psychosocial support.

Many migrants returning from Europe are not only suffering from a sense of failure, but they may also be experiencing severe psychological strain, as a result of what may have happened to them prior to departure, on their journey or in host countries. This research did not specifically ask questions related to trauma during the FGDs, but almost all participants freely referenced concern regarding the security situation in Iraq or having had family members killed by violent extremist groups, or violations of human rights. Untreated trauma is highly likely to impact personal relationships, the ability to partake in livelihood initiatives and be a barrier to feelings of societal cohesion and reintegration.¹⁴

¹³ Schuster, L. and Majidi, N. (2015). Deportation Stigma and Re-migration. *Journal of Ethnic and Migration Studies*, 41(4), pp. 635-652. doi: 10.1080/1369183X.2014.957174

¹⁴ Hamburger, A. (2018) *Migration and Social Trauma Interdisciplinary Perspectives from Psychoanalysis, Psychology, Sociology and Politics*. Routledge.

Family/Friend networks can influence reintegration success

One of the most important elements of the reintegration process are social networks, as contacts can make returnees feel welcome in their community, as well as provide them with information, social capital and safety nets.¹⁵ The research affirmed that family and friends can be understood as both inhibitors or facilitators of reintegration, but it also found that there are limits to any benefits.

23% of the participants indicated that their main reason to return was how much they missed their family members, highlighting the psychosocial costs of being away from family and friends. Furthermore, a large majority of research participants indicated that they were initially welcomed by their family and friends. The short-term benefits of this included returnees feeling relief and happiness at being reconnected with loved ones.

"My family and friends welcomed me and they were very happy to see me."

This positive initial experience was not universal, and a minority detailed more negative receptions. A female participant shared that her relatives kept asking her and her family why they came back ***"to the misery and also told (them) that (they) will regret it soon for returning to Iraq"***. A minority of respondents also reported feeling unwelcome by wider community networks. Another female participant stated that: ***"My friends and family welcomed me, but some other people criticized me for being a failure and coming back from Europe without achieving any success..."***

After the initial return experience, research participants reported that the role of family and friends trended towards a neutral influence on reintegration. For example, many said that their welcome upon return did not translate into any long-term benefits or ease of reintegration. Others agreed that the initial return was ***"fine at first as it was so good to see my family"*** but that ***"my family members all have their own problems and they can't just help me."***

And yet, most tended to agree that having a strong social network is a key factor to facilitate successful reintegration.

"Anyone who has a family and maybe married people can reintegrate faster than single people."

Whilst there is much research concerned with the initial reactions of families and the impact this has on returnees, this study emphasises that the reintegration process is far more complex than the first few weeks. It suggests that focus should be given to the long-term bolstering of family and friend networks, since reintegration is not linear or a short process. Interventions that include returnees and their social networks, catering to the needs of both groups are perhaps well placed to ensure meaningful and lasting cohesion and reintegration.

¹⁵ IOM (2015). Reintegration: Effective approaches.

Education options in Europe are a draw for young Iraqis

All participants with children aged 6 to 16 reported that those children were attending full time education in public schools, and had been doing so since their return to Iraq. Some respondents had received a reintegration assistance grant that helped in sending their children to school. However, they went on to comment that they may not be able to continue attending school once the grant has been fully disbursed. Reasons given included doubting their ability to purchase school uniforms and cover transport costs without financial assistance, and that there may be increased pressure for older children to contribute financially once the grant payments stop.

One young child (aged 7) remarked that she didn't really know anyone in her school in Iraq. She was two years old when her family left Iraq and had just turned seven when they returned. Her mother said she was having a ***"difficult time in settling as she doesn't know the ways here in Iraq."*** Other parents agreed that their children had experienced struggles adjusting to school in Iraq, whether this be returning to or indeed, attending an Iraqi school for the first time.

All participants aged 18-29 years felt there were no educational or development opportunities available to them. Just over half of this age group believe they would have an improved learning and development outlook if they moved outside of Iraq again, with some stating they hoped to return to Europe with the specific goal of completing degrees, masters or PhDs. For example, Aras (aged 22) returned to Iraq last year when her family failed to get permanent residency in Finland and she says:

"I can apply for a masters degree here, but this is not my dream. I would like to continue studying in Finland."

Maeda, aged 17, spent four years in Sweden but returned with her father when he failed to get residency, and hopes ***"to get a scholarship in Europe since I speak English and Swedish fluently."***

A Baghdad based social worker observed that ***"many of the young people I talk to do not have opportunities to learn and improve their skills. Challenges to access include limited options, no financial support and sometimes a lack of motivation since they don't believe any amount of qualifications will lead to an actual job."***

There was strong consensus that a lack of post-secondary education opportunities and the financial barriers to access opportunities would hinder reintegration and contribute to remigration.

Health Care remains low quality

One of the main factors influencing the measurement of a country's life quality index is its general life expectancy, which indirectly accounts for the efficiency of the health services available, as these are responsible to care and prolong the lives of individuals. In order to better understand the context around those who have returned, the study participants were questioned about their ability to access health care services. All of the returnees interviewed answered that they have access to the public health system. That provides a certain degree of comfort, but around one-third of participants emphasized the poor quality of these services:

"Public hospitals are available for everyone here but they are miserable and do not provide good services to people."

Eight of the study participants highlighted that private clinics offer a better alternative than the available governmental hospitals, but these are expensive and, therefore, not available to the wider population.

The poor quality of healthcare services in Iraq was also mentioned as one of the driving forces for respondents to leave the country initially. A 35 year-old woman, when asked about her reasons to leave, stated that **"there is no good health system, if my children get sick they don't get proper care."**

In addition to that, some returnees who had the chance to witness the health services available in Europe during their stays abroad, showed greater discontent with the services available, going so far as to state that these are **"terrible health systems if we compare it to Europe."**

One father, who wants to leave Iraq again, stated that the poor healthcare was a key motivator to re-migrate, as one of his daughters has a chronic health condition and he believes she would have better care in Europe.

Employment options are limited

The great majority of research respondents reported that employment and better job opportunities would facilitate reintegration, but few were able to access jobs. Over 90% of respondents described livelihoods as their biggest challenge upon return to Iraq.

"I think if you give jobs to those who returned and help them in settling down and get their life back they will be able to reintegrate and live here and not think about leaving Iraq again..."

The answers of two of the key informants, a training advisor and a social worker in Iraq, reflected the same pattern once they were questioned about why they believe returnees face multiple challenges when attempting reintegration. The social worker answered: **"For many reasons but the most important ones are the inability to have a job or resume their life."** These answers are expected, given that Iraq has one of the lowest employment-to-total population ratios in the region.¹⁶

A large number of respondents (n=46) have indicated that jobs in their areas of expertise were hard to find, and some highlighted that, of the few available employment opportunities, most are for the roles of constructors, taxi drivers and restaurant staff which are all low paid.

Some returnees have also indicated that nepotism was a significant problem in Iraqi society. A young male (age 28) respondent stated that **"jobs are available for those who are affiliated with political parties or armed militias."** The answer from a young female participant (age 30) reflected the same pattern and added the use of bribes to acquire jobs as a factor. She stated that **"good jobs are only available for political parties and those who pay to get these jobs."**

17 participants acknowledged that lack of jobs is making them, or may make them in the future, consider re-migration. **"If I can't find a job so I can support my family's needs here in Iraq, then I will of course go to another country to look for one."**

¹⁶ ILO (2021). Promoting decent work in Iraq. https://www.ilo.org/beirut/countries/iraq/WCMS_433682/lang--en/index.htm

Five returnees who reported struggling with anxiety and depression said also that they lacked motivation to look for jobs. Perhaps linking to other research which details how untreated mental health conditions are often a barrier to finding and maintaining a job^{17 18}.

Though livelihoods is often mentioned as one of the main factors preventing return, an observation from researchers is that whilst the lack of jobs is clearly a major challenge and source of stress, it is certainly not constrained to just returnees. Many others face a similar problem, so it is unlikely to be employment that makes a person feel integrated, given that unemployment is prevalent and therefore a community-wide shared experience. Though, we do acknowledge that the lack of income in a household directly impacts education opportunities for children and access to services, such as private healthcare, which could make the reintegration process harder.

¹⁷ Schnider, J (2018). Journal of Psychiatry ISSN: (Online) 2078-6786, (Print) 1608-9685

¹⁸ Seefar. (2018). Distant Dreams: Understanding Aspirations of Afghan Returnees.
<https://seefar.org/news/research/distant-dreams-understanding-the-aspirations-of-afghan-returnees/>

Annex 1

FGD Questions

Questions for Returnees

- **Age:** **Ethnicity:** **Sex:** **Religion:**
- Returnee experience:
 - Why, when and how did you leave Iraq?
 - What was your occupation and economic situation before leaving Iraq?
 - Who or what influenced your decision to return?
 - What did you expect upon return?
 - How have you been received by:
 - Your friends
 - Your family
 - Your neighbours
 - Authorities and leaders in your community?
- What are the main challenges upon return:
 - What is the situation of basic infrastructure/services around you?
 - Health care: Which and how do you have access to health services?
 - Education: Where and how do (your) children go to school?
 - Education: Are there educational opportunities available for you? If not, which educational opportunities would you like to have access to?
 - Housing: Do you have ongoing access to safe and suitable housing? Employment: Are there any job opportunities in your area, which?
 - Support: Do you have access to psychosocial support you might need? If yes, who has provided this support to you? If no, what is that you would like access to?
 - Who has helped you since you have returned?
 - Has anyone or any group made you feel unwelcome?
- What has been the biggest challenge for you upon return?
- How can reintegration challenges be better addressed?

- Based on your experience of life, how is it to be a “returnee”?
- What was the reaction of your significant people/family upon your return?
- In your view, who are the migrants who return to Iraq regarding their characteristics? e.g. gender, age, ethnicity, socio-economic background and occupation. Why do they return? And why do others not return?
- Do you think some migrants are more capable of reintegrating than others? If yes, what do you think the reasons are for that?
- Do you have anything to add that might be related to this research?

Questions for Key Informants

- How do you perceive people that have returned to Iraq?
- Have you experienced people being unwelcoming to returnees?
- Why do you think people return to Iraq?
- Why do you believe returnees face multiple challenges when attempting reintegration in Iraq?
- What do you think could be done to better support those who are returning?
- Have you ever been in a position to support someone who has returned? If so, how?



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