



## **Free Yezidi Foundation Statement**

### *Yezidi Suicide Crisis and Threat of Camp Closures*

27 January 2021

Recently, two concerning developments facing the Yezidi community have arisen: a spike in Yezidi suicides and suicide attempts, and the proposed government closures of internally displaced persons (IDP) camps throughout Iraq.

Suicide rates have increased among Yezidi IDP camp residents. Since the beginning of this year, not even one month, at least eleven Yezidis have committed suicide, a spike that has caused alarm among organizations and practitioners.<sup>1</sup> It appears that the COVID-19 pandemic has further exacerbated an already acute community-wide trauma. There is need for targeted, smart efforts to provide trauma treatment to Yezidis, with a focus on supporting Yezidi-led organizations.

At the same time, Iraq has adopted a policy to close IDP camps nationwide. Beginning in October 2020, the government announced the sudden closure of several camps throughout federal Iraq. There appears to be some intent to force camp closures in the Kurdistan Region of Iraq as well, where most Yezidi IDP camps are located. As part of its broader efforts to close camps, some have cynically and incorrectly attributed the spike in Yezidi suicides to the difficulty of living conditions in the IDP camps in order to justify camp closures. While promising to study the increase of suicide in camps, Iraq's Ministry of Displacement and Migration maintains its position to accelerate camp closures.<sup>2</sup> It is true that IDP camp life is difficult. But it is not the camps that cause suicides, but rather the trauma Yezidis bear since the ISIS genocide and even before. Closing IDP camps will not reduce trauma or suicide risk; it will further enflame the problem. Forcibly closing Iraq's IDP camps before civilians have homes and a voluntary, safe plan to return is a harmful, ill-informed decision that is not aligned with humanitarian principles.<sup>3</sup> Already, nearly 30% of persons forced to leave camps are now considered secondarily displaced.<sup>4</sup>

Suicide rates among Yezidis has been increasing for years, even before displacement. The suicide risk for Yezidis in Sinjar was prevalent long before ISIS, due to many factors that still exist today: inadequate housing, security threats, lack of economic & educational opportunity, and religious

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<sup>1</sup> Holly Johnston and Khazan Jangiz, “[‘We need help’: suicides spike at Duhok’s camps for Yazidis.](#)” [Rudaw.net/English](#). 18 January 2021; and, Coalition for Just Reparations, “[Joint NGO Statement on Increased number of Suicide cases and the Deteriorating Mental Health Crisis facing Atrocity Crimes Survivors in northern Iraq.](#)” [C4jr.org](#). 19 January 2021.

<sup>2</sup> “We are about to conduct a special visit [to the KRI] to coordinate an effort to close 10 camps in the first phase,” remarked the Minister in Gilgamesh Nabeel, “[Iraq makes major progress in closing camps for the displaced.](#)” [Al-monitor.com](#). 15 January 2021.

<sup>3</sup> Norwegian Refugee Council, “[Iraq’s camp closures leave 100,000 people in limbo.](#)” [Nrc.no](#). 9 November 2020.

<sup>4</sup> IOM Displacement Tracking Matrix, “[DTM Emergency Tracking Movement of Camp IDPs.](#)” [Iraqdtm.iom.int](#). 17 January 2021.



discrimination.<sup>5</sup> Displaced Yezidis suffering from trauma<sup>6</sup> have little hope for a prosperous future, not because they reside in camps but because of genocide and underlying factors. Making them homeless is not a solution. Yezidis require long-term, specialized trauma treatment. Few existing trauma treatment providers exist in Sinjar and are already overburdened.<sup>7</sup> In general, the Iraqi health system is not equipped to respond to persons with depression or trauma, especially those exhibiting risk of suicide or self-harm.

Forced closures of IDP camps and premature return to Sinjar right now is unsafe and unsustainable for most Yezidis, which is why they choose to remain in the camps. Security threats in Sinjar remain, including hostile militias, ISIS members, Turkish bombings, and possibility of conflict. Most of Sinjar remains in ruin, with little healthcare, basic services, jobs, or housing. If returnees somehow find safe shelter, they will likely not have access to mental health services. If and when IDPs voluntary choose to return, they should be strongly supported. But IDP camps should not be closed in an effort to force the hand of an endangered, persecuted minority community. Instead, Yezidis should have the right to remain in the relative safety of IDP camps if they choose, while government bodies and international and local aid organizations should deploy wide-scale trauma treatment to address suicide risks. Traumatized or suicidal civilians will not benefit from being made homeless. While IDP camps should not be the permanent future for Yezidis, they do offer basic protection and housing and should not be forcibly closed until their residents freely choose to leave.

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For more information, visit [www.freeyezi.org](http://www.freeyezi.org).  
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<sup>5</sup> International Organization for Migration, “[IOM-Iraq Special Report: Increased Incidents of Suicide Among Yazidis in Sinjar, Nineva](#).” [Iom.int](#), July 2011.

<sup>6</sup> Nearly 80% of displaced Yezidis report experiencing a traumatic event, see Pia Jäger, “Stress and Health of Internally Displaced Female Yezidis in Northern Iraq.” *Journal of Immigrant and Minority Health*, (2019) 21:257–263.

<sup>7</sup> In a 2019 press release, Médecins Sans Frontières notes that, “Even though MSF mental health services in the area [Sinuni, Sinjar district] were scaled up in recent months, they are now overwhelmed and have a waiting list.” In Médecins Sans Frontières, “[MSF warns of mental health crisis among Yazidis in Iraq](#).” [Msf.org](#), 4 October 2019.