

Understanding Trauma Faced by Syrian Refugees: Challenges and Community Solutions

By Meira M. Yasin

When considering vulnerable populations, many groups of people are considered to be at higher risk for adverse outcomes due to their situation, including refugees. The UNHCR defines a refugee as “someone who is outside of his or her country of origin and has a well-founded fear of persecution due to his or her race, religion, nationality, membership in a particular social group, and/or political opinion, and is unable or unwilling to avail him/herself of the protection of that country, or to return there, for fear of persecution.”¹ For Syrian refugees who have experienced trauma, many challenges arise in various phases of their journey as they attempt to flee to neighboring countries of Turkey, Lebanon, Jordan, and Iraq, including the Kurdistan Region of Iraq. According to the American Psychological Association, trauma is defined as an emotional response to a terrible event like an accident, rape, violence, or natural disaster in which the extreme stress overwhelms the ability to cope.² This includes trauma experiences and exposure to risk pre-flight, during their flight, and upon arrival to the country in which they resettle. The aim of this article is to address these risks for Syrian refugees and how they can be better supported upon resettlement.

Pre-flight

For those living in Syria during the war, pre-flight trauma exposure includes air bombardments, shooting, shelling, harassment by militia, death of loved ones, and loss of home.³ Experiencing torture is a significant risk for developing Post-Traumatic Stress Disorder (PTSD). The World Medical Association’s Tokyo Declaration defines torture as “the deliberate, systematic or wanton infliction of physical or mental suffering by one or more persons acting alone or on the orders of any authority, to force another person to yield information, to make a confession, or for any other reason.”⁴ In a study examining the association of PTSD symptoms with torture and other traumatic events among Syrian Kurdish refugees living in Kurdistan Region, Iraq, it was shown that the estimated level of PTSD was between 35-38%, with significant positive correlations between PTSD symptoms with traumatic events and torture.⁵ Torture can lead not only to PTSD, but also to generalized anxiety disorder, clinical depression, somatic disorders, and other psychosocial problems such as loneliness, isolation, and difficulty falling or staying asleep.

For children living in Syria since the war started six years ago, the impact of the war has been devastating on myriad levels. According to estimates by Save the Children, approximately three million

¹ United Nations High Commissioner for Refugees (UNHCR), “Protecting refugees: a field guide for NGOs,” May 1999 (accessed 20 October 2017) <<http://www.unhcr.org/3bb9794e4.pdf>>.

² American Psychological Association, “Trauma and Shock” (accessed 20 October 2017) <<http://www.apa.org/topics/trauma/>>.

³ Maria Hawilo, “The consequences of untreated trauma: Syrian children in Lebanon,” *Public Health Review* 4 no. 1 (2017): 5-10.

⁴ World Medical Association, “WMA declaration of Tokyo – Guidelines for physicians concerning torture and other cruel, inhuman or degrading treatment or punishment in relation to detention and imprisonment,” in *Proceedings of the 29th World Medical Assembly* (Tokyo: World Medical Association, 1975).

⁵ Hawkar Ibrahim and Chiya Q. Hassan, “Post-Traumatic Stress Disorder Symptoms Resulting from Torture and Other Traumatic Events among Syrian Kurdish Refugees in Kurdistan Region, Iraq,” *Frontiers in Psychology* 8 (2017): 241.

children are predicted to be living in areas with high exposure to explosive weapons, two-thirds of the children living in Syria have lost a loved one or had their house bombed or suffered injuries that were war-related.⁶ This leads to children living in a state of toxic stress, with detrimental effects including increases in bedwetting, aggressive or withdrawn behavior, suicide attempts, and increasing number of adolescents in Syria turning to drugs or alcohol.⁷ For families, this leads to increasing challenges as children and adults alike are traumatized without sufficient psychosocial support and mental health services available to treat the large numbers of people suffering from the psychological effects of trauma.

Flight

After leaving the zones of conflict in which they lived in Syria, refugees are then at risk for trauma on their routes to seek safety from the areas of danger in their home country. According to the Refugee Technical Assistance Center, during flight, refugees are “frequently separated from family members, robbed, forced to inflict pain or kill, witness torture or killing, lose close family members or friends, and/or endure extremely harsh environmental conditions.”⁸ This process can take a few days up to several weeks or even months in order to reach areas of safety, during which time refugees may stay in several different refugee camps in several different areas. Children and adolescents who travel with family have any extra layer of safety. However there are children and adolescents who travel unaccompanied and are thus at much higher risk of dehydration, robbery, kidnapping, rape, extortion, human trafficking, sexual assault, and other forms of violence.⁹ Without the protection of family, close friends, or humanitarian agencies, these children who are unaccompanied minors are also at risk for being forced into manual labor or being taken into detention, further adding to the trauma they have already experienced pre-flight in their home country.

Arrival

Once refugees arrive to the country in which they will be resettling, many challenges arise. Arrival to the host country consists of risks due to “unsafe or otherwise problematic living conditions, non-access to schooling, years of insecurity with uncertain status, multiple moves, parental illness and unemployment, social exclusion, and in the medium- and long-term maladaptation with respect to the cultural norms of the hosting country.” Some refugees may be exposed to violence or threats from people who are local to the host country.¹⁰ It can be challenging for refugees to attempt to learn a new language, adapt to being in a new country, re-establish their sense of identity and how they integrate into the host community, while balancing their day to day activities of daily living. Post-migration stress influences the overall physical and emotional well-being of refugees, thus it is important for the refugees to be supported and feel welcome in their new environment in order to help heal from the trauma they have been through.

⁶ Save the Children, “Invisible wounds: the impact of six years of war on Syria’s children,” March 2017 (accessed 29 October 2017)

<<https://i.stci.uk/sites/default/files/Invisible%20Wounds%20March%202017.pdf>>.

⁷ Ibid.

⁸ Refugee Health Technical Assistance Center, “Traumatic experiences of refugees” (accessed 20 October 2017) <<http://refugeehealthta.org/physical-mental-health/mental-health/adult-mental-health/traumatic-experiences-of-refugees/>>.

⁹ United National Children’s Fund (UNICEF), “Danger every step of the way: a harrowing journey to Europe for refugee and migrant children” (accessed 20 October 2017)

<https://www.unicef.org/emergencies/childrenonthemove/files/Child_Alert_Final_PDF.pdf>.

¹⁰ Hebebrand, J., Anagnostopoulos, D., Eliez, S. et al, “A first assessment of the needs of young refugees arriving in Europe: what mental health professionals need to know,” *European Child and Adolescent Psychiatry* 25, no 1 (2016): 1-6.

Support Efforts

The communities in which refugees resettle play a large role in their success, how they find meaning in life in their new home, and how they reintegrate into society after the trauma they have faced. When people are present in the community, it creates a sense of welcome, and the refugees feel like they are part of a larger network rather than remaining isolated. It is essential for communities hosting refugees to learn what the needs are instead of making assumptions. One such opportunity for integration of refugees is through community gardens, which have been shown to build community and community connections.¹¹ In addition to resettlement agencies helping refugees upon arrival, the larger community can play a role in supporting the refugees in learning the new language, providing transportation and employment opportunities, and creating communities which foster co-existence. An example of this can be seen in the community of Clarkston, Georgia, home to refugees from all around the world. Refugee Coffee Company is a solution to integrating refugees in the community through creation of employment and job-training opportunities to resettled refugees, to create a unique, welcoming gathering place in Clarkston, and to tell a more beautiful refugee story to Atlanta.¹² This is a way for refugees to not only have the opportunity to integrate into the society, but for the local community to help the refugees feel more supported and welcome in their new home.

One of the greatest ways to support refugees resettling in a new country is through organizations, school, and community support systems that are trauma-informed. According to the Substance Abuse and Mental Health Services Administration, a program, organization, or system that is trauma-informed 1) Realizes the widespread impact of trauma and understands potential paths for recovery; 2) Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; 3) Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and 4) Seeks to actively resist re-traumatization.¹³ Schools in which Syrian refugee children are enrolled should be trauma-informed in order to understand that challenges that these children face and how they can be better supported. Organizations working with children and their families can learn to recognize the signs that indicate children have been through trauma, in order to help provide better care and refer the refugee children to appropriate mental health community resources.

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¹¹ Harris, N., Rowe Minniss, F., and Somerset, S., "Refugees Connecting with a New Country through Community Food Gardening," *International Journal of Environmental Research and Public Health* 11 no. 9 (2014): 9202–9216.

¹² Refugee Coffee Company, "About Us" (accessed 29 October 2017) <<http://refugecoffeeco.com/about/>>.

¹³ Substance Abuse and Mental Health Services Administration, "Trauma-Informed Care and Trauma-Specific Interventions," 14 August 2015 (accessed 29 October 2017) <<https://www.samhsa.gov/nctic/trauma-interventions>>.

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