

# Shattered Lives: Understanding the Mental Health and Psychosocial Needs of Women and Children in Northwest Syria

*A closer look into the mental health impact of war, violence and displacement in northwest Syria, while significant gaps and limitation continue to impact the MHPSS response*



**Half of those living in the northwest of Syria are reported to be girls and boys; with the wide majority experiencing symptoms of PTSD after being born and raised in conflict setting.**  
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## INTRODUCTION

More than a decade of war in Syria has exposed women, girls, men and boys to violence, trauma and multiple displacement along with extremely harsh living conditions. This is the case in the northwest of the country where 2.8 million Syrians remain internally displaced and in need of humanitarian assistance.<sup>1</sup> Half of those living in this region are reported to be girls and boys; with the wide majority experiencing symptoms of PTSD after being born and raised in conflict setting.<sup>2</sup> According to the World Health Organization (WHO), one in 10 people are living with a mild to moderate mental health condition in Syria, while one in 30 are likely to suffer from more severe conditions that can have a crippling impact on their daily lives.<sup>3</sup> Meanwhile, an estimated 75% of already vulnerable persons living with mental health conditions receive no treatment at all.<sup>4</sup> As a result, a protracted mental health emergency is unravelling with worrying symptoms particularly observed among displaced women, girls and boys.

Half of Syria's children have known nothing but violence and war, growing up in one of the most dangerous places for a child. They live in constant fear for their lives and are at constant risk of grave violations being inflicted on them. Child casualties are among the highest in modern conflicts; attacks on education and healthcare are the most consistently pervasive globally since 2014.<sup>5</sup> UNICEF estimates that one child has been injured or killed every eight hours on average during the past 10 years of conflict.<sup>6</sup> Domestic violence, forced and early child marriage are also prevalent among women and girls in particular,<sup>7</sup> while the ongoing COVID-19 pandemic has further exacerbated their vulnerabilities and mental health. As a result a higher number of girls are being forced into early marriage in the northwest of Syria.<sup>8</sup> Meanwhile, the protection and health sectors remain largely underfunded. According to a recent October 2021 funding gap analysis for northwest Syria, only 9% of required funds were secured for the health response so far, with more than 2.5 million people affected by funding shortages, compared to 66% of protection funds being secured with 0.6 million people affected by funding gaps.<sup>9</sup>

<sup>1</sup> <https://reporting.unhcr.org/sites/default/files/UNHCRCross-Border%20Humanitarian%20Response%20Fact%20Sheet%20-%20North-west%20Syria%20-%20August%202021.pdf>

<sup>2</sup> <https://reliefweb.int/sites/reliefweb.int/files/resources/ptsd%20report%20-%20final.pdf>

<sup>3</sup> <http://www.emro.who.int/syria/priority-areas/mental-health.html>

<sup>4</sup> <http://www.emro.who.int/syria/news/who-supported-mobile-teams-deliver-mental-health-care-in-syria.html>

<sup>5</sup> <https://www.wvi.org/emergencies/syria-crisis-response/syria10/cost-conflict-syrias-children>

<sup>6</sup> <https://news.un.org/en/story/2021/03/1087212>

<sup>7</sup> <https://www.wvi.org/sites/default/files/2020-07/Stolen%20Future-War%20and%20Child%20Marriage%20in%20Northwest%20Syria-Online.pdf>

<sup>8</sup> <https://www.humanium.org/en/an-alarmed-rise-in-child-marriage-among-syrian-refugees-in-lebanon/>

<sup>9</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/funding\\_gap\\_analysis\\_all\\_clusters\\_2021\\_q4\\_14\\_october\\_2021.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/funding_gap_analysis_all_clusters_2021_q4_14_october_2021.pdf)

From 28 September to 5 October 2021, World Vision's Syria Response (WVSR) team interviewed 16 Mental Health and Psycho-social Support (MHPSS) staff, including WV staff and colleagues from 6 Syrian-led Non-Governmental Organizations (NGOs) working in the northwest.<sup>10</sup> They painted a bleak picture, voicing concern about intensifying mental health needs – particularly among women, girls and boys – while funding gaps and the ongoing COVID-19 pandemic have only added to the challenges of their daily response.

## I. PROTECTION CONCERNS IMPACTING WOMEN AND CHILDREN'S MENTAL HEALTH IN NORTHWEST SYRIA

### a. *Women and girls still bearing the brunt of the ten-year conflict*

The wide majority of WV MHPSS staff interviewed for this policy brief listed domestic violence and socio-economic problems as principal factors impacting women's mental health and wellbeing, in addition to the conflict inflicted stressors they have been experiencing for years. Both issues are closely intertwined in the current context of northwest Syria where recurring economic challenges negatively impact dynamics within the household, often resulting in a prevalence of harmful coping mechanisms such as domestic violence, child neglect, as well as forced early marriage and child labor.

Employment opportunities remain very few due to the ongoing war and economic crisis currently impacting the country and wider region.<sup>11</sup> Domestic violence is also widespread: A May 2020 assessment conducted by WV in northwest Syria confirmed that women and girls faced high rates of domestic violence, verbal violence, emotional violence, and economic vulnerability.<sup>12</sup> As a result, they experienced psychological distress and social problems such as divorce that only added to their isolation and fear,<sup>13</sup> while also stripping them of their agency to decide for themselves. Other stressors observed by MHPSS teams working with women include sexual harassment, poor living conditions and the lack of privacy in overcrowded IDP camp settings.



Jameela\* is a 17-year-old internally displaced Syrian girl. She attends psychosocial support sessions to learn how to deal with negative emotions. After attending the sessions, Jameela feels happier and less anxious. ©Ihsan Relief and Development

Female-headed households, divorced or widowed women, and women living with disabilities were identified as extremely vulnerable by MHPSS staff. The socio-economic barriers they faced were amplified due to movement restrictions and the harmful stigma linked to women lacking a male guardian. As a result, they become more vulnerable to exploitation and abuse as well as harassment by male relatives or members of their community. The MHPSS staff responding to vulnerable women's needs in the northwest have also witnessed a growing number of women and girls becoming involved in degrading jobs such as smuggling and sex work due to lack of other viable options. In fact, WV's June 2020 *Stolen Future* survey found that 53% of female respondents believed that fear of sexual exploitation, abuse and kidnapping were primary drivers of forced early marriage in their communities.<sup>14</sup>

*“Widows and women with disabilities are particularly vulnerable and we always try to support them through our activities. For example, we met a widowed woman in the IDP camps in Idlib who was being verbally abused and overworked by her in-laws. This was really affecting her mental health so we coordinated with camp management to provide her with her own separate tent. We also met a blind woman who was physically beaten by her husband because she was unable to do any of the daily chores he was requiring her to do such as laundry for example. We decided to provide them with cash assistance, a semi-automatic washing machine and disability awareness sessions in order to decrease the tensions within the household.”* – said a PSS project coordinator working for a local partner in Idlib.

<sup>10</sup> Partner organization's names are not included to ensure full confidentiality

<sup>11</sup> <https://www.csis.org/analysis/syrias-economic-collapse-and-its-impact-most-vulnerable>

<sup>12</sup> <https://www.nolostgeneration.org/media/881/file/stolen-future-war-and-child-marriage-in-northwest-syria.pdf>

<sup>13</sup> Ibid.

<sup>14</sup> Ibid.



Girls are particularly vulnerable to protection issues in the northwest of Syria, including forced early marriage and sexual and gender-based violence (SGBV). According to WV local partner's PSS Coordinator, increased poverty, recurring displacements, instability, lack of education opportunities and the risk of sexual harassment in IDP camps are leading many parents to marry off their daughters at a young age. ***"I met the mother of a 12-year-old girl in Idlib who was planning to marry her daughter off by the time she reached 13 years of age. She was very afraid that her daughter would be sexually harassed on her way to school from the IDP camp. She had many other children and was also worried about being able to provide for her. Therefore, early marriage was her only option to secure her daughter's future,"*** – they said.

In addition to causing significant harm at the socio-economic level,<sup>15</sup> child marriage also presents many mental health challenges. According to WV's *Stolen Future* study: "Adolescence is a vulnerable age group that is often characterized by heightened physiological response to stress compared to children and adults, culminating in psychiatric problems throughout development and into adulthood. Many adolescents forced to marry face both harrowing and distressing realities. They are struggling to get by, sometimes taking their own life."<sup>16</sup> Between January and April 2020, WV spoke to 626 adolescent girls and boys, families, caregivers and community leaders in northwest Syria to understand the impact of child marriage on their lives.<sup>17</sup> Among them, 84% believed that child marriage has increased in Syria as a consequence of conflict.<sup>18</sup> The wide majority of surveyed youth – almost 100% of adolescent girls and 94% of adolescent boys – noted that child marriage has become more common since the start of the conflict, while 71% of all respondents identified conflict and insecurity as the top driver of child marriage.<sup>19</sup>

MHPSS teams faced many challenges when addressing the needs of vulnerable women and girls, the most prominent being:



**The absence of women friendly spaces and safe houses for women and girls who are survivors of abuse or exploitation,**



**The limited availability of specialized mental health services coupled with tailored SGBV services and referral pathways,**



**Concerns about lasting stigma linked to women seeking out mental health and SGBV services in northwest Syria.**

Within this challenging context, MHPSS staff viewed the empowerment of women through psychological first aid, counselling, awareness sessions and vocational training as most beneficial for their mental health well-being. Vocational training and livelihood programs have been particularly impactful as they allow women to regain a sense of purpose, provide them with income-generating skills and improve their economic status in the mid to long term. As a result, this decreases tensions within the household, reduces the risk of domestic violence, in addition to restoring their decision-making and economic power within male-dominated family units and communities.

***"Our vocational program has really helped so many women overcome the pressures of daily life and find a renewed sense of purpose. We provide them with a certificate of accomplishment at the end of the course in addition to a startup kit. Some start their own businesses while others even manage to get jobs as teachers or trainers at other centers because they particularly excel at the skill they have acquired. This also restores their economic power within their household and they will feel more empowered at home."*** – said a WV staff working in Aleppo.



**Providing MHPSS support to young girls and women is key to preserving their mental health wellbeing and restoring their sense of self, particularly through awareness sessions and vocational programs. ©Action for Humanity**

<sup>15</sup> <https://www.unicef.org/jordan/media/1796/file/Jordan-Reports.pdf>

<sup>16</sup> Ibid.

<sup>17</sup> <https://www.nolostgeneration.org/media/881/file/stolen-future-war-and-child-marriage-in-northwest-syria.pdf>

<sup>18</sup> Ibid.

<sup>19</sup> Ibid.

## World Vision and partners' MHPSS Impact in northwest Syria:

Problem Management (PM+) interventions provided by WV and partners particularly impactful among women who are survivors of abuse. Each intervention consists of five individual sessions that help them better manage the daily issues causing them stress, anxiety or depression through the adoption of stress management and relaxation techniques.<sup>20</sup> The sessions encourage a variety of problem solving approaches and techniques which ultimately lead to an improvement in their overall wellbeing. As a result, the PM+ program empowers SGBV survivors and improves their mental health.<sup>21</sup> More than 158 female SGBV survivors have received PM+ interventions in northwest Syria with the help of counsellors who participated in intensive training from PM+ Master trainers certified by WHO.<sup>22</sup>

World Vision is also running a vocational training program in Azaz as part of its MHPSS activities where more than 65 women receive training each year on income-generating skills such as sewing, stitching or hairstyling. The program focuses on vulnerable women and survivors of GBV in particular. Once they finish their three-month course, they are provided with a startup kit that can help them launch their own business and generate income. For example, the women who followed the sewing course receive a sewing machine and some fabric to launch their business from home.

### **b. An entire generation of girls and boys – and their parents – negatively impacted by prolonged exposure to violence**

Child neglect, forced early marriage, child labor and lack of educational opportunities were the main protection issues impacting girls' and boys' mental health wellbeing according to MHPSS staff interviewed. Boys and girls living with physical, intellectual or psychological difficulties were also identified as particularly vulnerable in northwest Syria as very few psycho-social and educational opportunities

were available for them, placing them at increased risk of isolation and abuse. A 2018 survey by Syria Relief had in fact highlighted that 81% of children living with disabilities in Syria did not have access to educational opportunities in their area of residence.<sup>23</sup>

Low literacy rates and absence of awareness on essential topics such as Sexual and Reproductive Health (SRH) were also identified by MHPSS staff as major social barriers among youth in northwest Syria. This is particularly the case for young girls who are often deprived of an education and married young.<sup>24</sup> According to WV's *Stolen Future* study: "Early marriage can result in significant physical and psychological harm. This includes early pregnancy and birth complications; increased gender-based violence, domestic and intimate partner violence; early withdrawal from education; illiteracy and reduced self-protection capacity, including sexual and reproductive health knowledge; significant mental health and psycho-social challenges; and multidimensional, often intergenerational poverty."<sup>25</sup>

According to MHPSS teams, a great number of young children experienced behavioral problems such as hyperactivity, increased shyness, aggressive behavior and difficulties forming social bonds due to long term exposure to conflict and instability. A recent review of MHPSS activities in Syria published in April 2021 defined childhood toxic stress as "a long-term state that be differentiated from normal levels of stress or from a singular traumatic event – wherein the child experiences prolonged exposure to adversity, including any form of emotional and physical abuse, neglect, chronic caregiver distress or illness, prolonged exposure to violence, the absence of reliable adult support systems when needed, and general instability generated through conflict."<sup>26</sup> The study also confirmed that younger children – ages 4 to 9 – were more impacted by lower or abnormal socialization.<sup>27</sup>

MHPSS staff interviewed for this brief also noticed that many of their young beneficiaries' behavioral problems and difficulties socializing stemmed from some degree of neglect within the household, in addition to displacement, difficult living conditions and negative coping mechanisms adopted by parents who are also dealing with high levels of stress. According to MHPSS staff, involving girls and boys in physical activities such as sports and encouraging them to work in groups to achieve a common goal allowed them to form social

<sup>20</sup> <https://www.nolostgeneration.org/stories/addressing-traumas-gender-based-violence-survivors-northwest-syria>

<sup>21</sup> Ibid.

<sup>22</sup> Ibid.

<sup>23</sup> [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/assessments/syria\\_relief\\_report\\_children\\_with\\_disabilities\\_in\\_syria.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/assessments/syria_relief_report_children_with_disabilities_in_syria.pdf)

<sup>24</sup> <https://www.nolostgeneration.org/media/881/file/stolen-future-war-and-child-marriage-in-northwest-syria.pdf>

<sup>25</sup> Ibid.

<sup>26</sup> Raslan, N., Hamlet, A. & Kumari, V. Mental health and psychosocial support in conflict: children's protection concerns and intervention outcomes in Syria. *Confl Health* 15, 19 (2021). <https://doi.org/10.1186/s13031-021-00350-z>

<sup>27</sup> Ibid.

### World Vision and partners' MHPSS Impact in northwest Syria:

The prevalence of child marriage also means that many young parents are lacking the needed parenting skills to nurture their children. As a result, stress is often unwillingly transmitted by parents to their children in what some experts describe as inter-generational trauma.<sup>28</sup> Adolescents who experience a long exposure to conflict are also more prone to developing aggressive behaviors.<sup>29</sup> In order to address this, WVV has established a Life Skills Program for youth whose ages range from 16 to 22, many of whom are already parents. The program spans from 8 to 10 weeks and focuses on key social skills, such as respecting others, communicating effectively, practicing good hygiene and positive parenting skills.

The program also includes a social initiative project at the end of each course where youth can choose to give back to their community by organizing a benevolent activity such as cleaning the streets near IDP camps or painting school walls. According to WVV's staff working in Aleppo, these activities give the young graduates a sense of purpose and solidify their bonds with their communities. It also encourages them to give back by teaching other youths, and even younger siblings, the skills that they have acquired during the program. The program also improves the overall mental health of young parents and decreases their anxiety levels. It helps them acquire key positive parenting skills so that they can mitigate the stressors of raising their children in the ongoing conflict environment with the support of their families.

bonds and gradually overcome behavioral barriers. Weekly group activities gave them a sense of belonging and encouraged them to adopt positive behaviors while also allowing them to establish new friendships. For boys who had experienced trauma, sports were particularly beneficial in teaching them to control their tempers and regain their social skills by building lasting bonds with fellow teammates.

As for girls, they were particularly empowered by sports activities that enhanced their physical and mental strength and helped them regain confidence, particularly

after undergoing difficult events such as early marriage, sexual harassment or domestic violence for example.

## II. MENTAL HEALTH CHALLENGES AND INTERGENERATIONAL TRAUMA AMONG WOMEN AND CHILDREN IN NORTHWEST SYRIA

### a. **Widespread anxiety, depression and symptoms of PTSD among women**

Among the handful of organizations who provide specialized mental health services – including individual counselling, psychological and psychiatric sessions – the majority identified anxiety and depression as the main conditions impacting women in northwest Syria. A 2019 study conducted among Syrian refugees in the Kurdistan Region of Iraq (KRI) had in fact confirmed that women who experienced conflict and displacement were more likely to report symptoms of depression and anxiety compared to men.<sup>30</sup> According to MH staff, recurring displacement, socio-economic difficulties and increased exposure to violence and abuse are the main factors impacting women's mental health, particularly in IDP camps in the northwest where overcrowding and lack of privacy do not allow women the needed space to overcome these difficulties.

*“The women we counsel are very worried about their future and the future of their children in particular. Vulnerable women -- such as widows -- worry about being able to put food on the table for their children and protect them from harm in this unstable environment. For example, some mothers fear they won't be able to protect their daughters from sexual harassment in the IDP camps where they often reside in makeshift tents. These concerns cause them severe anxiety and stress, which can also lead to symptoms of depression in the longer term.”* – said a WVV local partner's MHPSS Manager in Idlib.

According to MHPSS staff working in northwest Syria, poor mental health outcomes are also adversely affecting women's parenting approaches. As a result, mothers are increasingly resorting to yelling and beatings when disciplining their children as an outlet to their anxiety and stress, while often expressing guilt to MH counsellors afterwards. A MH Counsellor from a local partner organization working in Idlib governorate,

<sup>28</sup> [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(19\)30107-0/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(19)30107-0/fulltext)

<sup>29</sup> <https://conflictandhealth.biomedcentral.com/articles/10.1186/s13031-021-00350-z#citeas>

<sup>30</sup> <https://link.springer.com/content/pdf/10.1186/s13031-019-0238-5.pdf>





recalled the case of a 27-year-old widowed mother of three who was residing in Idlib's IDP camps where she shared a tent with her in-laws. According to the counsellor, the woman was under a lot of stress because of the financial burdens faced by the family and the deteriorating relationship with her in-laws following her husband's death. The young mother admitted to frequently losing her temper with her children and beating them over small things. Disciplining them represented the only outlet for her. The counsellor later helped her better manage her anxieties and stress through regular debriefing sessions. She also encouraged her to adopt solution-oriented thinking and positive parenting techniques which would preserve her mental health as well as her children's wellbeing in the long-term.

WV local partner's MH Program Supervisor from northwest Syria also highlighted that some women suffered from symptoms of Post-Traumatic Stress Disorder (PTSD) as a result of prolonged exposure to violence, with a particular prevalence among women who were subjected to torture or sexual violence in detention, violence and insecurity during displacement, or even recurring domestic violence within the household. This often results in women maintaining a bleak outlook on life and makes them unable to address daily tasks, such as providing for their children. In fact, a March 2021 report published by Syria Relief

estimates that 99% of internally displaced Syrians in Idlib suffered from symptoms of PTSD, compared to 76% of Syrian refugees in Turkey and 74% of Syrian refugees in Lebanon.<sup>31</sup> During the interviews conducted for this policy brief, a Protection Coordinator working for another local partner, recalled the case of a 45-year-old mother who had fled her village in Idlib following intense bombing. She became traumatized after witnessing one of her younger siblings being severely wounded by shrapnel. Her PTSD symptoms made it very difficult for her to keep up with daily chores and provide for her children who were being severely neglected. She was referred to a psychiatrist for specialized treatment and so that her symptoms could be alleviated with the help of medication and further support from her family. She is now able to take better care of herself and her children with the support of her family and doctor.

Enduring contextual limitations and shortcomings linked to the MH response are also translating into higher rates of suicide and attempted suicide in northwest Syria. According to a statement released by Save the Children in April 2021, there were 246 suicides and 1,748 suicide attempts recorded in the last three months of 2020, with suicide rates jumping by 86% compared to the first three months of the year.<sup>32</sup> A July 2021 rapid assessment conducted by IRC in northwest Syria also revealed that 87% of those surveyed had heard of suicides in their communities with 77% of respondents saying it was

<sup>31</sup> <https://reliefweb.int/sites/reliefweb.int/files/resources/ptsd%20report%20-%20final.pdf>

<sup>32</sup> <https://reliefweb.int/report/syrian-arab-republic/north-west-syria-number-suicide-attempts-and-deaths-rise-sharply>

due to severe depression and mental health issues and 67% saying it was due to domestic violence – specifically against women.<sup>33</sup> A MH counsellor working for one of WV's local partners, who was interviewed for this policy brief, recalled counselling a 32-year-old woman from Idlib who had already attempted suicide more than twice by consuming a large amount of prescription pills. She was suffering from domestic violence at home as her husband was becoming increasingly abusive due to the pressures of displacement and unemployment. The MH counsellor was able to establish a safety plan with the young woman and taught her some relaxation techniques while also liaising with her husband about her mental health needs. The woman's condition improved following individual and family counselling sessions, in addition to consultations with a psychiatrist. A gender analysis published by WV in March 2020 confirmed that women and girls in northwest Syria had witnessed a rise in interpersonal violence because of the stresses of the ongoing conflict, displacement and dire economic situation they were facing. Even though they did stress that domestic violence was prevalent before the start of the conflict, in their opinion, the current difference was that there are very few safe spaces for women and girls to resort to during the war.<sup>34</sup>

### **b. Poor mental health impairing children's development and quality of life**

Children do not process emotions similarly to adults, poor mental health resulting from exposure to traumatic events will often translate into behavioral challenges that prevent them from leading productive lives. A MH counsellor working at a hospital facility supported by one of WV's partners in Idlib confirmed that bedwetting was particularly common among children in the northwest. They sometimes received up to 20 cases per day with children's ages ranging from 5 to 12 years. *"Most of the bedwetting cases that we see stem from child neglect as families in the northwest continue to live in extremely harsh conditions and are under a lot of stress. Sometimes, bedwetting symptoms can also be linked to trauma or abuse. We try to help the parents and their children by setting goals for the child and rewarding them when they manage not to wet themselves during the night for example. We try to give them our full attention and understand the real issues behind the bedwetting. Sometimes families lack access to sanitation facilities which can have a negative impact on the child's development."* – they said.

The various stressors linked to prolonged exposure to conflict in Syria also have a direct impact on children's development and their ability to enjoy fulfilling and productive lives in the long term, particularly if they are struggling with symptoms of PTSD.<sup>35</sup> According to SAVE the Children's 2017 *Invisible Wounds* study, daily exposure to traumatic events can lead to a rise in long-term mental health disorders such as major depressive disorder (MDD), separation anxiety disorder (SAD), overanxious disorder (OAD) – and post-traumatic stress disorder (PTSD).<sup>36</sup> A MH counsellor working at a health facility supported by one of WV's local partners in Idlib shared that children who experience traumatic events will often portray emotional imbalance, have trouble sleeping due to recurring nightmares, suffer from memory loss and face difficulties when socializing with others. *"Last year, I counselled a 12-year-old boy who had witnessed his cousin dying during a bombing in Idlib. He was crying a lot, even in the middle of a normal conversation, he could not control his tears. He was also forgetful and suffered from short term memory loss due to the trauma he had experienced. I taught him some relaxation techniques so that he could express everything he saw and heard that day and process his trauma... He is slowly regaining his confidence and social skills..."* – they said. Syria's Humanitarian Needs Overview (HNO) also confirms that significant psychological trauma is evident in survivors of explosive incidents seeking mental health and psychosocial support.<sup>37</sup>



Seven-year-old Joleen\* lost her mother after their home was shelled. This deeply affected her mental health and overall wellbeing. She enrolled in psychological support sessions where she learns to cope with negative emotions and is provided with the care she needs. ©Ihsan Relief and Development

<sup>33</sup> <https://www.rescue.org/press-release/new-nw-syria-data-finds-rise-suicides-needs-rise-and-un-security-council-vote-cross>

<sup>34</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/book%20world%20vision%20%20logo%20print\\_compressed.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/book%20world%20vision%20%20logo%20print_compressed.pdf)

<sup>35</sup> <https://i.stci.uk/sites/default/files/Invisible%20Wounds%20March%202017.pdf>

<sup>36</sup> Ibid.

<sup>37</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/syria\\_2021\\_humanitarian\\_needs\\_overview.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/syria_2021_humanitarian_needs_overview.pdf)

Long term exposure to traumatic and violent events has an impact on children's education. MHPSS staff confirmed that many students experienced hyperactivity, behavioral issues and difficulties concentrating in school. A MH counsellor from a local NGO recalled meeting an adolescent girl residing in Idlib who was demonstrating aggressive behavior in school and was suspended by her teacher because she was stealing school supplies. After discussing the issue with the student and her parents the counsellor understood that the young girl was particularly worried about her parents' deteriorating socio-economic situation. As a result, she was engaging in aggressive behaviors at school and stealing school supplies with the aim of selling them to provide her family with income. *"She loved school and was extremely bright, but due to increased life pressures, she was having trouble distinguishing between right and wrong and resorted to negative coping behaviors. We worked together on social skills and I also referred her to our protection colleagues for cash assistance so that she could continue her education."* – they said.

UNICEF estimates that nearly five million children were born inside Syria over the past 10 years of war.<sup>38</sup> *"When we receive children who are 7, 8 or 9 years old, we understand that they have known nothing but war throughout their lives."* said a local partner's MHPSS manager from Idlib. More worryingly, suicide attempts are increasing among children, with SAVE the Children reporting in April 2021 that almost one in five of all recorded suicide attempts and deaths in northwest Syria were children during the last three months of 2020.<sup>39</sup> According to a Protection Coordinator from northwest Syria, psycho-social activities can also help children overcome symptoms of trauma through socialization activities. *"We try to integrate children with mild symptoms of PTSD into groups so that they can acquire stability and security. We also equip parents with the skills to become more attentive to their children's specific needs, particularly if they have experienced trauma. It is very difficult for parents in northwest Syria to provide their children with enough affection or attention because they are also trying to survive under a great deal of socio-economic pressure..."* – they said.

### III. OPERATIONAL CHALLENGES AND IMPACT OF THE COVID-19 PANDEMIC

Mental health (MH) providers in northwest Syria continue to face immense challenges when striving to address growing needs on the ground. According to the MH staff interviewed for this policy brief, barriers include:



The availability of very few secondary health care facilities providing specialized mental health services, psychiatric services in particular;



The absence of qualified MH staff – psychologists and psychiatrists in particular – who can diagnose and treat symptoms of PTSD;<sup>40</sup>



Occasional shortages of psychiatric drugs which are mostly available at secondary health care facilities;



Loss of follow up with patients who could not afford transportation to MH facilities that are sometimes as far as 20-40 km away, while mobile clinics only provide basic counselling services. Many MH patients also continued to face recurring displacements due to ongoing violence, often resulting in a loss of follow up and potential relapse;



Lastly, funding gaps were also highlighted as a primary barrier for the response. MH staff stressed on the need for long-term funding for comprehensive MH interventions in northwest Syria which require durable investment in the patient's well-being. According to MH staff, short-sighted interventions linked to short-term funding schemes often resulted in more harm than good, particularly when addressing the needs of vulnerable women and children who are survivors of abuse and require long term care.

<sup>38</sup> <https://news.un.org/en/story/2021/03/1087212>

<sup>39</sup> <https://reliefweb.int/report/syrian-arab-republic/north-west-syria-number-suicide-attempts-and-deaths-rise-sharply>

<sup>40</sup> In a 2017 report, SAVE the children estimated that in some areas of Syria there was just one psychiatrist available for over 1 million people. <https://i.stci.uk/sites/default/files/Invisible%20Wounds%20March%202017.pdf>



## **Impact of the COVID-19 pandemic on the MHPSS response in northwest Syria**

The COVID-19 pandemic only added to the protection risks faced by women and children in northwest Syria, increasingly isolating them due to movement restrictions, and intensifying the risks of negative coping mechanisms such as child labor and child marriage.<sup>41</sup> The majority of MHPSS staff interviewed for this policy brief confirmed switching to remote activities over the phone during outbreak peaks, while also sharing educational and awareness videos over WhatsApp.

The spread of COVID-19 made it more challenging for MHPSS staff to hold group counselling sessions as they had to organize smaller group activities and shorter sessions that were not as effective. Access to IDP camps was also challenging especially when COVID-19 clusters were apparent. This left many already vulnerable women, girls, and boys without appropriate access to MHPSS support for weeks at a time. Some IDPs lacked the means to buy phone credit and could not follow up with their counsellor or support group regularly over the phone. According to MHPSS staff, increased isolation at the height of the COVID-19 pandemic resulted in severe anxiety and socio-economic pressures contributing to high rates of domestic violence, particularly in overcrowded IDP camps.

Many MHPSS staff and their team members contracted COVID-19 themselves in the fall of 2021 and had to self-isolate for long periods of time. COVID-19 not only impacted already vulnerable communities in the northwest but also placed a huge burden on the mental health and wellbeing of health care workers often resulting in emotional and physical exhaustion, in addition to psychological stress and burnout.<sup>42</sup> This highlights the importance of mental health debriefings and tailored support for MHPSS staff working in the northwest to ensure quality service provision in the long term.

## **IV. CONCLUSION AND RECOMMENDATIONS**

More than a decade of war in Syria has exposed women, girls and boys to unthinkable levels of violence and instability which have directly impacted their mental health and quality of life. Meanwhile, the COVID-19 pandemic has only added to the hardships faced by displaced families in the northwest, increasingly isolating them from essential protection and health services, and giving way to negative coping mechanisms such as domestic violence, child labor and early forced marriage.

Prioritizing mental health across the board when it comes to the provision of day to day protection and health services is key to addressing the intergenerational trauma that is currently impacting already vulnerable families in the northwest. Improving the quality of life in IDP camps and providing further livelihoods and educational opportunities – for women and girls in particular – is also needed to improve IDPs' mental health and resilience in the mid to long term. Lastly, investing in MHPSS and specialized MH services is essential for the prevention of additional suffering among entire generations of women, men, girls and boys of families who have known nothing but war for the past decade, and who should be able to enjoy a more positive outlook on life and their futures.

### **Donors must:**



Ensure MHPSS services – and adapted SGBV referral pathways – are integrated across the Humanitarian Response Plans for the long term, including in the Refugee, Resilience Regional Plan responding to the Syrian crisis.



Guarantee MHPSS services and referral pathways are included at all educational levels while also investing in training for teachers to identify the early signs of MH difficulties among children, especially those stemming from extremely vulnerable contexts and families such as young girls at risk of early marriage.



Invest in further vocational trainings for vulnerable women who are survivors of SGBV, in addition to support groups for young parents, which have shown to have a positive impact on their mental health.



Ensure funding for critical women and child protection interventions comes hand in hand with the COVID-19 response plan in order to mitigate the MH impact of the ongoing pandemic.



Integrate MHPSS activities within existing funding plans for primary and secondary health facilities across the northwest, with a particular focus on maternal and child facilities.



Expand the MHGap programs to include a larger number and variety of health professionals' profiles particularly in rural areas, while also equipping them to diagnose and treat symptoms of PTSD.

<sup>41</sup> <https://www.wvi.org/sites/default/files/2020-07/Stolen%20Future-War%20and%20Child%20Marriage%20in%20Northwest%20Syria-Online.pdf>

<sup>42</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/syria\\_2021\\_humanitarian\\_needs\\_overview.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/syria_2021_humanitarian_needs_overview.pdf)

## Humanitarian actors must:



Expand MHPSS activities for girls and boys across education, child protection and health sectors, while also linking them to the durable solutions framework.



Invest in capacity building for MHPSS staff to enable them to identify and address a variety of MH and behavioral issues among children and women, with a focus on symptoms of PTSD.



Strengthen referral pathways for women and girls who are survivors of SGBV in order to link them with key educational and livelihoods programs which can also improve their mental health.



Include and strengthen MHPSS services as part of primary and secondary healthcare service, while also investing in mobile services in order to reach rural or isolated areas.



Expand on vocational training programs for women and support groups for young parents to equip them with the problem-solving tools that will enable them to mitigate the stressors of daily life in northwest Syria.

\* The names of children and youth mentioned in this report have been changed to safeguard their privacy.

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For more information please contact:

Rawan AbuKhadra, Protection and Gender Adviser at WVSR:  
[rawan\\_abukhadra@wvi.org](mailto:rawan_abukhadra@wvi.org)

Alexandra Matei, Advocacy and Communications Director at WVSR:  
[Alexandra\\_matei@wvi.org](mailto:Alexandra_matei@wvi.org)

Evita M. Jourdi, Advocacy Adviser Consultant at WVSR:  
[evita\\_jourdi@consultant.wvi.org](mailto:evita_jourdi@consultant.wvi.org)



For more information,  
please visit [www.wvi.org/syria-response](http://www.wvi.org/syria-response)



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