

**Addressing Traumas of Syrian Refugee Children Through
Education In Turkey**

By
Leigha MacDiarmid

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Approved : _____
Dr. Anthony O'Malley
Supervisor

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Abstract

This thesis examines the therapeutic aspect of education that can be pivotal in the rehabilitation of refugee children. The focus of the research is on Turkey and the lack of attention that has been paid to the rehabilitative benefits that education provides for the traumas experienced by Syrian refugee children. Turkey and Non-governmental organizations working in Turkey to help with the Syrian refugee crisis have not made enough of a priority in addressing the widespread trauma the Syrian refugee children have experienced. We argue that education can be used as a method of rehabilitation for the traumas Syrian refugee children have experienced. We also show in this thesis the lack of priority, and funding towards education, and mental health programs during a humanitarian crisis. Furthermore, we show that addressing the traumas of Syrian refugee children is essential in preventing a potentially lost generation of Syrian refugee children. Preventing a lost generation of Syrian children is vital because it is these children who will be tasked with rebuilding Syrian society. However, we show in this thesis that the benefits from education extend from just educating the next workforce. We highlight in this thesis that education helps to provide Syrian refugee children with a sense of normality, provides an escape from the traumas they have experienced, and build a support network of peers. In our recommendations, we advise that Turkey needs to make education for Syrian refugee children more of a priority, so Syrian refugee children do not result in a lost generation.

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I. Introduction

As a result of the Syrian civil war, there is now one of the most significant refugee crisis this half a century has endured. Syrian refugee children are at risk of becoming a lost generation due to the mass trauma and displacement they have endured. For this thesis, the definition of a lost generation is when there is the lack of resources to deal with psychological trauma and behavioral problems, can result in the children unable to obtain a proper education, lessening their chance at having healthy adulthood (Lassen, 2015). The development focus for this thesis will be refugee children and development. The refugee children, the primary focus of this thesis, are essential to examine because they are the ones who are at an increased risk in the conflict significantly altering their course of life. To experience such trauma, loss of any normality, in a formative stage of their life can hurt their development; this in turn, leads to the creation of a lost generation. Addressing the traumas of the lost generation is a vital part because they will be the ones tasked with rebuilding the country once the conflict has ended. However, without the proper tools that the child gains from having a proper education, the children who have grown up in the conflict will be unable to go back and aid in rebuilding of their country.

The main aspects that we will be focusing on are the mental health of Syrian refugee children — specifically looking at how to use education as a method of rehabilitation for the traumas of Syrian refugee children in Turkey. High rates of Post-Traumatic Stress Disorder (PTSD), anxiety, depression, and many other behavioral, emotional, cognitive, and psychological problems all are found within refugee children. Additionally, it has been seen that the longer the conflict goes on and the traumas are at the core of what causes a lost generation. Moreover, it is essential to examine, how and to

what extent they are being addressed. By looking at to what extent the traumas are addressed, education can then be utilized for a therapeutic way for Syrian refugee children to escape their traumas.

When the Syrian refugee crisis began gaining publicity in mainstream media, I became intrigued by the conflict. This is one of the most significant humanitarian crisis in my lifetime and watching the refugee crisis unfold while having more of an understanding of global affairs has been intriguing. Coupled with the thought of children having to suffer mass atrocities has fully grabbed my attention and shifted my focus of development towards refugee crises and the challenges that are faced when attempting to resettle and rehabilitate refugees. The concept of a lost generation is not a new one. From reading literature from the Second World War onwards, a common theme is the fear of a ‘lost generation’ amongst youth who have grown up in the conflict. The question of how to do you help society from losing an entire generation of people is not yet a question that has one specific answer yet. Each conflict creates a new set of dilemmas for asylum seekers. Whether that be from xenophobia to the outright refusal of refugees at the border or an increase in movement along borders, they are questions that need to be further investigated. From reading articles to hearing firsthand accounts of the daily issues refugees face it has always been a development topic that has intrigued me the most.

The research question, this thesis will be examining is: How and to what extent is Turkey addressing the traumas of a potentially lost generation of Syrian refugee children? For this thesis, the primary area of focus is Turkey. The reason for looking at Turkey is because they have one of the highest rates of Syrian refugees, as well they have had increasing funding from the European Union to help with the Syrian refugee crisis. Recent UNHCR reports show that there are 3,564,919 registered Syrian refugees

(UNHRC, 2018). Currently, due to the influx of Syrians coming over the border, there is social prejudice against them. It is essential to understand the pre-existing dynamic between the Turkish people and government with Syrian refugees. This can further look at how it impacts the financing and implementation of aid programs. Looking at the core issues will help to get a full perspective on how or to what extent are the needs of the Syrian refugee children being met.

In the thesis, we will be arguing that education should be used in Turkey as a method of rehabilitation for the traumas in Syrian refugee children. Making education, the main priority for Syrian refugee children in Turkey would bring a sense of normality and stability back into the child's life. Furthermore, education would help to give the Syrian refugee children back a piece of the life they knew in Syria. Education can be therapeutic and used as an escape for the traumas of Syrian refugee children. As well will help the child to continue their education. This, in turn, would help to reduce the risk of a lost generation amongst Syrian children.

Methodology

This thesis will draw from secondary data presented in academic and non-academic articles. For academic articles looking at research conducted by researchers such as Hassan, Lassen, and Dawn to gain more perspective on the academic debate surrounding Syrian refugee children and mental health. Additionally, for this thesis, the data drawn for the research will be from aid programs working within Turkey, as well as the various United Nations (UN) databases, such as the UNHRC, and UNICEF which comprises of detailed accounts of those refugees within Turkey who are registered. Current aid programs set in place in Turkey will be examined to help to gain a better perspective on progress and the pitfalls of those programs and what fundamental issues

they are or are not addressing. Reports from organizations such as the Syrian Association for Mental Health (SAMH), which helps to advocate mental health rights for Syrian refugees as well as examining reports by Mamoun Mobayed the vice president of the NGO SAMH. Finally, this thesis will also be examining various Turkish government documents to examine the current policies, and action plans set in place for refugee children.

This thesis will be structured as follows: Section II will consist of a literature review outlining the core issues surrounding the academic debate on addressing the traumas of Syrian refugee children. Section III will then provide data that is relevant to the core issues that were discussed in Section II Section IV will then be the discussion or analysis of the data and the literature review discussed in previous sections. Finally, Section V will be a summary of all the main arguments and final conclusions.

II. Literature Review

The focus of our thesis is on the provision of education for refugee children, specifically, refugee children in Turkey for use as a therapeutic intervention for traumatized children. Our argument will be that there has been insufficient funding and attention by government and donors to the therapeutic potential that education has for relieving refugee children of trauma. Refugee children require better access to education within host countries, so that education can be used to bring back stability and a sense of normalcy back into the child's life, while aiding the child in creating a new support network of peers. Education can then be utilized as an effective tool to not only aid in the basic learning needs, but also to create an escape for the trauma's that refugee children have endured.

2.1 Refugee Children and Development

A central issue underlying all dimensions of the topic of children refugees is the social disintegration that they have experienced. Social Disintegration is at the root of the trauma that many refugee children experience. Refugee children are processing more than just the loss of their loved ones, but also their community and culture. Moreover, social disintegration that goes untreated can cause long term pathological affects (Eisenbruch, 1988, 282). Social disintegration is then linked to the changing in parenting dynamics, access to health care, cultural loss, and change in the family dynamic. Due to the drastic change to everything the child has known in their life, this leads to widespread trauma amongst the refugee population. Destruction of the society that the child grew up in, can create trauma within the child, impacting their development and chance at healthy adulthood. Due to the fact that the host country can then not recreate a miniature version

of the child's culture within the host country, the question is then posed how do you address social disintegration? Eisenburch (1988) argues that assimilation should not be the focus but rather emphasis on the similarities between children in the classroom (291). This creates an environment that still fosters who they are, but as well can accept their new peers. Eisenbruch explains that it is important to let the child grieve while still reinforcing their cultural identity (293).

A key component to the creation of a lost generation amongst refugee children is unaddressed trauma. Withdrawing from the conflict in itself which creates detrimental impacts on refugee children's development and mental health. The act of migration and post-migration, in of itself can cause high stressors for refugee children. The main demographics affecting mental health are: gender, age, education, and trauma-related factors including degree of exposure to trauma. Additionally, there are post-conflict factors and daily stressors such as security, lack of income, lack of permanent private housing and social support, high rates of Post-Traumatic Stress Disorder (PTSD), anxiety, and depression, all of which are prevalent in refugee children populations. In Pine, Costello and Masten's (2005) article they find that both the severity of the trauma, as well as the ecology of the child's development needs to be looked at in order to assess their outcome. Another indicator of the level in which trauma will affect the child and how it impacts the child is the death of a member of their immediate family, or direct injury to self (Pine, Costello and Masten's 2005, 1784). Children who are relocated to a refugee camp is labelled as an 'indirect trauma.' Pine, Costello, and Masten argue that it is the trauma within the camp that can leave a lasting impact on the child. However, whether it is indirect or direct trauma though, there is an impact on the child's development,

something which needs to be addressed in order to assure that child have a chance at a healthy adulthood.

When looking at refugee children and development the first main issue that must be addressed is the concept of a so-called lost generation and the impact this will have on society. It is imperative to look at a lost generation of children in order to bring about the future objective of a peaceful society, the subjective conditions of the children who will make up that society must be addressed in the present. If the traumas are not addressed then children who grow up in conflict will see conflict as an effective method of resolving problems. Therefore, to obtain a practical solution for one day creating peace and a better society, there needs to be a focus on the children and how their development has been altered due to growing up in a society where there is conflict.

A prominent issue when looking at the trauma of refugee children is that of assessing what interventions are being set in place in order to aid the children through traumatic experiences. Looking at the aid programs that are set in place for refugee children to help them cope with recent traumas, it is essential to gain a holistic approach by looking at both government programs as well as non-governmental organizations (NGOs). By examining what programs are in place will further help look at the effectiveness of the programs, and see what traumas are not being addressed. The United Nations International Children's Emergency Fund (UNICEF) began examining the benefits of 'peace education' and the rehabilitation effect that education has on refugee children who have experienced trauma. UNICEF outlines peace education as:

The process of promoting the knowledge, skills, attitudes and values needed to bring about behaviour changes that will enable children, youth and adults to prevent conflict and violence, both overt and structural; to resolve conflict

peacefully; and to create the conditions conducive to peace, whether at an intra-personal, interpersonal, intergroup, national or international level. (UNICEF, 1999, i)

Through peace education UNICEF promotes a commitment to peace and social justice. The peace education initiative aids with psychosocial rehabilitation for children who have been affected by war or armed conflicts. These programs are therapeutic and aim to promote self-expression, coping skills, and psychological healing (UNICEF, 1999, 13). Peace education has been seen as effective for helping children recover from PTSD, and learning new ways to cope with the trauma.

An important intervention in this regard are programs that link addressing trauma through education has been a popular method in rehabilitation of refugee children. Education is a pivotal aspect of making sure the generation of refugee children who were born into, or grew up in the conflict do not result in a lost generation. The Convention on the Rights of the Child requires signatory governments to promote free and compulsory schooling at primary level, access to secondary education, and access to tertiary education on the basis of capacity by every appropriate means however, this can prove difficult during a conflict (Sinclair, 2007, 52). Informal schools, run out of homes by volunteers often are the most viable solution; though this does not meet the requirements that the child needs (Sinclair, 2007, 53). Education provides stability and an escape for children from their traumas, and thus has an important dimension that goes beyond learning how to read and write but becomes an important form of therapy for trauma. Refugee schools are used to help refugee children living in camps have access to a formal education (Sinclair, 2007, 53). Moreover, it is essential to look at the curriculum that is taught within the schools. Sinclair argues that the curriculum “should initially be that of the

country or area of origin, to facilitate reintegration after repatriation.” (Sinclair, 2007, 54) Education can be used as a double-pronged approach to providing the proper educational tools that children need for healthy development, as well as be an outlet or method to address the traumas in the child and to teach them healthy coping methods.

Programs are beginning to be set in place for Syrian refugee children. Elliot et al. 2013 article examines the multi-tiered impact that Supporting the Health of Immigrant Families and Adolescents (SHIFA) has on aiding the traumas of refugee children. SHIFA was set up in place to identify and provide mental health services for adolescence refugees. SHIFA works in four tiers, but particularly tier two is focused on child resilience through school based skilled groups (Elliot et al., 2013, 131). Once the problem has been identified there is then intervention is taken in a generalized preventative and resilience-building program (Elliot, 2017, 130). This program then helps the child to build a support network of family, and peers, as well as clinical staff.

2.2 Syrian Refugee Children

To better understand the trauma, and social disintegration of Syria, it is vital to overview the underlying cause of widespread trauma, which is the Syrian civil war. Sirin et al. 2015 outlines the Syrian civil war in the dimensions relevant to our thesis in their important article "The Educational and Mental Health Needs of Syrian Refugee Children." The Syrian civil war is the reason why many Syrian children are now displaced. The war, which began in March 2011, is one of the largest middle eastern conflicts in half a century, and one of vast devastation. The change in the dictatorship in Syria led to political protests within Syria that turned violent, and the violent reaction of the military only heightened the number of street protestors. With growing rates of political opposition, many Syrians began to flee, creating the Syrian refugee crisis. The

bombing of Raqqa by Al-Assad in March of 2013, led to Britain and the United States backing rebel forces. In December of 2013, China and Russia appeared and assisted government forces. (Sirin, Rogers-Sirin, 2015, 2). Additionally, the Islamic State of Iraq (ISIS) has continuously been opposing all other forces and imposes radicalized Islamic ideologies. The United States, Russia, and Turkey have all carried out airstrikes, while national forces, ISIS, and various other rebel groups continue to fight on the ground. The ongoing Syrian civil war has created one of the largest humanitarian crisis in this half of the 21st century.

The Syrian civil war is the primary cause for the social disintegration of Syrian society. The social disintegration within Syria was created by the gravity and scope of the civil conflict, and escalated into a catastrophe which significantly impacted, and displaced many Syrian children. These children have witnessed death and destruction at a young age, they have seen blown out buildings and dead bodies on the street. Witnessing the social disintegration of Syria has created widespread trauma amongst the Syrian population. When looking at human security, there are seven main areas in which the UNDP examines: economic, food, health, environmental, personal, community, and political. The threat of security in all these areas then contributes to the absolute dissolution of the normal structure of Syrian society. The destruction of the education systems within a country can have the most significant impact on children. Lassen argues that the long-term impact of the destruction of the education system in Syria can further devastate training the future generation of the workforce with the skills and knowledge they need to thrive, which can then prolong the effects of the conflict on the economy (Lassen, 2015).

The disintegration of Syrian society is a leading factors for the trauma instilled in Syrian refugee children. The level of trauma which these children have experienced at such a young age is unfathomable. PTSD, anxiety, and depression have all been seen at high rates amongst Syrian refugee children (Sirin, et al., 2015, 2). Furthermore, amongst Syrian refugee children, many of them have higher levels of behavioral or emotional problems, including but not limited to aggression (Sirin, Rogers-Sirin, 2015, 11). These traumas are heightened by the loss of a parent, or the absent of a parent caring for the child during a traumatic time. This is a critical component of understanding both the causation and how to address the traumas of Syrian refugee children. However, due to how recent this conflict is, our understanding of the long-term outcomes of the long-term impact of the traumas experienced by Syrian refugee children is currently limited.

Trauma experienced by the Syrian refugee children is a core factor in the creation of a lost generation of Syrian children. When looking at Syria's potential lost generation, Lassen (2015) states that the longer the conflict, the higher the risk for a lost generation that is shaped by violence, displacement, and lack of opportunity. Mental health problems can cause issues with acquiring a proper education but more resources are required in order to address the emotional and behavioral problems in a child. If these mental health issues then continue into adulthood, they can result in an adult unable to maintain, or frequently quitting, jobs. Thus, in the context of Syrian children, this could further hinder the redevelopment of Syrian society post-war, if the children have limited education and employability skills (Sirin, Rogers-Sirin, 2015, 11). As demonstrated above, the trauma within the Syrian refugee children can turn into lifelong implications coupled with the widespread trauma of the civil war in Syria, this core issue is now at a threatening point of creating a lost generation.

Finally, we turn to the issue of NGO programs for Syrian refugee children, and the current underfunding of The United Nations High Commission for Refugee projects (UNHCR). One NGO that focuses explicitly on the potentially lost generation of Syrian refugees is No Lost Generation (NLG). NLG specifically focuses on aid in neighbouring countries of Syria (Lebanon, Jordan, Turkey, Egypt) focusing on three pillars, education, child protection, and adolescent and youth. This NGO aims to both employ immediate response for the refugee crisis, as well as setting up a strategic framework for long-term aid (Deane, 2016, 2). The UNHCR is a hub for NGO's working and distributing aid to Syrian refugees. With this being the highest number of displaced persons on record (UNHCR, 2018), the UNHCR is becoming increasingly vital for the global community to distribute aid. The current climate amongst NGO's is delivering emergency aid to Syrian asylum seekers in neighbouring countries. Due to the high volume of displaced persons globally, and the level of the Syrian refugee crisis there is an increasingly greater underfunding. Underfunding in this sector will lead to a decrease in living conditions for Syrian refugees, and the number of displaced families will grow (UNHCR, 2018). The underfunding has caused a considerable restriction on the aid that can be administered to Syrian refugee children which contributes to the lack of funding to address the need for mental health, and education programs to be set in place to address traumas. Education specifically is underfunded do to misunderstanding about the impact that education has on the rehabilitation for Syrian refugee children (Sinaria, 2014, 1523). Winterization, shelter, and provision of basic needs are the current focus for the UNHCR (UNHCR, 2018). The underfunding of NGO programs for Syrian refugees has emphasized the risk of a lost generation.

This thesis, however, will primarily be focused on the NGO and aid programs that specifically address mental health, as well as aiding more Syrian refugee children to gain access to education. As previously mentioned in Section 2.1, education is an pivotal aspect of many Syrian refugee children's rehabilitation from the trauma of witnessing the ongoing civil war in their country. Education provides a safe space for refugee children to begin the rehabilitation process from the traumas they experienced (Sinaria, 2014, 1523). After conflict, education acts as an intervention to support and promote the well-being of children after emergencies. The Zaatari refugee camp in Jordan have already begun implementing education as a method of rehabilitation for Syrian refugee children. In Jabbar et al. article found that "educational activities during emergencies provide children with a safe space to begin the trauma-healing process and to learn skills and values needed for a more peaceful future." (Jabbar et. al., 2014, 1523) This thesis will be examining programs such as the Syrian Association for Mental Health (SAMH), established in 2012, and strives to provide mental health workshops for Syrian refugees in neighbouring countries (Abou-Saleh et al., 2015). SAMH is an advocate for Syrian refugees right to mental health and strives to have neighbouring governments to Syria make addressing their mental health more of a priority. The NGO program Back to The Future focusing on getting more Syrian refugee children access to education in Jordan and Lebanon. The Back to the Future focuses on basic education and psycho-social support activities for children.

Other programs have begun to go one step further, and not only focused on rehabilitation but also building up resilience. Resilience building in refugee children can be facilitated through school-based treatments. This treatment then goes beyond an educator referring a child for mental health services. Teachers implementing creative in-

school programs that help to promote a child's hope, resilience, and social competence (Pieloch et al., 2016, 336). By implementing in school programs that target refugee children aids in negating the core issue of underfunding, while still providing aid to address the traumas of Syrian refugee children. Through creative programs such as art being used as self-expression, refugee children showed an increase in self-esteem, and a decrease in emotional and behavioural symptoms at school (Pieloch et al., 2016, 336). Outcomes of similar creative based programs have helped refugee children to be more socially competent, and showed less signs of internalizing symptoms (Pieloch et al., 2016, 337). These programs mentions above strive to emphasis the importance of education for the development of a child, but also the therapeutic value that education has for the traumas of Syrian refugee children.

2.3 Syrian Refugee Children in Turkey

Similar traumas and the threat of a lost generation persist with children who have sought refuge in Turkey. Alpak, et al. (2015) produced a study which looked at the prevalence of PTSD amongst Syrian refugees in Turkey. In this study, they found a direct correlation between the number of traumatic events experienced and the diagnosis of PTSD. The prevalence of trauma triggered mental illnesses causes further complications when looking at the potentially lost generation of Syrian refugee children.

A core issue to look at however is the stigma that is attached to mental health issues and seeking mental health help from a professional. When looking at Syrian refugee children in Turkey, it is crucial to look both at the stigma that is associated with mental health in the Syrian community, as well as within the Turkish community. Mental health is mainly seen as a western value, and although many western NGO's have deemed it a necessity for Syrian refugees, there can still be a negative connotation

attached to mental health in both Syrian and Turkish communities. This negative stigma attached to mental health can then further impact the access that Syrian refugee children have to mental health resources. Additionally, the stigma associated with mental health can inhibit many parents from letting their child receive treatment. The age of consent in Turkey is 17, therefore, children must have a parent sign a waiver giving consent to the child receiving care. However, many parents refrain from giving consent because they do not want their child to be labelled as ‘crazy’.

After reviewing the trauma’s that are prevalent within Syrian children, it is essential to look at the role of the Turkish government and the strides they are or are not taking to deal with the Syrian refugee crisis, specifically with respect to traumas. The migration crisis that Turkey is currently facing is one of the largest in history. Kirisci observes that there needs to be a shift in focus within the government aid programs for Syrian refugees. With the ongoing conflict within Syria, it is evident that the Syrian refugees will be in Turkey for an extended period. This will call for a significant change in the policies and programs set in place to aid refugees. Currently, the programs that are set in place for refugees are predominately short-term and emergency humanitarian aid. However, with the prolonged nature of the conflict there must be a shift in aid programs which focus more on the long-term, and that goes beyond hospitality (Kirisci, 2014, 45). There must be programs in place to help Syrian refugee children have access to the programs needed to prevent a lost generation. The Turkish Government has established migrant health centres for refugees with Syrian medical personnel, but much needed mental health specialists are scarce. In Jordan and Lebanon, Syrian refugees have difficulty accessing health care because of both financial issues and overburdened health systems. In Syria, most medical personnel have migrated to other countries and the health

facilities are targets in the war (Tekeli-Yesil et al., pg.938). Tekeli-Yesil's goes on to say that to address the high rates of mental disorders among Syrians, community mental health services should be developed as part of general health care to provide a faster response and prevent stigma (Tekeli-Yesil et al., pg.944).

Similar to what the Turkish government has provided to aid Syrian refugee children with the trauma they have endured, the NGO response to the Syrian refugee crisis in Turkey has been primarily focused on emergency response. Predominately all the aid programs for Syrian refugee children have been focused on short term, aside from education. NGO's have been working with the UNHCR in Turkey to help Syrian children gain better access to education both in camps and in cities. There has been an increase in access to education for children, the social services are considerably stretched and unsustainable (UNHCR, 2018). In the October 2018, the UNHCR released a report that highlights the aid for Syrian refugee children in Turkey will be focused on: expanding support for education systems, working with the government to include more Syrian children in the national education system, prioritizing refugee children who are 'high risk' and setting in place "supporting networks of active refugee and Turkish youth" (UNHCR, 2018). A high risk child can be defined as an individual under the age of 18 who is at risk of neglect or abuse, who have been abused or neglected, or have serious emotional, mental, or behavioral disturbances. The support networks for active refugee youth, and prioritizing response for high-risk youth are two main initiative that aims at preventing the lost generation. The support networks are being set in place in hopes that it will help youth engage in social cohesion, education, and prevention of child marriages (UNHCR, 2018). NGO's in Turkey have also provided the funding for proper training programs and more counsellors to be employed in schools with a higher population of Syrian refugee

children which helps to give easier access to mental health support to large numbers of traumatized Syrian refugee children (Aras et al. 2016, 8). By prioritizing high-risk youth, will help to create a case management system to support the development the child needs (UNHCR,2018). There is not an action plan employed by the UNHCR that targets explicitly the trauma or mental health of Syrian refugee children, the other plans outlined within the UNHCR report indirectly aid in the prevention of a lost generation.

An important underlying issue that must be addressed when examining the aid being put in place for Syrian Children's mental health is underfunding. According to the UNHCR 2018 report currently in Turkey, education has received the second highest amount of funding, and healthcare, which includes mental health, has the sixth highest funding. The majority of the funding for Syrian refugees in Turkey is coming from UN donor agencies (UNHCR, 2018). As previously mentioned, there must first be a shift in the type of aid being administered by the Turkish government to Syrian refugee children. Once that shift is created there must be further help from the international community in order to aid Turkey with the funding. The European Union's (EU) has already given a significant amount of money to Turkey in an attempt to keep refugees from flooding into the EU, but considerably more funding is needed from international donors.

Most importantly, there needs to be funding for mental health to help with the trauma in Syrian refugee children. With the majority of the funding being allocated for emergency humanitarian aid, there has not been a focus on mental health. This can only have negative outcomes, since not addressing the trauma will only further prolong and make permanent the effects of the trauma on the child. Education can be a way to get around the funding issue. By linking education with rehabilitation of Syrian refugee

children, the funding can then further the impact that aid has on the development and rehabilitation of Syrian refugee children.

We will be emphasizing in this thesis, one often fundamental trauma ‘reliever’ is the child's participation in and access to education. Syrian children arriving in Turkey have already been significantly set behind in school due to the civil war. Trauma that children have endured can lead to cognitive, emotional and behavioral problems, which further gives them a disadvantage (Sirin, Rogers-Sirin, 2015,7). A way to provide access to mental health programs for a large number of traumatized refugee children is through education (Aras et al. 2016, 8). Meeting the educational needs of Syrian refugee children can be an ‘escape’ for the children from the trauma they have endured, and a way to bring back normalcy and stability into their lives. However, education often is subject to being low on the priority list when funding humanitarian aid in conflict areas or surrounding countries. This is due to the sole focus for NGO’s being on survival rather than setting up children for a better future.

Education is widely considered a key aspect of preventing a lost generation. Education provides the tools for children in order to help them know to provide productivity and positivity to society (Lassen, 2015). Additionally, education helps to give hope to refugee children that there is a future out there worth preparing for (Brown, 2016). In Kirisci (2014) article examines the significant questions surrounding how to structure the curriculum of Syrian refugee’s schools, what language should the schools primarily teach. These are difficult questions because it surrounds the primary question, should the Turkish government base Syrian children’s education on the assumption that one day they will return to Syria? Kirisci argues that there should be a hybrid combination within the school curriculum that teaches both the Turkish language, but is

still heavily based around the Syrian schooling system (Kirisci, 2014). Education would then be a way for children to escape the trauma of social disintegration by having one aspect of their culture back. Deane's (2016) article argues that the implementation of education can help reduce the risks of isolation, intra-community tensions, marginalization, and radicalization, all factors which contribute in the creation of a lost generation (Deane, 2016).

III. Data

3.1 Refugee Children and Development

Since World War Two there has been an increase in targeting civilians during conflict. In modern day conflicts, 80% to 90% of casualties are civilians (Lassen, 2015). As a result, this has increased the number of displaced persons during a conflict. Refugee crisis has become the forefront of NGO humanitarian aid missions. In this thesis, we will be primarily focusing on the impact that the lasting traumas from these conflicts have on refugee children, and what actions are being taken in order to rehabilitate refugee children from the traumas they have endured. Over half of the estimated 65 million refugees are children (Watkins, 2016, 7). In Iraq, Turkey, Egypt, Lebanon and Jordan alone there are 2.5 million refugee children residing in these five countries (UNICEF, 2018). 40% of the refugee resettled in the United States are children (Ellis et al., 2012, 129). As emphasized in section 2.1 refugee children are at an increasing risk of trauma due to a lack of stability, no secure source of food, water, and education.

In 2015 everyday 17,000 children fled their homes due to conflict (Khwaja et al., 2017, 51). Children being displaced due to conflict stands blocks 75 million children from being able to access education (ECW, 2017, 5). Children who are in a conflict area are 30% more likely not to finish primary education (ECW, 2017, 10). As a result, all the children displaced by conflict, and unable to get an education are at risk of becoming a lost generation. According to the Human Rights Watch 2017 Global Report, 50% of the 3.5 million refugee children attend primary school, and only 25% of the 1.95 million refugee children attend secondary school (Khwaja et al., 2017, 51). In Cameroon, 6% of

refugee children attend secondary school, in Pakistan and Lebanon 5% of refugee children attend secondary school (Khwaja et al., 2017, 51). The lost earning potential due to the in-access to education is estimated to be in the millions. The Education Cannot Wait program, an initiative run by UN agencies and humanitarian donors, pledge to raise 3.85 billion USD to help give 75 million children, including refugee children, better access to education (Khwaja et al., 2017, 58).

Studies conducted looking at rates of trauma in refugee children conclusively show high rates of trauma related mental illnesses in refugee children. High rates of psychological distress have been reported in refugees from the Middle East, Sub Saharan Africa, Asia, and Europe. Betancourt et al. clinical assessments indicated high rates of probable post traumatic stress disorder 30.4%, generalized anxiety 26.8%, somatization 26.8%, traumatic grief 21.4%, and general behavioral problems 21.4% (Betancourt et al., 2012, 682). Furthermore, elevated rates of PTSD have been shown to last up to 12 years (Kaplan et al., 2015, 84). Additionally, refugee children are more likely to develop PTSD from a traumatic event than adults (Hart, 2009, 355).

The result of the trauma and psychological distresses result in impacting the child's life in various ways. Betancourt et al.'s study found that 53.57% of refugee children had problems in school (Betancourt et al., 2012, 686). Kaplan et al. reports that memories of traumatic events could distract the child from learning, and develop a style of forgetting that dispel the traumatic event but also inhibits spontaneous thought (Kaplan et al., 2015, 85). Betancourt et al.'s study found 44.64% of refugee participants reported behavioural problems in the home, and 47.27% reported behavioural problems in school (Betancourt et al., 2012, 686). The data helps to show the wide variety of trauma and how

trauma is then impacting a refugee child's life. This is essential to the understanding and treatment of the traumas of refugee children.

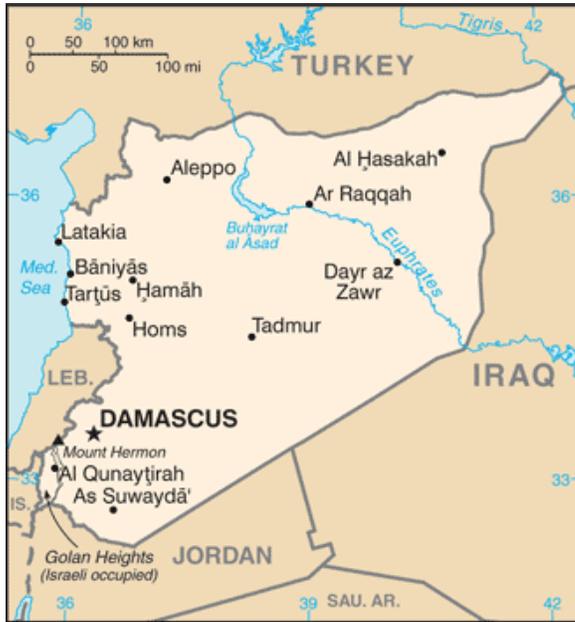
Due to the increasing number of displaced children from conflict NGO's have taken strives to ensure the rehabilitation for refugee children. NGO programs follow along in line with the UN's Sustainable Development Goal number 4 (SDG4), which is focused on securing education for all children. In 2017 UNICEF was able to give 2.8 million children access to psycho-social support, and 5.5 million children had access to formal and non-formal basic education (UNICEF, 2018). UNICEF's latest initiative is Education Cannot Wait (ECW), which works towards making education easier to access for children affected by conflict. Currently ECW has supported 650,000 children who have been impacted by conflict around the globe access to education. ECW has given 75,000 children psychological support (ECW, 2017, 7). ECW has managed to help 650,274 children who affected by conflict access to education, 3,569 teachers recruited or financially supported, and 768 classrooms, or temporary structures built (ECW, 2017, 78). ECW has set out to secure 680,000 refugee children's education between 2018 and 2021, with plans on helping further sustainable development goal 4 (SDG4) by securing education for 75 million children affected by conflict in 2030 (ECW, 2017, 5, 23).

Funding is a main determinant on the ability to aid refugee children. The UN and ECW estimates in order to secure education for all children impacted by conflict, they need would cost US\$8.5 billion. Since 2002 funding for education in developing countries has been on a decline. In 2016, education only received 1.9% of the total humanitarian aid spending (ECW, 2016, 9). As a whole, in 2015 only 10% of aid money was allocated towards education, additionally, less than a quarter of that funding went to countries who host 86% of the refugee population (Khwaja, 2017, 54). In the UNHCR's

2018 funding report, for the year only 45% of the UNHCR budget has been funded (UNHCR, 2018). In 2017, 79%, 6.298 billion of the UNHCR budget went towards refugee programs, 1%, 57.8 million of the budget went towards stateless programs, 5%, 406.4 million went towards reintegration projects, and 15%, 1.200 billion of the budget went towards IDP projects (UNHCR, 2017). When solely focusing on education during emergencies, globally, only 2% of funding goes towards education (Khwaja et al., 2017, 52).

Our main focus for this thesis is the use of education as a therapeutic method for Syrian refugee children. Through education children are able to receive therapeutic or rehabilitation from the traumas they have experienced. Trauma can impact the child's ability to attain information, maintain relationships, and result in poor attendance. Through education ECW has helped to give over 75,000 students psychosocial support in 10 countries (ECW, 2017, 96). Often for refugee children schools can be the first point of stability, security, and emotional containment, they have experienced since having to leave their country. Participation in school promotes life skills, social bonding, security, and fostering of talents (Hart, 2009 365). Policies and initiatives need to be set in place in order to create a safe and welcoming environment for refugee children. Programs within the school that helps to strengthen the child's cultural identity can in turn help the child to celebrate their culture (Lin et al., 2009, 203). This then can help with the child processing their traumas from social disintegration they have experienced.

3.2 Syrian Refugee Children



CIA Factbook

Syria is located in the Middle East, bordering on the countries of Lebanon, Turkey, and Iraq. The estimated population of Syria in 2018 is 19,454,263 (CIA, 2018). Damascus is the capital of Syria, with a population of 2.32 million (CIA, 2018). Though this number is just an estimate to due the high volumes of immigration out of the country. The official language of Syria is Arabic, and the primary religion is 87% Muslim (CIA, 2019). As previously discussed in section 2.2, since 2011 the country has fallen under turmoil due to the civil war. The civil war in Syria has created one of the largest humanitarian disasters in the 21st century. As of December 2018, the UN estimates that 6.2 million refugees were internally displaced and approximately 13 million people are in need of emergency humanitarian aid within the country. The impact of a long-term conflict is: widespread destruction of physical capital and infrastructure, reduced human

capital, disease, displacement, capital flight, lost livelihoods, weakened institutions, reduced state capacity, and diminished social capital (Lassen, 2015, 8).

In Syria's neighbouring countries of Jordan, Lebanon, Turkey, Egypt, and North Africa 5.2 million Syrian refugees are registered (CIA, 2018). Turkey holds the largest number of Syrian refugees, with 3.6 million Syrian refugees registered with the UNHCR in Turkey (UNHCR, 2018). Lebanon is the second neighbouring country to Syria that houses 948,849 registered Syrian refugees, and Jordan has 671,551 registered Syrian refugees. Of those Syrian refugees registered with the UNHCR, 22% of males are under the age of 18, and 22.8% of females are under the age of 18 (UNHCR, 2018).

Trauma is very prevalent amongst Syrian refugee children. Sirin et al. found 79% of Syrian refugee surveyed experienced someone in their family dying, and 60% experienced a "stressful life event in which they thought someone was in danger." (Sirin et al., 2015, 13). Jabbar et al. study found that 98% of Syrian refugee children surveyed reported deterioration of psychological well-being. The deterioration of psychological well-being referred to in Jabbar et al. study includes PTSD, depression, and anxiety. However, in the same report, only 20% reported receiving the proper treatment for their mental health (Jabbar et al., 2014, 1512). The trauma that Syrian refugee children experience can manifest into emotional, cognitive, physical, and behavioural problems.

Emotional problems can include sadness, grief, fear, frustration, anxiety, anger and despair. Cognitive problems can be loss of control, helplessness, worry, boredom, and hopelessness. Physical symptoms such as: fatigue, problems sleeping, loss of appetite and medically unexplained physical complaints. Social and behavioural problems, such as: withdrawal, aggression and interpersonal difficulties are also common. (Hassan et al., 2015, 14)

Syrian refugees have been found to use various unofficial methods of coping with their traumas. Praying, engaging in social activities, seeking support from families and friends, and attending school have all been ways Syrian refugees have coped with their traumas. However, a common but unhealthy methods of coping commonly used by many Syrian refugee adolescents is withdrawal from family and friends. Quosh et al. (2012) showed that 60% of Syrian refugees felt the lack of basic needs were impacting their mental health This included a lack of security, shelter, access to education, and healthcare. In the same study Quosh et al., found that 45% of Syrian refugees felt intense fear, all or most of the time (Quosh et al., 2013, 285). Sirin et al. reported 44% of Syrian refugee children in their study showed signs of Depression. PTSD rates amongst Syrian refugee children in Lebanon were 41% to 76%. The main predictor of PTSD amongst children were the number of traumatic experiences the child endured (Quosh et al., 2013, 287).

The enrolment rate for Syrian refugee children has consistently stayed at about half. Lebanon, in 2016, 50% of 6 to 14 year olds were enrolled in formal education, with 377,000 Syrian children not enrolled a form of education (Deane, 2016, 38). In Lebanon, Syrian refugee children were found to be 30% more likely to drop out of school (Sirin et al., 2015, 8). Enrolment rates are slightly lower when comparing Syrian refugee children in camps to out of camps. In 2014 45% of Syrian refugee children in camps in Jordan were in school, compared to 58% of Syrian refugee children who live outside of camps and attend school (Jabbar et al., 2014, 5012). In 2016, it is estimated that 130,000 Syrian refugee children were enrolled in the Jordanian education system, and 90,000 Syrian refugee children were not enrolled in any form of education in Jordan. Additionally, another 30,000 children were attempting access to the Jordanian education system (Deane, 2016, 40). This deficit in the number of Syrian refugee children unable to attend

school in Jordan could be attributed to Jordan's policy of not enrolling children who have missed more three years or more of school (Sirin et al., 2015, 7).

Many of the schools in Jordan and Lebanon have also implemented a double shift program, where the Jordanian children attend school in the morning, and Syrian children attend school in the afternoon. In Lebanon 239 schools currently operate in double shifts (Deane, 2016, 38). However, it is still the deficit of Syrian refugee children unable to access education that will have the largest impact on the outcome of the next generation of Syrians. The Syrian refugee children unable to obtain an education will create a lost generation and have a negative impact on the long-term success of Syria being able to rebuild itself after the civil war has ended.

Aid programs addressing the Syrian refugee crisis are mainly focused on delivering emergency aid. Funding for Syrian refugee children has not been entirely filled. Due to the gap in the budget, education then suffers. In 2013 after the UNHCR released a report outlining the mental health of Syrian refugee children the Mental Health and Psychological Social Support (MHPSS) was established in partnership with the Lebanese Ministry of Public Health, UNICEF, and WHO (Sirin, 2015, 14). MHPSS aimed to address the interrelated issues of Syrian refugee children. In 2018 UNICEF is primarily focused on supporting more Syrian refugee children in obtaining an education. No Lost Generation (NLG) is an NGO partnered with the UNHCR that specifically focuses on securing a stable future for Syrian refugee children. NLG's three main pillars are: education, child protection, and adolescent and youth engagement (UNHCR, 2018). NLG working in Jordan has helped to change their policies on the documentation for refugee children. This initiative helps to provide documentation to Syrian refugee children who arrive without any documents, which helped to reduce the number of

undocumented children from 44,400 to 8,800 in one year (UNHCR, 2017). By having documentation now, these Syrian refugee children will be able to access education within Jordan.

3.3 Syrian Refugee Children in Turkey



(Watkins, 2017)

The massive influx of Syrian refugees into Turkey is to a scale unlike any other refugee crisis in history. This is in part due to Turkey's open-door policy, which has allowed so many refugees from Syria to seek refuge in Turkey (Kirisic, 2015, 8). In Turkey, there is an estimated 1 million Syrian refugee children ages 5-17 in Turkey (Watkins, 2018, 17). In the beginning 26 emergency camps were set up in 10 provinces close to the Turkish Syrian border. These camps now house an estimated 274,000 Syrian refugees. Since 2012 the majority of refugees crossing the border from Syria to Turkey commonly choose to resettle outside of the camps (Watkins, 2017, 51).

The mental health and trauma of Syrian refugee children in Turkey follows trend of the mental health of Syrian refugee children in Jordan, Lebanon, and other countries Syrian refugees where have resettled. There is a positive correlation between the number

of traumatic events experienced, and the diagnosis of PTSD (Alpak et al., 2015, 47). Tekeli-Yesil et al. found that 70.5% of Syrian refugees surveyed in Turkey reported having current major depressive disorder. Current suicide risk was reported by 49.7% of Syrian refugees. Syrian refugees surveyed PTSD was reported by 29.9% of those surveyed. Current panic disorder was reported by 14.3% of Syrian refugee participants (Tekeli-Yesil et al., 2018, 942). Syrian refugees were found to have a 71% risk of being diagnosed with PTSD (Alpak et al., 2015, 47). Higher rates of PTSD found in the younger age groups that were surveyed, Tekeli-Yesil et al. attributed this to the limited social support and coping capacity that younger Syrian refugees have. Alpak et al. found that amongst the Syrian refugees who were found to have PTSD, 9.3% was acute PTSD, chronic in 89%, and late onset in 1.7% and spontaneously remitted in 11.6% in frequency (Alpak et al., 2015, 47). To address the mental health and trauma issues of Syrian refugees, Tekeli-Yesil et al. suggest that mental health help be employed alongside emergency healthcare to reduce the stigma and effectively avert a mental health crisis amongst a refugee community. When specifically focusing on the Traumas that Syrian refugee children have experienced, 30% of children have reported being kicked, shot at, or physically harmed, and 60% of Syrian children reported witnessing such violence (Watkins, 2017, 52).

The Ministry of National Education (MoNE) in Turkey has made great efforts to have accessible education for all Syrian refugee children. However, much like Lebanon, and Jordan, the greatest issues has been the large demand due to the high population of Syrian refugee children in Turkey. UNICEF estimates that 74% of children outside of camps do not have access to any form of education (Kirisci, 2014, 23). During the 2015/2016 school year the MoNE provided education for 310,000 Syrian refugee children

(Watkins, 2017, 53). There are various types of education that are offered for Syrian refugee children. Temporary education centres in camps, urban areas, and local communities, as well as public schools are all modes employed to reach more Syrian refugee children in Turkey. In Turkey, only 37% of children are in school, and an estimated 524,000 children are out of school (Watkins, 2017, 17). 73,000 Syrian refugee children are enrolled in the public education system and follow the national curriculum, and 247,000 Syrian refugee children are enrolled in Temporary Education Centres (TECs). Furthermore, 1,000 Turkish teachers, and 11,500 Syrian volunteer teachers work at the TECs in Turkey (Watkins, 2017, 54). However, enrolment rates in formal education drastically decline with higher the education. Enrolment rates in school in Turkey drop from 69.3% (ages 6-9) enrolment in primary school to 30.4% (ages 10-13) enrolment in middle school, and only 13.2% (ages 14-17) enrolled in high school (Watkins, 2017, 53).

As of 2015 the Government of Turkey has spent a total of US\$7.6 billion in response to the Syrian refugee crisis (Watkins, 2017, 50). The European Union has provided the majority of the funding Turkey has received to help with the Syrian refugee crisis. According to the UNHCR, Turkey has appealed for US\$1.75 Billion for 2018. US\$92 million is directed towards funding for NGO's and US\$1.66 billion is for UN agencies: basic needs receive the majority of the funding, at US\$943 million, then US\$306 million is allocated to education, US\$223 million is allocated to protection, US\$158 million is directed towards livelihoods, US\$83 million allocated to food security and agriculture, and US\$39 million is allocated to health (UNHCR, 2018).

The Government of Turkey has led the overall crisis response and remains the largest provider of humanitarian aid for Syrian refugees (UNICEF, 2018). The Government of Turkey has set in place a 3-year strategy to achieve universal education

for all Syrian refugee children. This includes expanding the number of classrooms, and increasing the teaching workforce by 15,000 Syrian volunteer teachers. Furthermore, the Government of Turkey is looking to make the Temporary Education Centres curriculum more comparable to the Turkish public-school curriculum, and promote progression into secondary education. The proposed budget for this program would be €2.7 billion total over the three years (Watkins, 2017, 57).

In 2017 the UNHCR and Turkish government enrolled 487 482 Syrian refugee children in formal education from grades 1 to 12. Furthermore, 12 642 Syrian refugee children were enrolled in non-formal education. 55 682 teachers and education personal were trained to help with the influx in demand for education (UNHCR, 2018, 25).

UNICEF and the Turkish governments set out a nationwide Back to School campaign for the 2018-2019 school year. This program aims to get more Syrian refugee children access to a form of education in Turkey. As a result of the program 640,000 Syrian refugees were registered for school, which is a 10% increase from the 2017-2018 school year (UNICEF, 2018). NLG works alongside UNICEF in Turkey to help make education more accessible to Syrian refugee children. UNICEF's five main priorities are: education, child protection, adolescents and youth, health, and basic needs. UNICEF has begun to partner with local municipalities and social assistance foundations to insure access for more Syrian refugees to gain an education. Alongside the Back to School campaign, UNICEF also conducted a door- to-door community outreach campaign to encourage enrolment in the Accelerated Learning Programme, and distributed school bags and supplies to around 500,000 Syrian refugee children in Turkey (UNICEF, 2018).

The main focus of our thesis is looking at how or to what extent is Turkey addressing the needs of the potential lost generation of Syrian refugee children. Our

argument is that there has been insufficient funding and attention by government and donors to the therapeutic potential that education has for relieving refugee children of trauma. Access to education is essential for Syrian refugee children because education provides stability, normality, and a place for the refugee children to escape the traumas they have endured. Education is a way for Syrian refugee children with a new support community, as well as the tools to help them properly process their traumas and have a chance at a successful and healthy adulthood.

IV. Analysis and Discussion

4.1 Rehabilitation of Syrian Refugee Children in Turkey

As previously shown from section II. and section III. education is vital to the rehabilitation of Syrian refugee children. Education provides demonstrable benefits for Syrian refugee children. Securing education for Syrian refugee children is not just a matter of giving them better access to education because it is seen as a human right. The rehabilitation of Syrian refugee children in Turkey will be a crucial component in ensuring Syria has a future generation to help redevelop the country once the Syrian civil war has ended. Furthermore, education helps to provide rehabilitation of the traumas they have endured. Turkey holds the largest population of Syrian refugees, housing an estimated 1 million children ages 5-17 in Turkey (Watkins, 2018, 17). However, as shown in section 3.3 only 37% of Syrian refugee children are able to access some form of education (Watkins, 2017, 17). For Syrian refugee children, education is more than just a system to help create the next generation of the workforce. Education can provide a stable environment for the children to use as an escape from their traumas. Education is a place for Syrian refugee children to create healthy peer to peer relationships, and can create of a new support network can help the children seek comfort in those who have either experienced similar traumas to themselves. Furthermore, education can provide the opportunity for Syrian refugee children to have a nonviolent adult role model in their life. This is why education needs to be secured for Syrian refugee children, so they have an opportunity to overcome the widespread trauma they have endured.

A detrimental and lasting impact of conflict anywhere in the world is the threat of a potentially lost generation. With the ongoing conflict within Syria, Syrian refugee

children are at risk of becoming a lost generation. With the conflict nearing the ninth year, millions of Syrian refugee children have experienced widespread trauma due to this conflict. This trauma, if it goes unaddressed, can manifest itself into having life-long impacts. From looking at other refugee children populations, we know that the result of not addressing the widespread trauma in refugee children means a generation of adults unequipped to help rebuild their country once the conflict has ended. Lassen describes the impact that the longer the conflict, the higher the risk for a lost generation that is shaped by unable to maintain or frequently to quit jobs (2015). However, the core issue is that the majority of humanitarian aid is still solely focused on delivering emergency aid to Syrian refugee children. The long-term implications of the Syrian civil war have not set in yet. This is imparting why education only receives 2-4% of the global humanitarian aid emergency funding (ECW, 2017, 10).

Humanitarian aid needs to set in place programs that will address the widespread trauma that Syrian refugee children have experienced. As shown in section 3.2 the high rates of PTSD and depression found amongst Syrian refugee children will not disappear on its own. As previously shown in Section 3.3, PTSD, depression, and other socio-emotional psychological problems are commonly found amongst Syrian refugee children in Turkey. However, the lack of programs, specifically in Turkey to address these traumas this is in part due to the lack of attention that is paid to the mental health of refugees within humanitarian aid in general. Mental health has long been in the mainstream rhetoric of western culture, but there is still stigma prevalent in both the Syrian and Turkish culture. The stigma attached to seeking out or receiving mental help deters many Syrian refugees from seeking formal help, and the Turkish government to employ mental

help in with the stream of humanitarian aid for refugees. Therefore, education can be used as an alternative to alleviate Syrian refugee children of their traumas.

Education can be seen as a safe space for Syrian refugee children to stop thinking about their traumas for 4 to 6 hours a day and go back to a sense of normality and familiarity. Furthermore, education can aid in the relief of the trauma from the social disintegration the Syrian refugee children have faced. Losing their home, culture, or any sense of what the children knew before the conflict can have a significant impact on the emotional and psychological well being of Syrian refugees. With the recreation of a “miniature Syria” within Turkey it is possible to have the education system be similar to what previously the Syrian refugee children experienced. By using education as a way to alleviate the trauma of social disintegration, TECs have an enormous advantage. Majority of Syrian refugee children who are receiving an education are in TECs. Furthermore, TECs use the Syrian curriculum and are run by Syrian refugee volunteers. Running on the Syrian curriculum, and having Syrian teachers in the classrooms can help the Syrian refugee children reintegrate back into the education system, as well as bringing a small piece of familiarity back into their lives.

While addressing the Syrian refugee crisis, Turkey must take into consideration how vital education is for Syrian refugee children. Having the largest population of Syrian refugees, but having less than half of Syrian refugee children within the school is a clear indicator that Turkey must make education more of a priority. More funding needs to go towards the long-term aid for Syrian refugee children. This includes the establishment of more TECs that run on the Syrian school curriculum. There is a lot of debate surrounding which curriculum should be used in TECs and schools Syrian refugee children attend. We would argue that the primary curriculum that should be taught within

schools in Turkey for Syrian refugee children should be the Syrian curriculum. Using the Syrian curriculum will help to integrate more children easily back into the school system, and will help with the preservation of Syrian culture, as well as to prepare the refugee children for when they go back to Syria to rebuild the country.

4.2 Rehabilitation of Refugee Children

Many of the core issues that impact Syrian refugee children inflict all refugee children across the globe. The core issues of widespread trauma, lost generation, lack of resources to help address the traumas of refugee children, and lack of access to education impact all populations of refugee children. In 2015 17,000 children a day fled their homes due to conflict (Khwaja et al., 2017, 51). Children being displaced due to conflict accumulates to 75 million children being able to access education (ECW, 2017, 5). Children who are in a conflict area are 30% more likely not to finish primary education (ECW, 2017, 10). Therefore, much like the Syrian refugee crisis, more attention needs to be put on the multiple benefits that education can have on the rehabilitation of refugee children.

As shown in Section 2.1 and 3.1, the same traumas that Syrian refugee children are currently enduring are also felt throughout all refugee communities. Social disintegration and the creation of widespread trauma is one that occurs during every massive conflict that results in a refugee crisis. Due to the massive amount of destruction that comes with conflict, then furthers the social disintegration felt within refugee children. It is imperative to address the social disintegration in refugee children, or else it will lead to long term pathological effects (Eisenbruch, 1988, 282). The social disintegration then impacts every aspect of the child's life. Due to social disintegration, changing parenting dynamics, access to health care, cultural loss, and change in the

family dynamic can be seen. With everything changing so suddenly in the child's life, as a part of the rehabilitation process, there needs to be an aspect of normality brought back to refugee children lives. Ensuring education for refugee children in their new country of residence helps to bring back a small piece of the life they knew before a conflict forced the refugees to flee.

The trauma then goes further than just the social disintegration of society. Widespread high rates of PTSD, depression, and socio-emotional problems are persistently seen amongst all refugee communities. Refugee children have been seen to be more susceptible to developing PTSD than adults. Betancourt et al. clinical assessments show how trauma manifests into various mental disorders in refugee children. The study indicated high rates of probable post traumatic stress disorder 30.4%, generalized anxiety 26.8%, somatization 26.8%, traumatic grief 21.4%, and general behavioral problems 21.4% (Betancourt et al., 2012, 682). Additionally, elevated rates of PTSD have been shown to last up to 12 years (Kaplan et al., 2015, 84). The widespread trauma, coupled with the longevity of the trauma and PTSD is the two main reasons why it is essential that the traumas of all refugee children are addressed.

A cost effective way to address the widespread trauma is through education. Securing education for children can be the first steps to the rehabilitation process for refugee children. Participation in school promotes life skills, social bonding, security, and fostering of talents (Hart, 2009 365). The Human Rights Watch 2017 Global Report, found that 50% of the 3.5 million refugee children attend primary school, and only 25% of the 1.95 million refugee children attend secondary school (Khwaja et al., 2017, 51). The focus for securing education for refugees is slowly becoming more of a focus for non-governmental organizations and government programs. However, funding for

education remains scarce during. In 2016, education only received 1.9% of the total humanitarian aid spending (ECW, 2016, 9). However, the UN and ECW estimate to secure education for all children impacted by conflict, the estimated cost would be US\$8.5 billion.

Education is essential for refugee children to feel like a child again after experiencing conflict. Much like it is a therapeutic experience for Syrian refugees, this rehabilitation method can be extended and applied for all refugee populations. Refugee children have been seen to be more susceptible to trauma, and having trauma can create a long-term impact on the development of refugee children. Education can be a way to bring normality, help to assimilate, and find a place to be a child and have an escape for just a few hours out of the day of the traumas they have endured.

4.3 Education and Development

The relationship between Education and Development goes further than just producing the next generation of the workforce. The benefits children gain from having some form of education goes further than just learning reading, writing, and math skills. The therapeutic aspect of education can be seen almost as an aspect of the ‘hidden curriculum’ for education. When looking at the ‘hidden curriculum’ the main narrative has predominately been a Marxist perspective on the capitalist motives to educate a workforce. However, what we are highlighting is that there is more to education than just capitalist motives. The therapeutic aspect of education helps to give children a sense of stability in their lives. This stability is major for children because education is such a large aspect of a young child’s life. Furthermore, it helps to reintegrate them back into society after experiencing a major trauma in their lives. Reintroducing education after

trauma can help to bring a sense of normality and a large aspect of the child's life from a time before the trauma occurred.

Children growing up in violent conflict may come to see violence as the only mode of resolving a conflict. Introducing education back into a child's life after conflict can help to reintegrate the child back into society but also to teach the child properly, in peaceful conflict resolution methods. This will help with not only the child's development, but also the development of society, and making the prospects having of long term peace more obtainable. By ensuring the child's had proper rehabilitation after conflict can ensure children can have a successful, and healthy childhood, which will translate into a healthy and prosperous adulthood.

Education can be a haven for children, to escape their traumas and daily stressors. Education helps to create a support network of peers that children can open up to and lean on for support when processing traumas. Additionally, the support network can include both children their age, older children, or teachers and administrative staff. This support network can then be used for the child to seek out advice or support when dealing with traumas. The support is for daily life or to learn coping methods for their trauma. Having this support network for children is essential to healthy development.

There are so many hidden benefits to education that contribute to the development of both children, and for the future of a peaceful society. Securing education for children helps to ensure that children are set up to have a prosperous future, prosperous in many other ways than just the capitalist sense. Children should be successful in having healthy relationships, learn peaceful conflict resolution methods, create support networks, and overcome the traumas they have endured. However, not enough is done to secure education for all children. There needs to be an emphasis on the benefits for education so

that more funding, and priority is set in making sure children have access to education.

More attention needs to be paid from both NGOs and governments to all the benefits that come with securing education for all children. Giving education to children is vital in assuring successful long-term development for a country.

V. Conclusion and Recommendations

In this thesis, we argue that Turkey needs to make it essential to give Syrian refugee children better access to education. As shown in Section IV Less than half of Syrian refugee children in Turkey are in some form of education. However, the real potential of education is not fully harnessed. The rehabilitation aspect of education needs to be focused more on one. The rehabilitative aspect of education can be seen as a part of the “hidden curriculum.” By getting Syrian refugee children back into education would help to adjust the child into Turkish society, as well as create an escape for the child, and furthermore help the child to build a support network of peers. Education helping to integrate into society, by doing so would help to adjust to the trauma from the social disintegration. Education can help to give back to Syrian refugee children a sense of familiarity. As shown in Section IV Syrian refugee children have shown high rates of PTSD, depression, and other mental disorders. Creating a safe in school helps to distract the child from their traumas. Furthermore, education can help the Syrian refugee children to connect with other peers, as well as teachers to help create a support network. In previous conflicts that have resulted in widespread trauma in children, support networks have been proven effective to help children process the traumatic events they had previously experienced.

Our recommendations for Turkey is to make education more of a priority for Syrian refugee children. Ensuring education for Syrian refugee children will help to ensure that they do not result in a lost generation. Furthermore, it would help to address the traumas of the Syrian refugee children without having the stigma directly attached to receiving mental help. Due to the majority of the population of Syrian refugees residing

on the border of Turkey and Syria, setting up TECs running on the Syrian curriculum can help to get more Syrian refugee children back into school. Using the Syrian curriculum would help to bring normality back into the child's life, as well as to make it a more natural transition back into school. By ensuring education for more Syrian refugee children, will help to ensure that Syrian refugee children do not result in a lost generation. Furthermore, Syrian refugee children will be equipped with the tools they need for when the time comes, and they must go back and rebuild Syria.

When looking at the broader perspective of refugee children and development, we recommend that more attention and research needs to be done primarily focusing on the benefits and therapeutic aspect of education for refugee children. The multiple benefits of education go beyond just benefiting the Syrian refugee children population, but can be extended to all refugee children. Education provides stability in Syrian refugee children's life, create an environment where they can create healthy peer to peer relationships, and support network, and provide a peaceful adult role model in Syrian refugee children's life. Emergency budgets solely focus on the short-term aid that refugee children need. Usually, mental health is not even on the priority list, and education is usually very low on the list. However, by taking into consideration all the benefits that come along with education, can then help to make education higher on both government and NGOs priority list. The therapeutic aspect of education is pivotal for the prevention of a lost generation amongst refugee children who have experienced massive amounts of trauma.

Bibliography.

Abou-Saleh, M. T., & Hughes, P.

2015. Mental health of Syrian refugees: Looking backwards and forwards. *The Lancet Psychiatry*, 2(10), 870-871. doi:10.1016/s2215-0366(15)00419-8

Aker, Tamer, et al,

2004. "Public Attitudes to Depression in Urban Turkey," *Social Psychiatry and Psychiatric Epidemiology* 39, no. 12 (2004): 1010-1016. <https://link.springer.com/article/10.1007%2Fs00127-004-0843-4>

Alpak, Gokay, Ahmet Unal, Feridun Bulbul, Eser Sagaltici, Yasin Bez, Abdurrahman Altindag, Alican Dalkilic, and Haluk A. Savas

2015 Post-traumatic Stress Disorder among Syrian Refugees in Turkey: A Cross-sectional Study. *International Journal of Psychiatry in Clinical Practice*, 2015, Vol.19(1), P.45-50
19, no. 1: 45-50.

Betancourt, T., Newnham, E., Layne, C., Kim, S., Steinberg, A., Ellis, H., & Birman, D.

2012. Trauma History and Psychopathology in War-Affected Refugee Children Referred for Trauma-Related Mental Health Services in the United States. *Journal of Traumatic Stress*, 25(6), 682-690.

Bhugra, Dinesh, et al,

2013. "What is Mental Health?" International Journal of Social Psychiatry 59, no. 1: 3-4.

<http://journals.sagepub.com/doi/abs/10.1177/0020764012463315>

Brown, Gordon

2016 "Without Education, Syrian Children will be a Lost Generation" The Guardian,

January 12th

Chatty, Dawn.

2017 The Syrian Humanitarian Disaster: Understanding Perceptions and Aspirations in

Jordan, Lebanon and Turkey. Global Policy.

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/1758-5899.12390>.

CIA

2018. CIA Factbook: Syria [https://www.cia.gov/library/publications/the-world-](https://www.cia.gov/library/publications/the-world-factbook/geos/sy.html)

[factbook/geos/sy.html](https://www.cia.gov/library/publications/the-world-factbook/geos/sy.html)

Deane, Shelly.

2016 Syria's Lost Generation: Refugee Education Provision and Societal Security in an

Ongoing Conflict Emergency. RUPTURES AND RIPPLE EFFECTS IN THE MIDDLE

EAST AND BEYOND.

https://opendocs.ids.ac.uk/opendocs/bitstream/handle/123456789/11624/IDSB_473_10.1

[90881968-2016.143.pdf?sequence=1&isAllowed=y](https://opendocs.ids.ac.uk/opendocs/bitstream/handle/123456789/11624/IDSB_473_10.1).

Dhubow, A., & O'Malley, Anthony.

2018 A Global Community of Neglect: The Prevalence of Mental Illness in Developing Communities. (Unpublished)

Ellis, B. Heidi, Miller, Alisa B., Abdi, Saida, Barrett, Colleen, Blood, Emily A., & Betancourt, Theresa S. (2013). Multi-Tier Mental Health Program for Refugee Youth. *Journal of Consulting and Clinical Psychology*, 81(1), 129-140.

Fazel, M.

2017. Psychological and psychosocial interventions for refugee children resettled in high-income countries. *Epidemiology and Psychiatric Sciences*, 27(02), 117-123.

doi:10.1017/s2045796017000695

F.J. Charlson, et al,

2017. “Donor Financing of Global Mental Health 1995 – 2015: An Assessment of Trends Channels, and Alignment with the Disease Burden, PLoS ONE 12, no. 1: 1-10.

<https://doi.org/article/e847eda208584143a685ba9402c6406f>

Fountain, Susan.

1999. “Peace Education in UNICEF” UNICEF.: 1-39

Hassan, G, Kirmayer, LJ, Mekki- Berrada A., Quosh, C., el Chammay, R., Deville-Stoetzel, J.B., Youssef, A., Jefee-Bahloul, H., Barkeel-Oteo, A., Coutts, A., Song, S. & Ventevogel, P. Culture, 2016 Context and the Mental Health and Psychosocial Wellbeing of Syrians: A Review for Mental Health and Psychosocial Support staff working with Syrians Affected by Armed Conflict. Geneva: UNHCR,

HRW

2017. Human Rights Watch Global Report 2017. (Rep.) Retrieved

https://www.hrw.org/sites/default/files/world_report_download/wr2017-web.pdf

Jabbar, Sinaria Abdel, Zaza, Haidar Ibrahim

2014. Impact of conflict in Syria on Syrian children at the Zaatari refugee camp in Jordan,

Early Child Development and Care, 184:4-10, 1507-1530, DOI:

10.1080/03004430.2014.916074

Jordans, M.J., Tol, W.A., Komproe, I.H., & Jong, J.V.

2009 Systematic Review of Evidence and Treatment Approaches: Psychosocial and Mental

Health Care for Children in War. Child and Adolescent Mental Health, 14(1), 2-14 doi:

10.1111/j.1475-3588.2008.00515.x

Julian Eaton, et al,

2011. "Scale up of Services for Mental Health in Low-income and Middle-income Countries," *The Lancet* 378, no. 9802 : 1592 – 1603.

<https://www.sciencedirect.com/science/article/pii/S014067361160891X>

Kaplan, I., Stolk, Y., Valibhoy, M., Tucker, A., & Baker, J.

2016. Cognitive assessment of refugee children: Effects of trauma and new language acquisition. *Transcultural Psychiatry*, 53(1), 81-109.

Kirisci, Kemal.

2014 SYRIAN REFUGEES AND TURKEY'S CHALLENGES: GOING BEYOND HOSPITALITY. Bookings.

<http://made14.org/english/images/0/0e/2014BrookingsSyriaKirisci.pdf>.

Khawaja, Bassam, Martinez, Elin, Van Esveld, Bill

The Lost Years Secondary Education for Children in Emergencies. 2017 Human Rights Watch Report. https://www.hrw.org/sites/default/files/world_report_download/wr2017-web.pdf ; 51-60

Lassen, Scott.

2015 Protecting the Children and Youth of Syria: Human Security Threats and Their Consequences. <http://crdc.gmu.edu/wp-content/uploads/2014/09/Protecting-the-Children-of-Syria-Human-Security-Threats-And-Their-Consequences-1.pdf>.

Lister, C. R.

2015. *The Syrian Jihad Al-Qaeda, the Islamic State and the evolution of an insurgency.*

Oxford: Oxford University Press

Mccarthy, Aslihan Tezel.

2018 *Politics of Refugee Education: Educational Administration of the Syrian Refugee*

Crisis in Turkey. *Journal of Educational Administration and History* 50, no. 3: 223-38.

Pieloch, K. A., Mccullough, M. B., & Marks, A. K.

2016. *Resilience of children with refugee statuses: A research review.* *Canadian*

Psychology/Psychologie Canadienne, 57(4), 330-339. doi:10.1037/cap0000073

Pine, Daniel, Jane Costello, and Anne Masten.

2005 *Trauma, Proximity, and Developmental Psychopathology: The Effects of War and*

Terrorism on Children. *Neuropsychopharmacology.*

<https://www.nature.com/articles/1300814.pdf>.

Pigozzi, Mary Joy.

1999. *Education in Emergencies and for Reconstruction: A Developmental Approach.*

UNICEF.: 1-19

Quosh, Constanze, Liyam Eloul, and Rawan Ajlani.

2013 Mental Health of Refugees and Displaced Persons in Syria and Surrounding Countries: A Systemic Review." Semantic Scholars.

<https://pdfs.semanticscholar.org/bdd2/368899b3d3c01c01a57985553a21d2a27e8b.pdf>.

Robert Hart

2009. Child Refugees, trauma and education: interactionist considerations on social and emotional needs and development, *Educational Psychology in Practice*, 25:4, 351-368, DOI: 10.1080/02667360903315172

Rousseau, Cécile.

1995 The Mental Health of Refugee Children." Sage Journals

<http://journals.sagepub.com/doi/pdf/10.1177/136346159503200304#articleCitationDownloadContainer>.

Seker, B. D., & Sirkeci, I.

2015. CHALLENGES FOR REFUGEE CHILDREN AT SCHOOL IN EASTERN TURKEY. *Economics & Sociology*, 8(4), 122-133. doi:<http://dx.doi.org/10.14254/2071-789X.2015/8-4/9>

Summerfield, Derek.

2000 Childhood, War, Refugeedom and 'Trauma': Three Core Questions for Mental Health Professionals. *Transcultural Psychiatry* 37, no. 3: 417-33.

doi:10.1177/136346150003700308.

Sirin, Selcuk, and Lauren Roger-Sirin.

2015 The Educational and Mental Health Needs of Syrian Refugee Children. Research Gate.

https://www.researchgate.net/profile/Selcuk_Sirin/publication/287998909_The_Educational_and_Mental_Health_Needs_of_Syrian_Refugee_Children/links/567ccd6c08ae19758384e4bf.pdf.

Stauffer, S.

2008. Trauma and Disorganized Attachment in Refugee Children: Integrating Theories and Exploring Treatment Options. *Refugee Survey Quarterly*, 27(4), 150-163.

UNHCR

2018 Turkey 2018 3RP Funding Update (Rep.). Retrieved

<https://data2.unhcr.org/en/documents/download/66575>

UNHRC

2018. Global Report 2018: Funding (Rep.). Retrieved

<http://reporting.unhcr.org/sites/default/files/UNHCR%20Brochure%20on%20Underfunded%20Situations%20-%20September%202018.pdf>

UNHCR

2017. Global Funding Report 2017 (Rep.) Retrieved

http://reporting.unhcr.org/sites/default/files/gr2017/pdf/02_Funding.pdf

UNHRC

2018 Syria Regional Refugee Response. Retrieved from

<http://data.unhcr.org/syrianrefugees/regional.php>

UNICEF

2018. UNICEF Humanitarian Action for Children. (Rep.) Retrieved from

https://www.unicef.org/publications/files/UNICEF_Humanitarian_Action_for_Children_2018_Overview_ENG.PDF

UNICEF

2018. Syrian Crisis October 2018 Humanitarian results. (Rep.)

https://www.unicef.org/appeals/files/UNICEF_Syria_Crisis_Humanitarian_Situation_Report_October_2018.pdf

Watkins, Kevin

2016. No Lost Generation- holding to the promise of education for all Syrian refugees.

(Rep.) https://www.right-to-education.org/sites/right-to-education.org/files/resource-attachments/Kevin_Watkins_No_Lost_Generation_2016_En.pdf

World Health Organization,

2010. Mental Health Action Plan. Geneva, Switzerland: World Health Organization,

http://apps.who.int/iris/bitstream/10665/89966/1/9789241506021_eng.pdf?ua=1