



# **A PLACE FOR A NEW BEGINNING**

Psychological trauma rehabilitation for the children of Latakia

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Project Title: A PLACE FOR A NEW BEGINNING - Psychological trauma rehabilitation for the children of Latakia Project area: Governorate of Latakia Promoting subject: Pro Terra Sancta

# **1. CONTEXT**

## **1.1 General context**

In its tenth year, the conflict in Syria is the largest and most complex humanitarian crisis in the world, with no end in sight. The humanitarian context has been further challenged by an unprecedented economic downturn in Syria in 2020 that has profoundly impacted the already volatile and complex living standards of a significant proportion of the Syrian population. These financial hardships have been compounded by multiple shocks over the past 12 months, including the imposition of sweeping new US sanctions with the Caesar Syria Civilian Protection Act (the Caesar Act), the regional financial crisis (especially the banking crisis in neighbouring Lebanon), as well as the Covid-19 preventive measures, and imposition of new and farther-reaching coercive measures.

Overall, 11.1 million people need some form of humanitarian assistance in Syria in 2020. Those include 4.7 million people estimated to be in acute need. Crucial civilian infrastructure such as schools, water supply systems, health facilities, and housing infrastructure has sustained extensive damage or contamination from explosive hazards. More than 90% of the population is estimated to live under the poverty line. Recent economic shocks stand further to set back the recovery of the Syrian people and render them much more vulnerable. Millions of women, children, and men continue to rely on humanitarian assistance as a vital lifeline and meet their basic needs.

## **1.2 Effects and needs**

The crisis continues to impact the mental well-being of those affected by new and prolonged displacement, exposure to violence, loss of income, and reduced access to essential services, touching the youngest in particular: 42 % of surveyed households report signs of psychosocial distress in children, (nightmares, lasting sadness, and anxiety, amongst others) suggesting that many girls and boys are in a situation of prolonged pain. Half a million children are chronically malnourished. In 2020, the number of food-insecure people had increased by 22 %, from 6.5 million in 2019 to 7.9 million people in 2020.

Multiple graves and often inter-connected protection risks persist. An estimated 2.5 million children aged five to seventeen are out of school and face elevated protection risks related to, among others, child marriage and engagement in child labour, including in its worst forms such as recruitment. One in three schoolchildren is displaced, with the physical and mental impact of displacement affecting



individual growth and learning. Missing the legal registration of children represents an obstacle to access to health and schooling rights.

Only 53% of hospitals and 51% of primary healthcare centres across Syria are estimated to be fully functional. Over 8 million people have to rely on alternative and often unsafe water sources to meet or complement their water needs, increasing public health risk, with indicators on water availability and quality being worst for IDPs in the northwest and northeast Syria. The number of people requiring shelter assistance has increased by 20%, from 4.7 million in 2019 to over 5.5 million in 2020. Over half of all IDPs have now been displaced for over five years. The deteriorating economic situation has contributed to the continued loss of livelihoods and reduction in household purchasing power.

### **1.3 Education emergency**

After nearly ten years of crisis, insufficient availability of, and access to, continuous protective quality education remains a critical need in Syria. 6.8 million children and school personnel are estimated to need humanitarian education assistance. Around 86 % of school-aged Syrian children live in areas with an acute and immediate need of humanitarian education assistance. This is an increase of 800,000 compared to last year. Approximately 6.6 million children (50 % female) need education assistance. An estimated 2.45 million children are out of school (1.5 million of whom are boys), 1.6 million students are at risk of dropping out, a respective increase of 16 % and 23 % from last year. There was a sharp increase in the number of reported attacks on education. These were focused in the northwest, with the rates of attacks nearly doubling the rates of reported attacks on health facilities. More than one in three schools are partially damaged or destroyed. Protracted and new displacements in the northwest and northeast put additional pressure on an education system that is already severely overstretched. The education system remains overburdened with multiple curricula taught in some areas; this has significant repercussions on the provision and certification of learning. The teaching and school administration capacity remains overstretched, or underpayment of teachers limits retention and the quality and provision of education. Children with disabilities, adolescents, and youth continue to be disproportionately underserved. Children who are out of school are more likely to be exposed to protection risks. These risks are often linked to families resorting to harmful coping strategies such as child labour and early marriage. Furthermore, it is problematic that children and their families prioritize education if they feel that the quality of services provided will not lead to economic opportunities or think that traveling to school or being in school may put them at risk in some areas.

### **1.4 Children's needs**

Social problems have become one of the most alarming phenomena affecting Arab societies. Children with psychological disorders and disabilities, especially in the Syrian community that has been exposed to war and the many adverse effects it has on children with disabilities and their



families. Parents are not able to provide the child with the basic needs of food and clothing and thus the lack of interest in the rehabilitation of this child and developmental and behavioural follow-ups according to plans organized by competent authorities, and because of the lack of free-of-charge rehabilitation centres, long distances and pre-occupied parents in making a living or the absence of the father due to death, travel or other unknown reasons, and then the responsibility of family care transfers to the mother.

Moreover, the lack of sufficient funds for rehabilitation, and the outbreak of the war in Syria, have increased the number of injured individuals, as many children suffered from brain injuries or different wounds, which led to mental or physical disabilities.

The UN report on the needs of the Syrian people in 2017-2019 says that every month 30 thousand people in Syria undergo psychological trauma, 2.8 million people have a permanent physical disability, and a third of them are children. Many children are neglected and ignored within their current society. They are particularly vulnerable to physical, sexual, and emotional abuse and thus suffer from social isolation and the risk of being abandoned by others. UNICEF estimates that 8.4 million children have been affected by the conflict, both inside and outside Syria, 6 million children do not receive humanitarian assistance, and more than 2 million do not receive adequate rehabilitation care. The UN Refugee Committee also estimated that 1 out of 5 refugees is affected by psychiatric condition, physical or mental impairment, with 22% of those who have disabilities, 13.4% are children with thinking problems. With the increasing numbers of children inside Syria, especially in Aleppo and Latakia, with the return of large numbers of refugees to their areas (especially in the eastern regions), these numbers have doubled.

With this data, the current need to provide comprehensive and appropriate rehabilitation according to a program devoted to this specific category of disability has risen, and it is a must.

Domestic violence is an increasing phenomenon due to the general feeling of helplessness and inability to answer the needs of everyday life. Many fathers discharge their oppression and anger on their wives and children by beating, humiliating, or other violent practices. Unfortunately, no one has the right to intervene because beating, cursing, and humiliation are considered part of disciplining children and fathers' rights. Domestic violence affects the children who usually express themselves violently outside the home with their companions in the neighbourhood and the school. We can see almost daily that any verbal altercation can quickly turn into a fight, and sometimes they use iron rods or what comes to their hands like stones or knives, and sometimes a firearm. All this makes it necessary to find a way to absorb and channel this congestion and divert it and find positive outlets to take it out through a process of individual and collective psychological support. Of course, the children have not been able to evade the effects and reactions of the pressured parents, and the violence of the parents generated violence among the children themselves.

Because of the oppressive financial conditions, the numbers of child labour have increased, which prevents them from living their childhood correctly and healthily and prevents them from going through experiences that suit their ages and developing their emotional, sensory, intellectual, and



cognitive abilities. Because the child is one unified entity, each side is affected by and affects other aspects. We see children living adult lives, using the language of adults, and acting in adult behaviour.

Because childhood is an essential and integrated stage in the life of every person, and it is the child's right and need to live it in its fullness, but due to different life pressures, traumas, violence, inappropriate images or distorted expressions from the media, which led to the creation of a state of malformed living of life and children's inability to adequately express their feelings, reactions, or even problems in giving an opinion or expressing emotions, therefore spiritual, social and linguistic distortion and loss increase within them and they feel disconnected from society, sometimes manifesting a lack of interest in the passers-by during their games in the streets where there is no hygiene, cleanliness, or safety; they usually play with materials they find in those environments such as wood, stones, or "marbles", they eat food or drink there and sometimes they smoke in a striking way to express their presence and compensate for their feeling of weakness and marginalization. It is noticeable that their growth comes in "non-sequential steps" as it cannot be predicted. Children's reactions and behaviour are unpredictable; it is hard to figure out how and why they laugh or how and when they cry. According to teachers 'feedback, even their capability for learning does not have a stable level of this readiness.

#### 1.5 Latakia city: context and needs



Latakia governorate is in the northwest of the country. It borders the Mediterranean Sea to the west, Tartus to the south, Hama to the east, and Idlib to the northeast. It also shares an international border with Turkey to the north. Population estimates for 2016 by the Syrian Central Bureau of Statistics indicated that Latakia governorate had 1,453,000 inhabitants.

Most of Latakia governorate had been under government control since the start of the conflict. Since 2013, the Syrian government managed to isolate rebel strongholds to the mountain areas in the northeast of Latakia. Rebel forces had kept a foothold in northeast Latakia for nearly the entire civil war in Syria, creating a frontline in the northeast mountains. Areas in Latakia near the border



to Idlib were dominated by jihadist groups. As of January 2020, all of Latakia was under progovernment control except a strip along the Turkish edge and the border to Idlib governorate, which was under the control of Al Qaeda-linked groups.

In 2019-2020, following the military clashes and economic crisis, around 17,000 IDP movements were recorded to or within Latakia governorate: eight thousand were within the governorate, while the rest came mainly from Hama, Aleppo, Homs, and Damascus governorates.

Severe damage is reported to electrical and water networks in Latakia, with power supply cut off to some area to prevent further damage to infrastructure.

The crisis in Latakia has a tragic impact on all the people living there, especially the children, who are suffering daily from poverty, hunger, ignorance, and neglect. Especially that lot of them come from illiterate areas where education is not a priority for society. Latakia had welcomed many families whose children experienced brutal violence, lost friends or family members, snipers, fear, and unsecured. After ten years of war, we should call attention to the effect of conflict on Syria's young people and especially girls.

Most of the displaced children in Latakia live in small rented rooms; others live in nearly roofless rooms. The children suffer from the war; even in the safest areas, they have limited access to clean water, nutritious food, or education opportunities. Hundreds of the Syrian displaced children in Latakia have to work to support their impoverished families, and many small girls are forced into early marriage.

The Syrian displaced children are in danger of becoming a lost generation. Most children do not have access to education, particularly those who have to flee their homes and those who remain in areas where schools have been damaged or overcrowded. In Latakia, displaced children can go to classes regularly, but most of them prefer to work in long-term labour, which makes them lose the ability and the will to concentrate and study. War child works to support the healthy psychosocial development of children living with the consequences of war conflict. These consequences can take on many forms – including feelings of fear, anxiety, depression, and exposure to physical and sexual exploitation. As a result, the significant risks facing the displaced children are the lack of psychological support, healthcare awareness, hygiene, smoking, early marriage, skipping school, ignorance, and much deep development and emotional scars.

The **Sacred Heart of Jesus Church** of the Custody of the Holy Land was built in 1933, but the presence of Franciscan friars dates back to 1733.

In 2011 Latakia, just like the other Syrian cities, has witnessed the beginning of the conflict in Syria, and till now, it is still suffering. The friars at that time and till now did not get discouraged. They stayed here comforting and helping people in all the available means, especially in the last six years after the massive increase in the number of the displaced families in the parish, because of the arrival of many hundred families from the other parishes. However, it is still necessary to make more efforts to reach a more significant number of people, particularly youth in critical need of food and medication and humanitarian and psychological care.



# 2. TARGET GROUP AND EXTERNAL STAKEHOLDERS

The development and the psychological and social changes observed in 2019 and 2020 on children and adolescents who attended (the sample of the program) the Franciscan Care Center of Aleppo show an improvement for more than 70% of participants. This improvement was observed statistically on the evaluation tools used, which showed a remarkable increase in the individuals participating in the program's mental health and psychological resilience. We desire to spread the benefit to more significant numbers to reach the largest possible segment of children and, consequently, increase the beneficiaries and seeds of peace and promote resilience in the local societies exhausted by the war. And, by examining the real lives of children in the province of Latakia, we have seen a great need and eager and debatable questions from parents about how to deal with the psychological traumas of their children, which have an apparent impact on their behaviour and school performance as well. And in the desire to transfer experiences to several governorates, the benefit is widely spread and reached a more significant number of affected children in several regions.





# 2.1 Beneficiaries

In the governorate of **Latakia**, the sample will include **200** children and adolescents. The number of indirect beneficiaries is about 1000 persons from the families and friends of the children.

# **3. PROJECT**

# 3.1 Main goal

The present project proposal intends to support the psychological and social improvement of the children of Latakia, affected by war consequences and social distances during Covid-19. Through a safe and friendly structured place, they can start a rehabilitation process through various therapy activities such as sports, art, culture, and psychological support. In this way, the program intends to encourage children's acquisition of mental health and psychological resilience, which guarantees them to live safely and stable.

All the activities will be prepared and carried out by qualified personnel, and each child will be followed individually. The project implies a continued dialogue and involvement of parents, families, and other actors directly involved in the life and growing of each child, such as schools, to share and monitor child behaviour and improvement.

## **3.2.** Activities

For the areas of the project the activities will focus on various sessions and stages involving the children held in different fields (music, drawing, theatre, acting, culture, photography, sports, cinema, and psychological support) and is conducted by a team dedicated to the rehabilitation and development of children through direct contact with them. These activities are crucial to identify the problems in these children and support them in an advanced manner in case of need and highlight their creative side and work to develop it. Children carry out the activities in the afternoon divided into groups by age group (6-8 years, 9-11 years, 12-14 years, and 15-17 years) in the spaces used in the center (sports fields, music room, art, etc.). Below the details of the activities per each location:

<u>A1) Preparation of spaces and materials</u>: All the activities will be carried out within the center of the Church of the Immaculate Virgin of the Syriac Catholics, using the existing space and facilities and the new rooms such as hall, classrooms, services, external garden. Some renovation works for the hall and classrooms will be done before the project starts.

Provision of general furniture: purchase of tables, chairs, cupboards, whiteboards.

Provision of general equipment: purchase of laptops, video projectors, mixers, and speakers.

All the materials used in the construction and preparation of the center are local and Syrian, except for the laptops, projectors, electrical switches, and other electrical appliances purchased from the local markets but imported from abroad.



BOQs are challenging to have at this very moment because of the situation in the country and the considerable volatility of market prices; for that reason, the suppliers are not willing to make price quotations and bill of quantities. As soon as possible, price quotations will be provided and available.

<u>A2) Organization of groups and time-plan</u> - The children will be divided into four age groups as follows: 6 to 8 years – age group 1; 9 to11 years – age group 2; 12 to 14 years – age group 3; 15 to 17 years – age group 4

Every age group will have an average number of ca. 50 children, divided in 4-5 single groups; every single group contains from 10 to 15 children depending on the directed activity. The total number of children of all ages involved will be 200.

Regarding the time plan of the group activities, the work process will be as follows:

Each day four groups will be dealt with; each group attends two activities a day and different activities the next day. Activities will be alternated every day in stations where groups will move from a two-hour training to another at a rate of 4 hours of prepared activities a day for each group. In addition to 2 hours of sessions, consultation, etc. In every activity, the supervisors will be in direct contact with psychologists and with the help of the activities' executives and volunteers to organize and conduct the activities.

<u>A3) Sports activities:</u> about 8-15 sessions every month, divided by four age groups, will be held by the skill project team on sports activities (soccer and basketball).

The inclusion of sports activities for all children is because practicing sport plays a crucial role in physical and psychological rehabilitation. It is not by chance that this program rapidly proved effective. The sports program will be focused on developing physical and behavioural skills, psychological support and entertainment, and implanting positive values.

<u>A4) Artistic activities and talents divided into two parts:</u> about 8-15 sessions every month, divided by 4 age groups will be held by the skill project team on artistic activities (drawing, sculpturing, theatre, music, cinema).

# Theatre and Cinema

The training and exercises carried out aimed to acquire positive elements to benefit the child on his rehabilitation path by defining the art of theatre and cinema and fortifying his ideas and positive attitudes to face the difficulties of life. Three different stages:

In the first stage, the program is focused on several starting points. In the second stage, only children who want to continue being involved in new practical exercises concentrated on the helpful followup of the first phase through physical, respiratory, acoustic activities and the useful confrontation



of the theatrical act and its practice platform. In the third stage, children with particular abilities and interest in the theatre are involved in advanced courses.

## <u>Music</u>

In the first stage, children were introduced to music through five treatment methods to develop emotional aspects of children and better understand their sufferings by registering and monitoring their reactions to what they listened to.

The five methods used by psychologists are described below:

- *Improvisational Music Therapy* (Nordov-Robbins method and other ones): The philosophy of these methods stimulates patient reactions at all levels. They are based on the contact with the person in the context of musical experience.

- *Singing and discussion*: it is a typical method used in psychotherapy and is based on motivating the teenager to respond to poetry and music by expressing his/her thoughts and feelings aroused by the songs and tunes.

- *Guided Imagery and Music* (GIM): a technique that relies on listening to classical music accompanied by a state of mental and physical relaxation; to stimulate a portrayal descriptive and achieve self-reality.

- *Clinical Orff Schulwerk* (COS): used to help to deal with children with intellectual disabilities by using movement, rhythm, sounds, language, and musical expression in group sessions.

- Rhythmic Entrainment Intervention (REI): a rhythmic therapeutic program that uses complex rhythmic patterns to stimulate the central nervous system to assist in long-term behavioural and cognitive improvement in people with neurological disorders.

In the second stage, children started to learn how to play a musical instrument they chose and musical sciences through theoretical and historical lessons of music, Solveig and Harmony (music composition), and the principles of playing instruments like violin, cello, and flute.

### Art and painting activities

In the first stage, children are welcomed without classifications, introduced to the materials and tools they dealt with, and encouraged to work based on presenting some of the pre-made models of the same material. Moreover, movies about works of art and visual slides are shown to motivate students to start this program and push them to express their thoughts. Indeed, children attended different artistic activities such as drawing, sculpturing, and painting to develop their creativity and expressiveness.

On the second stage, children who have particular abilities and interests in art are involved in courses more academic to offer them the possibility of cultivating their passion and improving their skills



<u>A5) Psychological activities</u>: about 150 individual sessions between the needy children and a team of psychologists and social workers will be conducted monthly + about 15 sessions every month, divided by 4 age groups will be held by development/life skills staff on dialogue session and emotional skill.

Activities included: life skills workshops, critical thinking debates, problem solving, cooperation, making decisions, self-management, resilience and outreach, respecting variations, negotiations, sympathy and compassion, participation and creativity. It is worth mentioning that before attending Franciscan Care Center all the children will be tested to assess the presence of severe psychological disturbs by evaluating different dimensions: PTSD, anxiety, fear, shyness, anger and aggressiveness. When one child presents an high level of one of these dimensions in himself, he is included in specific psychological support sessions.

<u>A6) Activities with families and relatives:</u> Concerning the dialogue and collaboration with the families, a regular (twice a month or as needed) perception session is planned in order to study the needs of the families. A day each month, a called "open-day" is planned where the child, the family, close friends and the teachers will be involved.

<u>A7) Staff care</u>: For the staff involved in the project some training session and lectures will be provided to update their knowledge and to share their experience with other people involved in similar activities in other cities or country. This activity will accompany them for all the time of the project.

# 4. BUDGET

The total cost of the project is **44,520.00 EUR** for a total period of 6 months.













Children in Latakia

