



## **New paper: Teachers are struggling to cope with refugee students suffering from trauma**

The number of migrant and refugee school-age children around the world has grown by 26% since 2000, many of whom face trauma due to their displacement. Eight years on from the Syrian conflict, a [new paper](#) released by the Global Education Monitoring (GEM) Report calls for better training for teachers to support their needs.

Many refugees and migrants suffer from trauma due to their displacement. In Germany, about one-third of refugee children suffer from mental illness, and one fifth suffer from post-traumatic stress disorder. In the Netherlands, between 13% and 25% of refugees and asylum seekers suffer from post-traumatic stress disorder and/or depression.

Rates of trauma among refugees in low and middle income countries are also high. For instance, 75% of 331 internally displaced children in camps in southern Darfur met diagnostic criteria for PTSD, and 38% had depression

Unaccompanied minors are particularly vulnerable. One third of 160 unaccompanied asylum seeker children in Norway from Afghanistan, Somalia and Iran suffered from PTSD. Among 166 unaccompanied refugee children and adolescents in Belgium, 37-47% had 'severe or very severe' symptoms of anxiety, depression and PTSD.

Teachers need basic knowledge about trauma symptoms and a way of providing help to students, but face challenges, both in host countries, and particularly in emergency settings. NGOs including the International Rescue Committee, iACT, and Plan International are training teachers to face this challenge through their programmes, but their reach is not enough.

Manos Antoninis, Director of the GEM Report, said *"Teachers are not and should never be leant on as mental health specialists, but they can be important flag bearers for children suffering from trauma if they're given the right training."*

In Germany, the majority of teachers and day-care workers said that they did not feel properly prepared to address the needs of refugee children. In the Netherlands, 20% of teachers with more than 18 years of experience working in mainstream schools reported that they experienced a high degree of difficulty dealing with general-population students with trauma. The vast majority of these teachers (89%) encountered at least one student with trauma in their work. A review of early childhood care and education facilities for refugee children in Europe

and North America found that, although many programmes recognized the importance of providing trauma-informed care, appropriate training and resources were 'almost universally lacking'.

Teachers can also connect students to trained mental health specialists, but often the links to these services are ineffective. In the Netherlands, teachers complained about the long wait for specialized help for traumatized asylum-seeking students, who had to wait even longer for care than did others.

Antoninis continued: *"Conflicts and displacement are not going away. They call for considerable changes in teaching practice that countries must work into their plans. Shifting teachers' approaches towards these children, helping them build confidence and self-expression through role playing and group discussions can hand them a life-line."*

The paper shows the importance of safe school environments and socio-emotional learning, which targets skills such as stress management, and are often rolled out through interactive, group-based discussions or role play, and help build resilience to traumatic experiences. It shows the importance of this approach for less acute situations, but emphasizes that trained teachers are needed to carry it out successfully. In Turkey, eight-week sessions were run for refugee students from Syria teaching relaxation techniques and writing techniques to address grief and saw the number of children showing symptoms of post-traumatic stress disorder drop by almost half.

It shows the importance of parents' involvement in socio-emotional learning, given that parents are often suffering from trauma themselves, but also so that learning can continue at home. One programme in Chicago looked at addressing symptoms of depression among Mexican immigrant women and primary school children, with in- and after- school programmes and home visits, and improved school work, child mental health and family communication.

Key recommendations:

1. *Learning environments must be nurturing and responsive.*
2. *Teachers working with migrant and refugee students who have suffered trauma face particular hardships and need training to cope with challenges in the classroom.*
3. *Psychosocial interventions require cooperation between education, health and social protection services.*
4. *Extracurricular activities should be mainstreamed to address trauma. Contextualized and inclusive interventions involving arts, games or meditation should be made part of classroom routine.*
5. *Community and parental involvement should not be neglected.*

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