



Refugee Documentation Centre (Ireland)
LEGAL AID BOARD

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Information on the availability of psychiatric treatment for women including psychosis/schizophrenia

A report issued in January 2019 by *Action on Armed Violence* states that:

“The outlook for psychiatric care in Syria is dire. With less than 100 psychiatrists across the whole country prior to the crisis and many of those forced to flee...it is certain that most Syrians will be unable to access the psychological support they desperately need” (Action on Armed Violence (11 January 2019) *Explosive violence and the health challenges ahead for Syria*).

A report issued in October 2018 by the *International Rescue Committee* notes that:

“More than 50 percent of Syria’s population is in need of mental health support. Even before the war began, the country of 22 million had just 100 psychiatrists. According to the World Health Organization, around half of them have since fled the country” (International Rescue Committee (9 October 2018) *A look into the mental health crisis in Syria*).

A publication issued in October 2018 by *Médecins du Monde* states that:

“...one in five Syrians are at risk of developing moderate mental health issues, and one in 30 is at risk of developing severe or acute mental health problems. Health services remain highly fragmented with no clear referral pathways for those who need specialized medical care” (Médecins du Monde (9 October 2018) *An Invisible Crisis: Exploring Mental Health Needs In The Syrian And Iraqi Crises*, p.2).

A report issued in August 2018 by *Syria Independent Monitoring* notes the

“...social stigmas around mental health and psychological care” (Syria Independent Monitoring (August 2018) *Protecting Healthcare in Syria*, p.39).

In March 2018 the *Centre for Strategic & International Studies* states in a report that:

“Syria is...facing a shortage of mental health professionals outside of psychiatry that focus on counseling interventions, which help promote protective factors for radicalization such as social support and cohesion...” (Centre for Strategic & International Studies (22 March 2018) *Mind the Gap: Why Mental Health Care Matters for Rebuilding Syria*, p.35).

In March 2018 the *World Health Organisation* notes, commenting on experiences of mental health workers the:

“...spiralling caseloads and the urgent need for more counsellors” (World Health Organisation (16 March 2018) *Seven years of grief: Syrian doctors and psychologists talk about the mental scars of war*).

In March 2018 the *World Health Organisation* states that:

“1 in 30 Syrians is suffering from a severe mental health condition, and at least 1 in 10 is suffering from a mild to moderate mental health condition as a result of prolonged exposure to violence. WHO is supporting the integration of mental health services into primary health care centres and community centres across the country. More than 400 health care facilities in Syria are now providing mental health and psychosocial support services” (World Health Organisation (16 March 2018) *Seven years of suffering: Syria facts and figures*).

A report issued in March 2018 by the *Office of the United Nations High Commissioner for Human Rights* states in the context of sexual violence that access:

“...to adequate and trusted mental health services remain extremely limited, particularly away from the main population centres in Syria” (Office of the United Nations High Commissioner for Human Rights (8 March 2018) *"I lost my dignity": Sexual and gender-based violence in the Syrian Arab Republic*, p.21).

In 2017 *Save the Children* states that:

“Before the war there were only two public psychiatric hospitals in all of Syria...for a population of more than 21 million people. There are estimated to be only around 70 psychiatrists working in the entire country, most of them in Damascus...” (Save the Children (2017) *Invisible Wounds*, p.17).

A paper issued in 2016 by *Epidemiology and Psychiatric Sciences* points out that:

“Conflict affected Syrians may experience a wide range of mental health problems including (1) exacerbations of pre-existing mental disorders; (2) new problems caused by conflict related violence, displacement and multiple losses; as well as (3) issues related to adaptation to the post-emergency context, for example living conditions in the countries of refuge. Some populations are particularly vulnerable such as men and women survivors of sexual or gender based violence, children who have experienced violence and exploitation and Syrians who are lesbian, gay, bisexual, transgender or intersex” (Epidemiology and Psychiatric Sciences (2016) *Mental health and psychosocial wellbeing of Syrians affected by armed conflict*, p.129).

This document states that:

“There is little research data on Syrian people with psychosis and other severe mental disorders. Most likely, the number of Syrians with psychotic symptoms will have gone up given the increase of risk factors, such as potentially traumatic events, forced migration and the breakdown of social support” (ibid, p.131).

References

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This response was prepared after researching publicly accessible information currently available to the Refugee Documentation Centre within time constraints. This response is not and does not purport to be conclusive as to the merit of any particular claim to refugee status or asylum. Please read in full all documents referred to.

Sources Consulted

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