



Photo: IFRC, Turkish Red Crescent Psychosocial team conducting activity with seasonal migrants

SMART PRACTICES FOR PROTECTING UNACCOMPANIED AND SEPARATED CHILDREN FROM SGBV THROUGH ACCESS TO HEALTH AND PSS IN LAST MILE LOCATIONS: TURKEY

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OBJECTIVE

The objective of the mission was to gather data on Turkey as a case study to support the IFRC in gathering data for the following tools:

- a) global study on smart practices for protecting unaccompanied and separated children (UASC) from sexual and gender-based violence (SGBV) through health and psychosocial services in last mile locations.
- b) global case study report on National Society actions to prevent and respond to child marriage in emergencies.
- c) Europe Region 3-day training toolkit on protection of migrant children.

METHODOLOGY

- 1) Meetings were held in Ankara and Izmir with Red Cross and Red Crescent Movement personnel (see appendix 1 for a list of key informants interviewed).
- 2) A literature review was conducted (see appendix 2 for a list of documents).

BACKGROUND

a) How many UASC are present in the country? How many are girls and how many boys? What is the age ranges of the UASC? Where do the UASC originate from? What factors are driving children to become UASC in the country?

Exact data is hard to know because some unaccompanied and separated children do not want to be identified in order to keep migrating outside of the country or out of fear related to their irregular status.

Most UASC in Turkey originate from places such as Syria, Iraq and Afghanistan, and some come from African countries. UASC are fleeing civil conflict, poverty and a lack of opportunities.

b) What risks for SGBV against UASC have been documented? Who is perpetrating the SGBV? Which populations of UASC are at highest risk? What specific SGBV risks have been identified for girls or boys?

A specific SGBV risk for refugee children in Turkey, and likely also UASC, is child marriage. This is a harmful traditional practice that is common in parts of Syria, especially rural areas, where refugees are arriving from. It has continued in Turkey although it is against the law. A rise in these practices is consistent with coping mechanisms observed in emergencies and crises. There are complex factors driving child marriage, which includes girls as young as 13 years being married to adult males. These include long-standing cultural practice, and coping mechanisms such as parents hoping to protect their children from harm and insecurity and an economic inability of families to care for large numbers of children.

c) What plans exist from child protection clusters, or similar inter-agency initiatives, to prevent or respond to SGBV especially in last mile locations? What government systems are in place to protect UASC from SGBV?

Within Turkey there exist national and regional protection working groups and child protection working groups. SGBV prevention and response is covered in these as a cross-cutting theme. The Turkish Red Crescent attends protection and child protection working groups nationally and regionally. SGBV prevention and response priorities include: Capacity strengthening plans for (I)NGOs and governmental agencies, developing SGBV training, and developing referral form for SGBV cases in order to provide data protection.

Unaccompanied minors and separated refugee children identified by Turkish authorities are placed and looked after in state shelters under the authority of the Ministry of Labor, Social Services and Families).¹

2. What existing smart practices exist among the National Society for providing access to basic essential health and psychosocial services to prevent and respond to SGBV against UASC in last mile locations?

a) What existing actions have been taken by the National Society, or partner agencies including health personnel, to provide access to health care or psychosocial support for UASC?

The Turkish Red Crescent is taking substantial and comprehensive action to protect and assist refugee children. While not all of their programming is focused exclusively on UASC, their interventions are available to UASC.

Community Centres

The Turkish Red Crescent manages a series of Community Centres in Şanlıurfa, İstanbul (both Anatolian and European Sides), Konya, Ankara, Kilis, Bursa, İzmir, Adana, Mersin, Gaziantep, Hatay, Kayseri, Kahramanmaraş and Mardin for both local people and displaced people. The Community Centers provide referral services, training, livelihood support, nutrition and health, social activities, advocacy and protection, volunteer activities as well as harmonization with local social and cultural activities, and through Child Friendly Space and Youth Friendly Spaces.

- Over 53,000 children have been reached since 2015 through the CFS in the Community Centres.
- 108,029 people are benefitted from protection activities,
- 128,737 people are benefitted PSS and health activities, and
- 17,023 people are benefitted from livelihood trainings and language courses.

Outreach to communities and supporting the needs of vulnerable populations is also part of the Community Centre function. Referral services are advertised to communities and intervention plans developed for populations, including children, that need particular assistance. The support can come from the Red Crescent or from local NGOs or the government.

The Community Centres and the outreach teams that are deployed from them are able to help identify and refer to the local government any UASC cases.

Ankara Sehat Serhat Onder Child Protection Center

In Ankara is a community centre specific to children, the Sehat Serhat Onder Child Protection Centre. At the Centre activities, workshops, seminars and trainings are organized under various topics to provide psychosocial support to girls and boys including through a Child Friendly Space and Youth Friendly

¹ Refugee Right Turkey. (2018). *Refugee Rights Turkey launches new project on unaccompanied minors*. <https://www.mhd.org.tr/en/activities/159-refugee-rights-turkey-launches-new-project-on-unaccompanied-minors>.

Space. The center also monitors the psychological and developmental processes of the children and activities are carried out by trained staff and volunteers. The meals from Turkish Red Crescent Ankara Branch Soup Kitchen are served to children who come to the centre both in the morning and in the afternoon. There is also shuttle service for children coming to the centre.

Child Friendly Spaces (CFS)

All fifteen Community Centres have CFS. In addition there are 19 CFS in temporary accommodation centres (similar to refugee camps). The CFS have reached over 500,000 children through 1.5 million activities since 2015. Each CFS in the protection camps is managed by two Youth Officers. The Turkish Red Crescent also manages two mobile CFS that stay at local, hard to reach schools for one month at a time and have an increasing focus on seasonal migration populations working in agriculture. The mobile CFS too are managed by two Youth Officers. The mobile CFS are now being adapted to be implemented as mini-mobile CFS that use smaller vehicles than the original two CFS and can access and be delivered in small villages.

UASC have access to the CFS and are registered through their government or alternative care guardians. Red Crescent CFS and child protection outreach teams make referrals for UASC and also conduct follow ups to determine the status and needs of UASC after they are referred to the government.

Protection Programme

Although the fact that there are many different projects in the programme, TRC has a comprehensive approach for Protection Programme and close relationship with Ministry of Labour, Social Services and Family since the protection mandate of state belongs to them.

Emergency Safety Network (ESSN)

The Emergency Social Safety Net (ESSN) programme aims to help the most vulnerable of these refugee families. The scheme provides refugees with an ESSN debit card which gives them access to a fixed amount of money every month. They can use the money to buy whatever they need most for their families: food, fuel, rent, medicine and bills. Refugee families receive 120 Turkish Liras (about 28 euros) per family member.

The ESSN card can be used in shops, just like a normal debit card. But it is not just a cash card. It's an acknowledgement that, despite their hardships, refugees should have the right to choose how to manage their lives.

ESSN Protection Component:

As ESSN cash part is responsible to get applications to project, to upload the payments to debit cards, to manage the operations with bank, to handle all the issues related to cash component; the focus of the protection component is to be make sure that all the protection need of the applicants or beneficiaries are referred to relevant authorities and covered.

Under the ESSN protection component:

- A "basic protection training module" was developed (it includes the modules "basic rights of people under temporary and international protection", "who is vulnerable people", "what are the referral mechanism for vulnerable people under Turkish system", "gender", "how to communicate with vulnerable people" and "self care, coping mechanism").
- The training was provided to all staff working under cash component
 - o Staff working in TRC service centers where the applications are taken

- Staff working in the staff as M&E
- Staff working in the call center
- A specific referral form was developed and introduced to cash staff in order to make them refer people with protection need to TRC protection staff in Community centers.
- Refreshment visits and workshops are done to trained staff
- Now the referral pathway between cash team and protection team are in place for more than 1 year.

The aims of the protection component are:

- To mainstream protection understanding to the biggest cash programme in Turkey (mostly in the region)
- To make sure that TRC staff complies with notification of obligation for child abuse and neglect in line with Turkish law (child marriage, child labor etc.)

To have a referral system in place to address the applicants and beneficiaries of ESSN which is more than 1.5 million

Conditional Cash Transfer for Education (CCTE)

In partnership with UNICEF, the Turkish Red Crescent is implementing the world's largest conditional cash transfer for education program (CCTE). In each city where a Community Centre is established outreach workers engage with at risk families and evaluate if they meet the criteria to participate in the program. Girls receive 40 lira and boys receive 35 lira each month from kindergarten to middle school and then 60 lira and 50 lira respectively while in high-school. Payments are made every two months although they are conditional on children not missing any more than four days of school per month.

CCTE Outreach teams are conducting household visits to those children who are not meeting the programme conditions and missing their schools and try to send those children back to school by addressing any protection risk.

CCTE projects are managed by a child protection team that includes a case manager, case workers, and an interpreter. These teams ensure that child protection problems, including domestic violence, child labour, bullying, and child marriage are identified and referred to relevant services. In addition, outreach workers support families to understand local school regulations and to prepare them to send children to school.

Nearly 45.000 children have been screened, reached through house hold visits and provided conditional cash transfers.

Data from the project needs more analysis but seem to indicate that children 10 and under consistently attend school however as children move into adolescence their attendance starts to drop and pressures to work and marry begin to intensify.

The reasons for children being drop out mostly:

- Peer bullying
- Children do not want to go to school since they have not gone to school for years, they cannot be registered to appropriate class (due to inconsistency between the age and level of education) and cannot adapt to school
- Language barriers
- Child labour (mostly for boys above 13-14)

Note that: not so many child marriages can be identified.

Special Needs Fund

The Special Needs Fund was created to support persons or their families to access basic rights and services, to reduce their dependence in their daily lives, to support them for having a dignified life, and to empower them.

The services provided under the special needs fund may be a one-time intervention focused on one need or a part of a comprehensive case management process in which more than one needs are combined.

This is an in kind assistance integrated to protection programme.

Restoring Family Links

The Turkish Red Crescent supports identification and reunification of UASC through its Restoring Family Links (RFL) services.

RFL includes reuniting UASC with their families, to trace the whereabouts of family, and/or to provide regular communication with family members.

The Government of Turkey refers RFL, specifically, family reunification, cases concerning UASC to the Turkish Red Crescent. The Red Crescent then conducts a version of the best interest of the child (BIA) assessments and based on that the government makes a best interest of the child determination (BID). BIA by the Red Crescent prioritize the perspectives and best interest of the child and also include assessments, through the relevant sister National Society, of the living conditions and perspectives of the child's parents/legal guardians when they are in another country.

Reunification requests of unaccompanied girls who are married has been a concern. In some situations unaccompanied adolescent girls have requested reunification with their 'husbands' who are adult males. However in these cases Turkish laws apply where marriages of any child 15 years or younger are not recognized (and Turkish Red Crescent cannot therefore support reunification). Children above 16, can only marry with the court decision and children above 17 can marry with parental approval and if certain other criteria are met. There have not been any cases of this age group seeking reunification with adult partners, however, if it were to occur the process would need clarification. This is a pattern across the Europe Region and requires more attention.

The another problem for RFL, mostly cross border family reunification between Syria, the lack of alternative care arrangements in Syria. When there is a family reunification request with a UASC in Syria, the family reunification process is long and there is a need for alternative care arrangements until the family reunification is realized.

TRC is a permanent co-chair of "National Family Tracing and Reunification Working Group". UNHCR, UNICEF and IOM are also participants of this group. Other organisations are selected as the other co-chair regularly.

TRC is also a member of “Whole of Syria- Family Tracing and Reunification Working Group”. It is a regional working group covering Syria, Lebanon, Jordan and Turkey and focusing on the UASCs in Syria. Coordinated by UNICEF.

Other activities by the Red Crescent include: conducting follow up visits to identify any needs after children have been referred to the governments, seeking accommodation for UASC, referring UASC to local health services, and providing them access to the Community Centres, CCTE, and other programmes it implements.

Psychosocial Support (PSS) and Health Programmes

The PSS and Health Programme of the Red Crescent aims to help children and adults regain their social functioning and to enhance healthy coping skills.

PSS services for refugee children include:

- Individual Interview and Group Therapy
- Health Trainings / Seminars
- Psychoeducation
- Access to health services
- Hygiene promotion

PSS and protection personnel have been oriented to the basics on SGBV prevention and response. In addition, further training using IFRC resources and local NGO professionals are planned to help staff and volunteers gain a greater depth of practical knowledge. This is especially important because the Red Crescent, in some places, is seen as the primary SGBV referral. Also, the Red Crescent helps to identify and support of cases through case management and outreach, so a good understanding of SGBV issues is critical. Through outreach it informs children and adults about available health, psychological, psychosocial, shelter/safe house resources.

As part of its psychoeducation, the Red Crescent also conducts through schools awareness to children, teachers and parents on bullying prevention. A standardized module to help staff and volunteers has been developed and covers anger management, intimacy, communication, self-identity, stress management, and personal boundaries. Other actions include organizing group discussions and providing individual support for children who are bullying others and also meeting with their families. The Red Crescent also supports teachers and parents who show bullying behaviours, which is a particular risk against Syrian refugees.

Protection systems

The Red Crescent is presently finalizing Standard Operating Procedures (SoPs) for Case Management, forms to support the SoPs, and an online database.

b) Has a mapping been completed of SGBV prevention and response agencies? Are SGBV referral mechanisms available? How accessible are the referral mechanisms considered?

TRC is integrated to the UNHCR mapping system. It is online and living document.

In all CCs, staff has their own mapping of existing services provided by (I)NGOs and government. However this is not specifically on SGBV or UASC but it includes the relevant governmental local agencies that are responsible for UASC or NGOs that have special focus on “human trafficking” for example.

c) How are the unique gender needs of girls and boys identified when providing health care or psychosocial services related to SGBV?

Protecting physical and psychological health for boys: Some parents force boys to work more than girls because of the gender expectations surrounding the role of boys. When working it can be challenging for boys to protect their physical and psychological health. For girls there are social restrictions that limit their opportunities for socializing with peers, making new friends, and accessing local psychosocial and health services, including sexual and reproductive health, on their own. It is a struggle even to have girls access Community Centres.

3. What are the main barriers facing the National Society to provide access basic essential health and psychosocial services related to SGBV prevention and response to UASC?

There are a number of barriers that limit provision of basic essential services to UASC. These include some children do not want to be identified, some are in hard to access locations, some do not find outreach engaging and avoid it, and other might find content around SGBV hard to discuss or too sensitive. Moreover, the government is the lead on protection of UASC and it is not always easy for non-governmental agencies to follow up to see if UASC needs are being fully met.

SMART PRACTICES THAT THE TRC AND IFRC CAN TAKE TO IMPROVE THE PROTECTION OF CHILDREN

The following actions are not designed to be comprehensive. Rather, they aim to reflect the capacity and existing priorities of the Red Cross and Red Crescent actors; the challenges related to security, resources, and access; and the focus on practical activities that are achievable within 1-2 years.

1. Develop and ensure briefings on internal child protection and safeguarding systems

1.1) The Turkish Red Crescent can create a Child Protection Policy for all staff and volunteers. This can be part of the now in-development Code of Conduct, for example as a detailed annex, or it can be a complementary, but separate policy. Either approach would include working across departments, including Human Resources and Legal, to gather advice on content; drafting a policy (IFRC has a template); approval from senior leadership; and then providing orientation to staff and volunteers.

1.2) The IFRC online child protection briefing can be translated into Turkish so it is accessible to all staff and volunteers.

2. Train personnel on key protection issues affecting children

2.1) IFRC, with local SGBV response service providers, can support Turkish Red Crescent's existing plans to train its volunteers and staff on SGBV prevention and response training that goes beyond basic content and focuses on the nuances and local realities that volunteers and staff face, key challenges, and practical solutions to support prevention and response activities.

2.2) Existing training on bullying prevention can be complemented by a focus on training on current evidence-based approaches and how to involve children and adolescent in solutions.

3. Test innovations to protect UASC in last mile locations

- 3.1) IFRC can partner with Turkish Red Crescent to ensure that Community Engagement and Accountability tools and processes are child friendly.
- 3.2) IFRC and Turkish Red Crescent video on reducing child marriage can focus on three key messages such as: child marriage is illegal, it has harmful health and psychosocial consequences for girls, and parents can make choices that reduce child marriage. It will be beneficial to recognize the dilemmas that parents face and to support healthy and safe solutions.
- 3.3) Turkish Red Crescent and IFRC can encourage the Europe Region RFL network to identify common solutions/standards around best interest of the child assessments, and standards for responding to requests for children to be reunited with their partners when the marriages are illegal in the host country and not recognized.
- 3.4) Embed for at least six months a PSS/protection worker in Izmir (or also other locations) to help provide basic education to children, PSS activities, support to mobile / seasonal context adults to access local basic essential services, and to help deliver health messages to adults and children.

4) Take a leadership role in sharing protection, including child protection, experiences and knowledge with other National Societies

- 4.1) Support neighbouring National Societies, through a twinning process, to implement CFS and Community Centre approaches. For example, consider twinning with Iraq Red Crescent who with the French Red Cross are starting a CFS; the Syrian Red Crescent who deliver CFS including mobile CFS; the Hellenic Red Cross that are implementing Multi-Functional Centres similar to Community Centres; and the Libya Red Crescent that may partner with IFRC and UNICEF to implement a Community Centre like model focused on children.
- 4.2) Collect and document in a PSS activity catalogue the activities that are delivered to children in outreach programming. This will allow PSS and protection teams across the country to enhance their work and better standardize it while also being a tool that can be shared with other National Societies.

5) Evaluate child protection programming.

- 5.1) Work with an independent, academic agency to conduct a quantitative evaluation of the Turkish Red Crescent Conditional Cash Transfer and CFS programming.

APPENDIX 1: KEY INFORMANTS INTERVIEWED

Red Cross and Red Crescent

- 1) Yasmina Peker, RFL Officer, Turkish Red Crescent
- 2) Bade Plak, Child Programme Officer
- 3) Onur Kutay Ozerturk, Child Programme Coordinatorship, Deputy Coordinator
- 4) Mine Akdoğan PSS Programme Manager, Turkish Red Crescent
- 5) Çağla Togan, Ankara Şehit Serhat Önder Child Protection Center Coordinator
- 6) Shafiquzzaman Rabbani, Integrated Programme Coordinator, IFRC
- 7) Sayeeda Farhana, Community Engagement and Accountability Delegate, IFRC
Ahmet Suat Erbişim-Manager,
Huriye Tak-Health and Psychosocial Support Officer and Clinical Psychologist,
Mert Özcan- Protection Officer,
Mehtap Narman-Social Services Specialist,
Fatma Şahin-Psychologist,
Eda Gez- Livelihood Programme Officer in İzmir Community Center

NGOs and United Nations

- 8) Meetings with UN agencies and local child protection agencies were sought but could not be arranged within the timeframe.

Project visits

- a) Ankara Sehit Serhat Onder Child Protection Center
- b) In Izmir accompanied household visit where Turkish Red Crescent provided mother and child attachment advice to 17 year old married girl.
- c) Visit to Torbali seasonal migration camp where child labour is common.

APPENDIX 2: RESOURCES INCLUDED IN LITERATURE REVIEW

Red Cross and Red Crescent Movement

- 1) IFRC Europe Operational Plan 2018
[file:///U:/My%20Documents/Downloads/Europe_Region_OP_2018%20\(1\).pdf](file:///U:/My%20Documents/Downloads/Europe_Region_OP_2018%20(1).pdf).
- 2) IFRC and TRCS proposal to the ECHO, Responding to the Protection Needs of Refugees in Turkey
- 3) IFRC, Child Protection Mission Report (2015)
- 4) IOD PARC. (2017). Turkey Country Baseline Study: Addressing Vulnerabilities of Refugees and Host Communities in Five Countries Affected by the Syria Crisis MADAD Programme: Final Report.
- 5) Turkish Red Crescent. (2018). Turkish Red Crescent Community Centers.
- 6) Turkish Red Crescent. (2018). TRCS Protection Programme Mapping.
- 7) IFRC Position Paper on Protection and Assistance for Children on the Move
<http://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2017/11/IFRC-Position-Paper-Children-on-the-Move-LR.pdf>
- 8) IFRC Smart Practices for Working with Migrant Unaccompanied and Separated Children
<http://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2017/11/UASC-Smart-Practices-Manual-Europe.pdf>
- 9) IFRC Strategy on Migration http://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2017/12/IFRC_StrategyOnMigration_EN_20171222.pdf
- 10) IFRC Policy on Migration <http://www.ifrc.org/en/what-we-do/migration/migration-policy/>
- 11) SGBV and IDRL <https://media.ifrc.org/ifrc/?s=SGBV>
- 12) IFRC Ten Migration Principles <http://www.ifrc.org/en/what-we-do/migration/migration-principles/>
- 13) Movement Policy on Internal Displacement <https://www.icrc.org/en/publication/1124-movement-policy-internal-displacement-resolution-no-5-2009-council-delegates>
- 14) Movement Resolution on Migration http://media.ifrc.org/ifrc/wp-content/uploads/sites/5/2017/01/R3_Migration_EN.pdf
- 15) Movement Resolution on SGBV: Joint action on prevention and response
http://rcrcconference.org/wp-content/uploads/sites/3/2015/04/32IC-AR-on-Sexual-and-gender-based-violence_EN.pdf
- 16) Movement Resolution on PSS http://rcrcconference.org/wp-content/uploads/2017/08/CoD17-10.1-MHPSS-adopted-R7_EN.pdf
- 17) IFRC Child Protection Policy http://www.rcrc-resilience-southeastasia.org/wp-content/uploads/2016/12/DOC-14-193_e_v100_child-protection-policy.pdf

External documents

- 1) <https://www.mhd.org.tr/en/activities/159-refugee-rights-turkey-launches-new-project-on-unaccompanied-minors>.
- 2) Save the Children. (2017). A Tide of Self-harm and Depression: The EU-Turkey Deal's Devastating Impact on Child Refugees and Migrants. https://www.savethechildren.ca/wp-content/uploads/2017/03/FINAL-Report_EU-Turkey-deal_-A-tide-of-self-harm-and-depression_March-20171.pdf.
- 3) Turkish Child Protection Laws
<http://www.asylumineurope.org/reports/country/turkey/guarantees-vulnerable-groups-0>

- 4) Girls not Brides: Turkey: <https://www.girlsnotbrides.org/child-marriage/turkey/>.
- 5) Girls not Brides: Child Marriage and Humanitarian Crises <https://www.girlsnotbrides.org/wp-content/uploads/2016/05/Child-marriage-and-humanitarian-crises-June-2016.pdf>.
- 6) Inter-Agency Minimum Standards for Child Protection in Humanitarian Action https://www.unicef.org/iran/Minimum_standards_for_child_protection_in_humanitarian_action.pdf
- 7) Inter-Agency Toolkit on Unaccompanied and Separated Children <https://resourcecentre.savethechildren.net/library/toolkit-unaccompanied-and-separated-children>
- 8) Inter-Agency Field Handbook on Unaccompanied and Separated Children <https://resourcecentre.savethechildren.net/library/field-handbook-unaccompanied-and-separated-children>
- 9) Global Compact on Safe, Orderly and Regular Migration <https://reliefweb.int/report/world/global-compact-safe-orderly-and-regular-migration-final-draft-11-july-2018>
- 10) Recommended Principles to Guide Actions Concerning Children on the Move and Other Children Affected by Migration <https://cdn2.sph.harvard.edu/wp-content/uploads/sites/5/2016/06/Principles.pdf>

APPENDIX 3: WEBSTORY:

Picture from title page of this report to be used

Protecting Child Refugee Labourers in Turkey

“We need more red and the yellow is finished,” shouts out a young boy as he and a group of twenty children huddle around a Red Crescent volunteer. Standing under one of the few shaded areas, they are mixing paints as they prepare for a psychosocial activity in the farming community of Torbali outside the coastal city of Izmir.

In Torbali Syrian refugees live in tents and work as seasonal labourers who stay a few months in a location before moving on. Boys and girls as young as eight years old also work in the fields in order to support their families. Fatima Şahn, a Turkish Red Crescent Psychologist, explains “The living conditions are not healthy and children do not go to school. We try to ensure these children who have so many risks have some help.” Many of the labourers work outside of the formal system because they do not have identity cards that allow them to access basic essential services like healthcare and education.

Child labour among refugees in agricultural farms or textile factories is a common problem that Red Crescent psychosocial and child protection teams come across all over the country. In many cases children work so they can help earn wages to support their families. In other situations, Syrian refugee girls and boys experience bullying from other children or teachers or other adults. This drives them away from school and leaves them with only labour as an option.

Red Crescent volunteers and staff reach out to child labourers with a number of humanitarian services. For example, when cases of child labour are identified the Red Crescent refers them to local legal authorities to access basic essential services, helps them sign-up for the Red Crescent Conditional Cash Transfer for Education program for families to encourage children to attend school, and delivers mobile child friendly spaces in these often hard to reach locations. Psychosocial support is a priority, as Fatima emphasizes, “The impact of psychosocial support is not always visible right away but it appears inside hearts. Changes in self-confidence, healing and resilience happen over time.”

The Red Crescent has also successfully advocated local authorities for the children and their parents to receive tents, vaccinations, and clean water.

In addition to labour, child marriage is a risk for most of the girls working in the fields once they turn 13 years old. In response, the Red Crescent works with families to persuade them against the harmful traditional practice and promotes education. When girls are married the Red Crescent helps them access health services, identify local grants to purchase basic goods, and it conducts psychosocial support including mother and child attachments sessions for girls who have babies.

Seventeen year old volunteer translator, Leen Ghannam, is herself a Syrian refugee. She has ambitions to become a children’s doctor and explains her motivation, “When we come the children become so happy. We try to work with them and the parents to make them safer, empower them and make a human connection.”

APPENDIX 3: TURKISH RED CRESCENT EXAMPLE FOR IFRC CHILD MARRIAGE CASE STUDY REPORT



Photo: Turkish Red Crescent, Psychosocial team conducting activity with seasonal migrant children

The problem

Child marriage is a harmful traditional practice that is common in parts of Syria, especially rural areas, where refugees to Turkey are arriving from.

Child marriage of adolescent girls has continued in Turkey although it is against the law. In Syria the legal age to marry is thirteen years. In Turkey it is eighteen years although children aged 17 can marry with approval from parents.

A rise in child marriage is consistent with coping mechanisms observed in emergencies and crises.² In Turkey, among refugees, girls as young as 13 years are married to adult males. There are complex factors driving child marriage among Syrian refugees. These include:

- a lack of decision-making and social power given to girls;
- girls being discouraged from attending school once they reach adolescence

² Girls not Brides. (2016). *Child Marriage and Humanitarian Crises*. <https://www.girlsnotbrides.org/wp-content/uploads/2016/05/Child-marriage-and-humanitarian-crises-June-2016.pdf>.

- the lack of options for a meaningful life for girls; they are confined to households to do chores, they have limited work opportunities;
- long-standing cultural practice;
- coping mechanisms such as parents hoping to protect their children from harm and insecurity; and
- an inability of families to economically care and provide for large numbers of children.

Turkish Red Crescent approach

Cases of child marriage are identified by the Red Crescent through the Community Centres, referrals from the government or other agencies, through community outreach activities, or through monitoring of the Conditional Cash Transfer for Education program where families are provided funds each month to encourage girls and boys to attend school.

The Turkish Red Crescent provides a number of interventions to address child marriage among Syrian refugees.

When a risk of child marriage is identified, the Red Crescent first conducts a household visit with the family of the girl to confirm the details then notify the Ministry of Labour, Social Services, and Family. If there is a pending threat to the child the Red Crescent will keep the child at the Community Centre (if that is where the risk was disclosed) until the police come and take the lead.

For each case that is identified, the Red Crescent conducts an internal review on risks, threats, and capacity. Then where needed, the Red Crescent develops a support plan.

Prevention activities include:

- education on prevention of child marriage to children and adults. For adults the focus is on conversations with groups of men and women. Discussions centre on childhood memories of the adults, what children's basic needs are, and then how adults see child marriage and what risks it poses for children. The adults leave committing to take specific actions to promote the prevention of child marriage.
- where a marriage is planned but the girl is not yet married the Red Crescent holds meetings with the child and her family to persuade them toward finding alternative solutions.

In terms of response, when a girl has already been married, the Red Crescent activities then include:

- referral to Ministry of Labour, Social Services, and Family;
- holding meetings with the girl, her partner, and her in-laws to determine what options are available;
- house hold visits to provide PSS support to the girl and her children if she has children;
- help for accessing Red Crescent or government in-kind support like the IPA or SNF or financial aid like through CTE or ESSN.
- where girls have children support is provided on mother and child bonding and linking the child mother to mother and child support groups.

The Turkish Red Crescent and the IFRC are now developing a Community Engagement video on protecting girls from child marriage. It will include key messages such as: child marriage is illegal, child marriage has harmful consequences for girls, and although parents face dilemmas and are seeking to protect girls there are healthier and safer options than child marriage.

Challenges

It is very difficult to end a child's marriage once it has occurred. This is due to social pressures on the child and her family, the social stigma that would follow the child into the future, the limited options available to the child and her own children if she were to leave her partner, and often a limited desire among girls to be separated from their partners. Therefore, in these situations the Red Crescent focus is on ensuring a healthy and safe situation for a girl, and her own children if she has them, once she is married.

Key learning

- 1) Prevention is key. After the fact child marriage is very hard to address and the focus then shifts to mitigating risks for girls and their children.
- 2) Parents are key decision makers around when and who girls will marry. Parents are often motivated by caring motivations and face social dilemmas that need to be understood. Alternative solutions other than marriage need to be promoted to parents.
- 3) Outreach to vulnerable households is essential to reduce risk and to intervene. Many of the children who are married come from disadvantaged, isolated, or relatively hard-to-access populations among the Syrian refugees.

Our character is written by our mothers. So if we do not have a good relationship with our mothers we do not learn the right things and are less safe. So healthy children and families means not marrying when a girl is still a child.

We want to respect the decisions of others. But when we see harmful practices that can make children less healthy we need to speak up.

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