

Horses get scarred refugee children back in the saddle

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Fritzi is squat, wide in the hips and rather stubborn. Lucky is an imposing tower of muscle. But with their big brown eyes and endless patience this odd couple works wonders.

That's because they are two of four specially trained horses cheering up, in picture-postcard scenery outside Innsbruck in Austria, a group of refugee <u>children</u> who have gone through some tough times.

According to Claudia Baldeo from charity Ankyra who started the project in 2009, the benefits of stroking, leading and riding the animals quickly become clear.

"It has a lot to do with sensitivity and feeling, being sensitive enough to receive signals from the horse. It is also good for learning concentration and tackling fears," she told AFP during a recent session.

"The parents notice as soon as they get home that the children are calmer, better able to concentrate. Even a year later they remember the names of the horses," the psychologist and psychiatrist said.

"Well done!" she says as one boy, grinning from ear to ear, leads the mighty Lucky round the training area. "Hossein says his grandfather has a donkey, and that a horse is just another donkey," she laughs.

Trauma



This summer's course, which combines time with the horses and art therapy, has 10 children, from Iraq, Afghanistan and Iran, aged nine to 11.

All arrived in Austria with their families in the past year during the great wave of migration from the Middle East into Europe.

Demand for the project is high but Ankyra has to limit numbers, and those most in need of therapy were chosen. Some then go on to receive extra therapy if needed.

What horrors Hossein, Mohammad, Reza, Ramin, Yousef, Banin, Zahra, Sarina, Marjam and Zinap may have experienced in their home countries or on the dangerous journey isn't always known.

But it is clear that some went through hell, and are suffering still.

"The whereabouts of the sister of that boy over there for example are not known," Baldeo says. Another girl in the group often sits in a corner at home and weeps. Her mother has attempted suicide.

"Parents tell us that they were in war zones and saw injured people, dead people, that family members disappeared," Baldeo says.

She says that children often pick up on the distress of their parents, who can be suffering from <u>post-traumatic stress disorder</u> (PTSD) having been imprisoned or tortured.

"They don't themselves have some way to recover. This was the aim of the project," Baldeo said.

Drop in the ocean



Equine-assisted therapy (EAT) has been widely used for years to help treat a range of disorders, but using it for refugee children is unique in Austria, and possibly elsewhere too.

But while these few kids in Austria may be getting help, it is just a drop in the ocean as Europe struggles to absorb the more than a million migrants who arrived last year, children and adults alike.

The German federal chamber of psychotherapists (BPtK) estimated last September that at least half of the new arrivals have poor mental health but that the care they receive is woefully insufficient.

"The refugees arriving don't just need accommodation and food but also medical care. But practically no mentally ill refugee is getting adequate care," said BPtK head Dietrich Munz.

The potential dangers of failing to take this seriously was plain to see in recent attacks in Europe where some of the perpetrators—some of them refugees—appear to have had psychological problems.

Such cases are extreme and of course it is by no means just migrants who have <u>mental health problems</u>.

And being traumatised doesn't necessarily lead to longer-term mental health problems, and many people recover without treatment, particularly if they can lead a normal life again.

"Sometimes having a job and having a home is more beneficial than living in a refugee centre for three years with a therapist who can only listen and say 'I hear you'," Baldeo said.

"The questions they have is when can I work, how can I ensure a good education for my children... These are not therapeutic issues but



integration issues."

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